

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY313
Name of Service:	Giraffe Childcare Milltown
Address of Service:	Mount St Anne's, Milltown Road, Milltown, Dublin 6, Co. Dublin
Eircode:	D06 E6R6
Name of Registered Provider:	Dearbhala Cox Giffin
Service type:	Full Day Care
Day 1 of Inspection:	23/07/2024
Day 2 of Inspection:	24/07/2024

No of pre-school children 23/07/2024:	AM	80	PM	79
No of pre-school children 24/07/2024:	AM	81	PM	79

Address of the Early Years Inspectorate:	Tusla – Child and Family Agency, Trinity Building, IDA Business Park, Bray, Co Wicklow
Inspection undertaken by:	Mary Redmond and Helen Bourke
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

The service is a large private childcare facility which is one of a multiple of twenty-three services operated by the registered provider; this service was established in 2007. Full day care is provided for children ranging in age from one to five and a half years of age. The service is normally open from 7.30am until 6pm Monday to Friday but is temporarily operating from 8am to 5pm for the summer months.

The service is located at ground level and operates from an adapted premises in a multi-use complex in a residential area of south county Dublin. Care was delivered across seven care rooms during this inspection. Two cot rooms were provided, and cots were also available in two areas adjacent to care rooms where the youngest children attending the service were accommodated. An enclosed outdoor space with an impact absorbing covering was provided to the front of the premises. A variety of play equipment including fixed climbing structures were available to children in this area.

Staffing

There were nineteen adults employed to work with pre-school children including the manager who was not assigned to a care room but was available to assist when required. An area director was present to support the inspection process. Five adults who were not on the roster arrived from other services operated by the registered provider after the inspection had commenced. Ancillary staff were also employed for cooking and cleaning duties. Adults employed to work directly with pre-school children had attained major awards in Early Childhood Care and Education at a minimum of Level 5 on the National Framework of Qualifications, or qualifications deemed by the Department of Children, Equality, Disability, Integration & Youth (DCEDIY) to be equivalent. Two adults who did not have the required qualification had Letters of Qualification Recognition which had been issued by the DCEDIY.

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 governance and safety and can focus on other areas as required. The inspection plan was to assess compliance under the following regulations:

Regulation 9 Management and recruitment

Regulation 11 Staffing levels

Regulation 23 Safeguarding health, safety and welfare of child

Regulation 26 Fire safety measures

The following regulations were not part of the inspection plan and for this reason the non-compliances have been reported:

Regulation 16 Record in relation to pre-school service

Regulation 29 Premises

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 reoccurring. 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.

Acknowledgments

The inspectors wish to acknowledge the co-operation of the service manager, area director and staff members who facilitated the inspection and children who were present during the inspection process.

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.*

(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.

Compliance Information

- (1)
- (a) There was a designated person in charge and a named person to deputise as required.
 - (b) The designated person in charge was present for this inspection.
 - (c) There was a clear management structure in place which identified the roles and responsibilities of each employee.

The files for twenty-nine adults employed by the registered provider were reviewed. This included ancillary staff and adults employed in other services who were present for this inspection.

- (2)
- (a) There were written validated references available from previous employers for adults employed in the service.
 - (b) Suitable references from other sources were also available for adults as required.
 - (c) Garda vetting disclosures dated within the last three years were available for all adults.
 - (d) Police vetting was available for twenty-six adults who had resided outside the State for a period longer than six consecutive months.
- (4) There was evidence that twenty-three adults had attained at least a major award in Early Childhood Care and Education at Level 5 on the National Framework for Qualifications, or a qualification deemed to meet the regulatory requirement.

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.

Compliance Information

(1) There were an adequate number of adults working directly with children attending the service. There were nineteen adults working directly with eighty children on the first day of inspection and eighteen adults available to work directly with eighty-one children on the second day of inspection.

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 to the service was secured to prevent unauthorised access and a second door was secured to prevent children exiting unsupervised. Toys and play equipment observed in use by children on the day of inspection were safe and in good working order. Cleaning products and hazardous materials were stored securely out of reach of the children. There were no trailing flexes or cables observed and medicines were stored safely. There was evidence that accident and incident forms were systematically reviewed and risk rated to mitigate the risk of minor injuries to children attending the service. Adults were aware of procedures to safely evacuate the premises in the event of a fire or other emergency.

Infection Control:

Children's hands were washed before eating and after outdoor play. Good hygiene practices by adults were observed including washing their hands after cleaning children's noses, handwashing before serving food to children and cleaning tables before and after children ate from them. Soothers were cleaned and stored in individual boxes. Cot sheets and other linen used for children was laundered and stored appropriately

Administration of Medication:

Adults described procedures which were in place to ensure that medication was administered safely to children. A manager or supervisor must always be present when medication is being administered. Adults were aware that prior written consent was required and that parents are informed after their child has received any medication. These practices were evidenced by documentation available and reviewed on inspection.

Safe Sleep:

The temperature of the cot rooms and other areas where young children were sleeping was maintained below 20 degrees Celsius. All sleeping children were physically monitored and sleep checks were accurately recorded every ten minutes.

Non-Compliance Information

Infection Control:

1. The hands of young children were not washed after nappy changing in the Serengeti room and in other rooms children's hands were cleaned with cotton wool and water which is not effective for infection prevention and control.
2. There was no foot pedal operated bin for the correct disposal of waste in the sanitary area adjacent to the Safari room.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

1. The staff team have undergone further training in the practices of handwashing and infection control measures. The staff will assist the children with the handwashing process where the children will use the low-level sink units within the changing areas to wash their hands under running water, soap will be provided and hand towels use to dry off. The Management team will continue to monitor and support the staff team and provide on-going training in the area of good handwashing hygiene practices.
2. Following the inspection a new foot pedal bin was purchased and replaced in the safari room. The Management team will check and monitor that all pedal bins are in each base room and working correctly.

Supporting documentation submitted

Infection Control:

Points 1 & 2

Photographic evidence of a signed training sheet in handwashing techniques, a new low sink and new a foot pedal bin were submitted with the CAPA response.

Summary Comment

The non-compliances found on the day of inspection in relation to Regulation 23 Infection Control have been addressed and will be reviewed on the next inspection.

Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-
- (a) any fire drill that takes place in the premises, and
 - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.

Compliance Information

- (1)
- (a) There was a record available of fire drills which had taken place; the last recorded fire drill was 8 July 2024.
 - (b) There was a record to show that the firefighting equipment had been serviced in April 2024 and annual servicing of the fire detection system had taken place on the 19 April 2024.

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:
- (i) details of staff rosters on a daily basis;

Non-Compliance Information

(1)

(i) The staff roster did not reflect adults who were due to be present on the first day of inspection. On arrival of the inspection team the manager was not aware of who or how many adults would be providing cover for breaks. Five adults who were not on the staff roster subsequently arrived at the service. On the second day of inspection the staff roster had not been updated to reflect four adults who were working in the service when the inspection team arrived. The roster demonstrated that four adults were on planned leave but no provision had been made on the roster as to how the planned absences were to be covered.

An accurate staff roster is required to demonstrate how the registered provider plans to provide care for children attending the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

We note the loophole in recording this information on the weekly roster. Going forward the service will maintain and manage staff's leave accurately and assure that there is enough staff to maintain the running of the centre and care for attending children. The management team will ensure to review and plan annual leave more effectively throughout the centre. They will also ensure that any cover support will be recorded on the weekly roster.

Supporting documentation submitted

Photographic evidence of a revised and up to date staff roster was submitted with the CAPA response.

Summary Comment

If the revised roster is maintained this will address the non-compliance found on the day of inspection in relation to Regulation 16. This will be reviewed on next inspection.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-

(c) kept adequately lit, heated and ventilated

Non-Compliance Information

(c) 1. Room temperatures varying between 23.4 and 27 degrees Celsius were recorded at various times throughout the inspection in the Serengeti, Madagascar and Safari rooms. This is above the

recommended range of 18 to 22 degrees Celsius for care rooms. The ambient outdoor temperature at the time was approximately 18.2 degrees Celsius.

2. The sanitary area adjacent to the Serengeti room was poorly ventilated resulting in a malodour throughout the day in this area.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(c)1. The staff team have received further training on actioning corrective measures to lower the room temperatures, the maintenance department have fitted aircon units to support the raised temperatures within all rooms mentioned. The management team will monitor the base room temperatures and provide corrective measures where needed, this information will be recorded, and the maintenance team will provide further resources to aid this matter.

2. This area was thoroughly cleaned by the housekeeper, so the matter was rectified following the inspection. The head of maintenance has requested a full service of the ventilation to ensure the system is working correctly. The management team will carry out regular check of these areas and report any underlining issue to the maintenance for further review and solutions if the matter persists.

Supporting documentation submitted

(c)Point 1

Photographic evidence of a new air conditioning unit was submitted with the CAPA response.

Summary Comment

The evidence submitted and the actions taken will address the non-compliances found on the day of inspection in relation to Regulation 29 (c). These will be reviewed on next inspection.