

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY094
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Name of Service:	Hyde & Seek Childcare (Millbourne)
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Address of Service:	1a Millbourne Avenue, Drumcondra, Dublin 9.
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Name of Registered Provider:	Siobhan Davy
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	20/03/2025
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No of pre-school children:	AM	20	PM	16
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St John's Road West, Kilmainham, Dublin 8 , D08 X01F
Inspection undertaken by:	E. Griffin and L. Jameson
Title:	Early Years Inspectors

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable	Not applicable.
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Description of service

Hyde and Seek (Millbourne) is one of four services operated by the registered provider. It is a privately operated service located in a residential area in Dublin 9. The service is registered to provide a sessional, part time and full day care service to a maximum of 28 children aged from 1 to 6 years, from 7.30am to 18.30pm. However, the service is currently operating from 8.15am to 6pm Monday to Friday.

The service operates from a two-storey building which has three care rooms, two of which were in use as an early years' service on the day of inspection. The Toddler room and the Montessori 1 room which are located on the ground floor along with sanitary accommodation and an office area. The third care room which is located on the first floor next to the kitchen was used to provide a school aged service during the afternoon of the inspection. There is an enclosed outdoor play area available to the rear of building.

Staffing

The registered provider employs nine staff within the service to include the designated person in charge, the deputy designated person in charge, five childcare staff, one administrator, one school age staff and a cook. On the day of the inspection the person in charge, four childcare staff, one school age staff and the cook were present. The registered provider and the service administrator arrived shortly after the inspection began and remained on site to help facilitate the inspection process.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation

- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under

- Regulation 9(1)(2)(3)(4)(7) Management and Recruitment
- Regulation 16(1)(k)(3) Records in relation to the Preschool Service
- Regulation 19(1)(b)(3) Health, Welfare and Development of child
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child

As a result, the scope of the inspection included the Toddler and the Montessori room. A sampling process was used to assess compliance under: Regulation 9 (7), Regulation 16, Regulation 19 and Regulation 23.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

The inspection was triggered as a result of information received by the inspectorate.

An internal referral was made to the Child Safeguarding Statement Compliance Unit for a review of the service safeguarding statement.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, administrator staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.*

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

- (a) the policies, procedures and statements of the service specified in Schedule 5;
 (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and
 (c) these Regulations.

Compliance Information

- (1)(a) The service had a designated person in charge and named person to deputise as required.
- (b) A review of the roster showed either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.
- (c) There was a clear management structure in place, and staff reported being aware of this.
- (2) A review of the roster and discussion with the registered provider established there were four adults new to the service since the last inspection on the 30 March 2024. The files of the registered provider, the person in charge, the administrator and four new adults were reviewed as part of the inspection process along with two adults whose files had not been previously reviewed. The registered provider had completed the following checks:
- (a) Ten validated written references were available from recent past employers.
- (b) Eight validated written references were available from a source other than a past employer.
- (c) Garda vetting disclosures were available for nine adults. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.
- (d) Documentary evidence showed that eight adults had lived in a state other than Ireland for more than six consecutive months as an adult. International police vetting from the relevant countries was available for seven staff members.
- (4) There was documentary evidence available that the eight adults who worked directly with children attending the service held a qualification deemed eligible by the Department of Children, Equality, Disability, Integration and Youth Affairs.
- (7)
- (a) A review of documentation and discussion with staff showed that the registered provider ensured that all employees were appropriately supervised and provided with appropriate information and where necessary training. The files of eight adults were reviewed, four of whom were new to service since the last inspection. Evidence demonstrated that the registered provider ensured that there was an induction

process for all new adults and that there was ongoing supervision and training process for adults employed. New adults employed as part of their induction were:

- given a guided tour of the service.
- shown an induction PowerPoint presentation which contained key policies, information about the service including important topics such as dress code, confidentiality, child protection reporting, complaint handling, accidents and incidents and communication with parents.

(b) The four new adults ticked a box to confirm that they had read the policies and procedures of the service. The adults reported to the inspection team that they been given time to read the policies and procedures and had been provided with information and had received training on the policies and procedures in the service required under Schedule 5.

(c) There was documentary evidence available to show that staff were provided with individual support and supervision sessions. In addition, staff had been provided with information and training on topics including interactions, behaviour management, health, hygiene and safety.

This was in line with the service staff training and supervision policy which were reviewed on the day.

Non-Compliance Information

(2) (d) Documentary evidence showed that one adult had lived in three different jurisdictions other than Ireland for more than six months as an adult. International police vetting was not available for one of the three jurisdictions.

(3) Documentary evidence available showed that the checks outlined in (2)(d) had not been carried out prior to one adult having contact with the children in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2) (d) This was an isolated incident where the staff member provided inaccurate information, despite HR obtaining two international vetting's. Employee applied for the required police vetting 2 April 2025.

Management have added a formal residency declaration to our employee details form, ensuring all residency information is confirmed by the applicant before employment begins.

(3) As evidenced in previous inspections, the service maintains a robust system for staff vetting and employee file checks. This relates to a single, isolated incident in which a staff member provided inaccurate information regarding their residency history. Based on the information confirmed by the staff member during the recruitment process, we were not aware that the police vetting was required. Management have added a formal residency declaration to our employee details form, ensuring all residency information is confirmed by the applicant before employment begins.

Supporting documentation submitted

- Documentary evidence of police vetting application.
- Documentary evidence of staff member updated Curriculum Vitae.
- Documentary evidence of police vetting certificate for the staff member.

Summary Comment

The corrective and preventive actions proposed by the registered provider are sufficient to address the non-compliances under Regulation 9.

Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

(4) Subject to paragraph (5), where a registered provider contemporaneously provides-

(a) a sessional pre-school service, and

(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).

Compliance Information

The registered provider ensured the following.

(1) On the day of inspection there were an adequate number of adults working directly with the children attending the service to meet their care needs. There were three adults caring for the twenty children present on the morning of the inspection. There were two adults caring for the sixteen children present in the afternoon. In addition, the person in charge and the registered provider were available to provide support in the care rooms where required.

(4) The adult to child ratios were maintained correctly throughout the inspection.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

(k) details of any accident, injury or incident involving a pre-school child attending the service.

(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.

Compliance Information

(1) (k) A review of ten records of previous accidents and incidents that occurred within the service since the last inspection on 30 March 2024. These records were available on an electronic application or in hard copy and were completed in line with regulation.

(3) Records within the specified dates were open to inspection by an authorised person.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

The registered provider ensured that.

(1)(b)

- Children were offered breakfast between 8.15am to 9.00am. The service also provided a morning snack and two hot meals which were prepared onsite by the in house cook. Lunch which is brought from home is provided to the children in the Montessori 1 room at 10am. Different dietary requirements were catered for if required and additional food was observed to be available, for example, dinner consisted of pork in white sauce and mash were served at 11.30am and an alternative vegetarian option of tuna pasta

was available. For afternoon snack a pea risotto was served, Children were observed to be given extra portions and water was available in each care room for the children to drink.

- Mealtimes observed were sociable events, staff chatted to the children and children were encouraged to self-feed and staff were on hand to help as required, supporting independence and wellbeing.
- Children were observed to have the freedom to move freely in their care room and independently choose their activities and play experiences. Activities and materials available were suitable for the age and stage of the children in the care rooms.
- Language used by staff was observed to be kind and supportive during nappy changing procedures. For example, during the four nappy changing procedures observed the children were spoken to in a reassuring and friendly manner throughout the nappy changing procedure.
- Staff comforted a child who was settling in when they appeared upset. Staff members offered cuddles and sat close to the child during activity and mealtime and offered support where required.
- All children were observed to spend time in the outdoor play area.
- Parents/guardians were given information on their child's food intake, toileting and sleep via an electronic communication application.

(3) Documentary evidence was available to show that all staff had completed child safeguarding training. The adults reported to the inspection team that they had been made aware how to identify any child protection concerns and the reporting procedure of practices that were disrespectful or harmful to children. This was in line with the service code of behaviour for staff which was reviewed on the day.

Part VI – Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

General Safety:

- The entrance door leading into the premises was appropriately secured to prevent children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises.
- The outdoor play area was secure reducing the risk of children from exiting unsupervised and to restrict unauthorised persons from gaining access to this area.
- The kitchen was not accessible to the children and the door remained closed throughout the inspection.
- The radiators had protective covers. This prevented a child from being injured from the heat source.
- Blind cords were secured safely out of reach of the children.
- The doors in the care rooms had finger protector covers.
- There were no flexes or cables observed that were accessible to the children.
- Cleaning agents were stored safely out of the reach to the children.

Infection Control:

- In the Montessori 1 room perishable snacks such as yoghurt and cheese brought by the children from home for morning snack time were observed to be stored in a fridge reducing the risk of bacteria multiplying.
- The sanitary areas, nappy changing facilities and one of the care rooms were equipped with liquid soap, warm water and hand drying facilities. The children were observed to be familiar with the routine to wash their hands before mealtimes.
- Foot pedal operated bins were available in the care rooms and sanitary areas to allow hygienic disposal of contaminated materials.
- Soothers used within the service were stored in individually labelled boxes.
- Individual bed linen was used for the sleeping children and staff were familiar with the washing schedule.
- Soft floor mats were positioned 50 cm apart, as per best practice guidelines to reduce the potential risk of cross infection
- Windows in the care rooms were observed to be open which allowed for circulation of air and reduced the risk of cross infection.

Administration of Medication:

- Anti-febrile medication for children was individually labelled and kept in its original box and was observed to be stored safely out of the reach to the children.

Safe Sleep:

- Shoes and clothing such as jumpers, hooded sweatshirts and socks, were removed from children at sleep time.
- An ambient temperature of 18-22°C was maintained for sleeping children over one years old in care rooms.
- Staff were observed to physically check sleeping children and on review of the information recorded by staff on the electronic application, staff completed ten-minute sleep checks while the seven children slept which included each child's colour, breathing and position and the temperature of the care room.

Fire Safety:

- Staff ensured the details of each child's attendance was recorded accurately and all fire emergency exit doors were clear from obstruction.

Non-Compliance Information

General Safety:

1. Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting. This posed a potential safeguarding concern.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

2. Staff who have been working with the service for three years and require Garda vetting renewal will now have their applications submitted one month in advance to ensure there are no gaps in vetting going forward. The admin team have implemented a Garda vetting tracker system with an alert to monitor expiry dates and ensure timely renewals to avoid any gaps.

Supporting documentation submitted

General Safety:

- Documentary evidence up to date Garda Vetting for the staff member.

Summary Comment

The corrective and preventive actions proposed by the registered provider are sufficient to address the non-compliances under Regulation 23.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.

Compliance Information

The provider ensured the following:

- (1) There was a complaints policy maintained which outlined the following:
- (a) The procedures to be followed when making a complaint.
 - (b) The way complaints would be dealt with.
 - (c) The procedures for keeping the complainant informed on how the complaint is being dealt with.
- (2) The registered provider ensured:
- (a) A record of complaints was maintained.
 - (b) That complaints were handled in line with the service policy.
- (3) A review of records referred to in (2)(a):
- (a) The registered provider advised there had been one complaint received since the last inspection in March 2024. This record was reviewed. The record detailed the nature of the complaint and how it had been handled and closed off. This was in line with the service policy.
 - (b) The complaint record book was made available for review by the inspection team and included the required information.