

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier: TU2015DY314

Name of Service: Giraffe Childcare Harcourt

Address of Service: Iveagh Court, Harcourt Road, Charlemont Street, Dublin 2, Dublin.

Eircode: D02 PN59

Name of Registered Provider: Dearbhala Cox Giffin

Service type: Full Day, Part Time, Sessional

Date of Inspection: 06/01/2026

No of pre-school children:	AM	80	PM	79
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Address of the Early Years Inspectorate: Early Years Inspectorate
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The Nexus Building
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Inspection undertaken by: C. Harte and T. Nelson

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

Description of service

Giraffe Childcare Harcourt is a privately operated full day care service located in a purpose-built building in Dublin 2. The service is one of 24 childcare services operated by the registered provider. The service is registered to care for 110 children aged 0-6 years Monday - Friday. The service participates in the Early Childhood Care and Education (ECCE) Scheme. The premises includes nine care rooms, three cot rooms, a kitchen, sanitary facilities, and an enclosed outdoor play space. Three care rooms are located at the basement level, one care room on the ground floor and four care rooms on the first floor.

The care rooms include:

Room name	Age group
Wobbler Safari	13 - 15 months
Wobbler Acacia	Closed the day of inspection
Wobbler Cameroon	1 year 8 months - 2 years 2 months
Wobbler Namibia	1-1 year 6 months
Toddler Masi Mara	1 year 11 months - 2 years 3 months
Toddler Serengeti	2-2.5 years
Toddler Botswana	2.5 - 2 years 11 months
Preschool Kenya	3-4 years
Preschool Madagascar	4-5 years

Staffing

The registered provider currently employs 25 staff to work in the service including the designated person in charge and two deputy persons in charge, 19 early years professionals, one auxiliary staff, a chef and an area director who works across other premises owned and operated by the registered provider. On the day of the inspection there was 22 staff present including the area director, designated person in charge, two deputy persons in charge, the chef, and 17 working directly with the preschool children.

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, safety and premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under regulations

- Regulation 9(1)(a)(b)(c), (2)(a)(b)(c)(d), (4) Management and Recruitment.
- Regulation 11(1), (2) Staffing Levels.
- Regulation 16(1) Record in Relation to a Pre-school Service.
- Regulation 19(1)(a)(b) Health Welfare and Development of Child.
- Regulation 23 Safeguarding the Health, Safety and Welfare of the Child.
- Regulation 27 Supervision
- Regulation 32 Complaints

however, on inspection additional non-compliance which posed a risk was identified under Regulation 29 Premises. These findings are outlined within the relevant regulation within this report.

A sampling process was used to assess compliance under Regulation 19 and Regulation 23. As a result, the scope of the inspection included Wobbler Namibia, Wobbler Cameroon, Wobbler/Toddler Serengeti and Wobbler Masai Mara.

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.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the area director, person in charge, 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.

(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) The service had a designated person in charge and two named persons to deputise if required.
 - (b) A designated person in charge was available on the premises on the day of inspection for the operating hours of the service.
 - (c) There was a clear management structure in place and staff were aware of their roles and responsibilities.
- (2) A review of paperwork and discussion with management confirmed there was 11 new staff members employed since the last inspection 27 February 2025. The full files of 11 new staff members and garda vetting of one existing staff member was reviewed. The registered providers had completed the following checks:
- (a) Thirteen written and validated references were available from past employers.

- (b) Nine written and validated references were available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for all adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
 - (d) Police vetting was available for ten adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (4) Evidence was available to show that eleven staff members who worked directly with the children held 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.

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.*
- (2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

Compliance Information

- (2) The minimum adult child ratios were maintained correctly during the inspection.
- 17 staff were caring for 80 children during the morning on the day of the inspection.
 - 16 staff were caring for 79 children during the afternoon on the day of the inspection.
- The management team were also available in a supernumerary capacity to support in rooms as required.

Non-Compliance Information

- (1) The registered provider did not ensure an adequate number of staff were available to meet the care needs of the children between 1.40pm - 1.49pm. One staff member was caring for a group of children transitioning from sleep. The staff member was unable to adequately meet the needs of children during this time as awake children caused disturbance to those who were still sleeping and engaged in risky behaviours. It is acknowledged that the staff member called for support at 1.40pm.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) An overall review of transitions, age and needs of the children took place, and a new routine was put place to ensure additional support from part time staff and management in particular rooms. The busier transitions times and particular rooms are closely monitored and supported by the part time staff and management team who are supernumerary in the centre. Additional staff have also been recruited and are due to start this month.

Supporting documentation submitted

Training card.

Training certificates.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 11 has been addressed.

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:

- (a) the name, position, qualifications and experience of the person in charge and of every other employee, unpaid worker and contractor;*
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;*
- (c) details of the adult:child ratios in the service;*
- (d) the type of care or programme provided in the service;*
- (e) the facilities available;*
- (f) the opening hours and fees;*
- (g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*
- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*

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

Compliance Information

(1) The registered provider ensured the following records were maintained:

- (a) Details of the name, position, qualifications, and experience of all staff were maintained within the staff files.
- (b) The service Tusla certificate which was displayed in the office and detailed the class of service and the age profile of children for which the service is registered to provide services.
- (c) (d)(e) The service policy handbook outlined the adult: child ratios, type of care provided and the facilities available within the service
- (f) The opening hours and fees of the service were outlined in the policy handbook and displayed in the office.
- (g) The registered provider maintained all the policies required in accordance with Regulation 10.
- (h) Attendance records detailing the daily arrival and departure of the children were maintained on a software application and available in the care rooms.
- (i) A record was maintained of the staff roster which was reflective of the staff present on the day.
- (j) Following a review of a sample of twenty records, the registered provider ensured a full record in writing was maintained for the administration of medication.
- (k) Following a review of a sample of twenty records, the registered provider ensured a full record in writing was maintained for accident and incidents.

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-

- (a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and
- (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.

Compliance Information

(1) (b) The following practices were observed to be in place to support the children attending:

- Staff were observed to interact with the children in a warm and sensitive manner. They joined children on the floor during play and engaged them in conversation during care practices such as nappy changing.
- Mealtimes were observed to be social occasions and children were given ample time to enjoy their meal. A four-week service menu was clearly displayed and staff advised how food is prepared by the chef on the premises daily. Morning snack on the day of inspection included melon, strawberries, apple and pear, the main meal was quinoa and creamy chicken, and afternoon tea was vegetable soup with homemade brown bread.
- Drinks were available in the care rooms throughout the day, and children were encouraged to drink with their meal. Staff confirmed with children they had finished before removing their plates, drinks and bibs at mealtime.
- Children's self-care skills were supported as staff promoted hand hygiene and nasal care practices.
- Displays were present of children's recent artwork and information on their individual interests.
- Staff were aware of children's individual care needs and spoke confidently to inspectors regarding children's food and activity preferences.

Non-Compliance Information

(1) (b) The transitions in the Masai Mara room were not adequately managed before and after sleep on the day of inspection to meet the needs of the children present. This was evidenced by the following:

- The transition after dinner was prolonged for the age range of children present. During this time children were not engaged in an activity as staff prepared the room for sleep, and some became disruptive as a result. Timely and organised transitions can help children to regulate and provide a sense of predictability.
- A single staff member was caring for the children during the transition from sleep. While the interactions between the staff member and children were calm and supportive when the staff member was alone,

they struggled to meet the needs of all children in the group which resulted in children's sleep being disturbed and children engaging in behaviours that required attention and support. The following was observed:

- A child who was awake was pushing the cot of a sleeping child.
- A child who woke from sleep became upset as their sleep was disturbed.
- A child who was awake threw a book into the cot of a sleeping child which woke the child.
- A child proceeded to hit another child causing them to cry

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) (b) Staff members were provided with training on supporting transitions. An overall review of transitions, age and needs of the children took place, and a new routine was put place to ensure additional support. The busier transition times and particular rooms are closely monitored and supported by the part time staff and management team who are supernumerary in the centre.

Supporting documentation submitted

Training card.

Training certificate.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 19 has been addressed.

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:

- Cleaning products were safely stored out of children's reach.
- Blind cords were safely secured and out of reach.
- A safety and health diary was observed for noting any identified hazards.

Infection Control:

- Children were supported with hand hygiene practices and were observed washing their hands before meals, after nappy changing and after outdoor play.
- Foot pedal bins were present in the care rooms and sanitary areas supporting hygienic disposal of waste.
- Children's drink beakers were individually labelled.

Administration of Medication:

- Medication was stored out of children's reach in clearly labelled cupboards accessible to staff.

Safe Sleep:

- Children were provided with suitable sleep facilities based on their age and developmental stage.

Fire Safety:

- Attendance records were accurately maintained supporting safe evacuation in the event of an emergency.
- Emergency exits were observed unobstructed on the day of inspection.

Non-Compliance Information

Safe Sleep:

1. One cot was observed with a toy present as a child was sleeping. This is not in line with service procedure and posed a potential risk to children's safety. This was a non-compliance on the previous inspection in February 2025. The preventive action has not been maintained in line with the information provided to the inspectorate following the last inspection.

Action submitted by the Registered Provider

Corrective & Preventive Action

Safe Sleep:

1. Staff members were retrained on safe sleep practices and the importance of consistently following the Safe Sleep Policy. Emphasis was placed on ensuring that all procedures are followed correctly to maintain children's safety, wellbeing, and regulatory compliance. This is being overseen by management as they are present in the rooms during these busy times to ensure there is adequate support.

Supporting documentation submitted

Safe Sleep:

Training card.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 23 has been addressed.

Part VI - Safety

Regulation 27 – Supervision

A registered provider shall ensure that pre-school children attending the service are supervised at all times.

Compliance Information

Children were appropriately supervised throughout the inspection within the care rooms, sleep rooms and sanitary facilities. Staff were observed to be carefully positioned in the care rooms in order to ensure adequate supervision of the children.

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) The care room temperature in the Masai Mara room was not maintained at an ambient 18-22°C while children were present in the room. On the day of inspection, the room temperature was recorded at 16°C on the inspector's calibrated thermometer. It is acknowledged that during the inspection an engineer attended the service to review the issue, and management advised a plan was being developed to resolve the problem.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(c) During the inspection, an engineer was on site and increased the temperature of the boiler leading to an increase in room temperature. Staff monitor the room temperatures daily as per our health and safety procedures. In circumstances where the temperature is not accurate, the management team is informed, and they report the issues straight away as was done on the morning of the 6th January prior to the inspectors arriving.

Supporting documentation submitted

Photographic evidence.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 29 has been addressed.

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.

Compliance Information

The registered 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)
- (a) The registered provider ensured a mechanism was in place to maintain a record of any complaints received.
 - (b) A review of records maintained since March 2025 demonstrated complaints were managed in line with service policy.