

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DY352
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<b>Name of Service:</b>	Crumlin Childcare Centre
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<b>Address of Service:</b>	Pearse Memorial Park, Windmill Road, Crumlin, Dublin 12, Co. Dublin
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<b>Eircode:</b>	D12 TV06
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<b>Name of Registered Provider:</b>	Michael O'Sullivan
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	11/02/2025
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<b>No of pre-school children:</b>	AM	34	PM	28
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<b>Address of the Early Years Inspectorate:</b>	1st floor Trinity Building, IDA Business Park, Southern Cross Road, Bray, Co. Wicklow
<b>Inspection undertaken by:</b>	Sarah Quigley & Rosemary Brien
<b>Title:</b>	Early Years Inspector

### 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).

<b>Conditions if applicable</b>	Not applicable
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### Description of service

Crumlin Childcare Centre is a not-for-profit large full day care service located in a residential area of Crumlin, South County Dublin. Care and education are provided to children aged between one and six years and the service is currently registered to operate from Monday to Friday between 08:00 and 18:00 hours. Three care rooms are currently in operation in the service, and a dedicated sleep room is available. Three outdoor play areas are available to the children to the front of the premises and in internal courtyards. On the day of inspection, a fourth care room known as Happy Feet (the baby room) was not open, and the deputising person in charge stated it had not been open since May of 2024.

### Staffing

The service currently employs twenty staff members, not including the registered provider who does not work directly in the service. On the day of inspection ten staff members were present. The designated person in charge was not present during the inspection, however there was a nominated person available to deputise in their absence. The registered provider was present to attend a feedback meeting at the close of inspection.

### 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/information and records/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under regulation 19. As a result, the scope of the inspection included the Nemo Room and the Toy Story Room.

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

This inspection was conducted as a follow up to a previous inspection which had taken place on the 9<sup>th</sup> and 10<sup>th</sup> of October 2024. Corrective and preventive actions submitted by the person in charge to address non-compliances identified on the last inspection were assessed. The designated person in charge was not present on the day of inspection. The inspection was facilitated by an adult appointed to deputise in their absence. The registered provider was present for the feedback meeting at the close of inspection.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, 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.*

*(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 three named persons to deputise if required.
  - (b) The designated person in charge was not on the premises during the inspection. Three persons appointed to deputise were on the premises.
  - (c) There was a clear management structure in place in the service which was displayed in the reception area and was confirmed with staff members during discussions with the inspectors. Jobs descriptions were available in staff files which detailed roles and responsibilities including for the person in charge, room leaders, and staff working in care rooms.
- (2)
- Following a discussion with the appointed person in charge it was confirmed that two adults commenced working in the service since Regulation 9 was last inspected on the 9<sup>th</sup> and 10<sup>th</sup> of October 2024. A third adult was present and providing relief cover in the service on the day of inspection from an external agency. Documentation required under regulation 9(2)(3)(4) was reviewed in respect of these three adults as detailed below.
- (a) (b) There were two references each available for the three adults which had been appropriately verified.
  - (c) Garda vetting disclosures were available for each of the three adults working in the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for all adults employed to work in the service.
  - (d) Two of the new employees required international police vetting, the required documentation was available for the two adults.
- (3) Documentation reviewed evidenced that the procedures specified above under 9(2) had been carried out prior to the three adults commencing employment in the service.
- (4) The three adults held at least a major award in Early Childhood Care and Education at Level 5 on the National Qualifications Framework.
- (7) The registered provider demonstrated that they had taken reasonable measures to ensure that all employees were appropriately supervised and provided with sufficient information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations as follows;
- During discussions with the inspectors and observations during the inspection, staff members demonstrated an awareness of the policies and associated procedures in place in the service.
  - Documentation reviewed evidenced that regular team meetings and one on one support and supervision meetings were in place since the last inspection of the service on the 9<sup>th</sup> and 10<sup>th</sup> October 2024 for all staff members. It was evident from the records maintained that training needs had been identified during

these meetings and subsequent training had been implemented or planned to address staff needs as they arose. Staff members detailed during discussions with the inspectors that regular meetings had been occurring since the last inspection. Staff were aware of when their next supervision meeting was scheduled, and a visual aid was in place for the person in charge which detailed planned dates for both team meetings and one to one supervision. This was in line with the staff supervision policy in place in the service.

- Two staff members had commenced employment in the service since the last date of inspection. The staff members confirmed that they had received formal induction training when they commenced employment. There were detailed records of induction training available for the two adults, which included training on the policies, procedures and associated practices in place in the service. Evidence of re-training on aspects of the induction criteria was provided and documented where a staff member required it. This was in line with the staff training policy in place in the service.

### 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

- (1) An adequate number of adults were working directly with the pre-school children attending the service during the inspection.
- (2) The registered provider ensured that the minimum ratio of adults to children was maintained in the service on the day of inspection. There were thirty-four children present in the service being supervised by eight adults during the inspection. The deputising person in charge provided relief cover to the care rooms when required.

### 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:*

- (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

- (j) All records of medication which had been administered in the service since the last date of inspection on the 9<sup>th</sup> and 10<sup>th</sup> October were reviewed. The records contained all of the necessary administration details and signed parental consent.
- (k) Records of accidents and incidents which had occurred in the service since the last date of inspection on the 9<sup>th</sup> and 10<sup>th</sup> October were reviewed. Each of the records contained evidence that parents/guardians had been informed and contained the signature of the appointed person in charge on the given day.

### 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.*

#### Compliance Information

Appropriate and suitable care practices were observed to be in place. Meals and snacks were offered to the children regularly throughout the day. Self-feeding was promoted in younger care rooms and staff assisted children where required. Children's nappies were changed routinely and as needed, with staff using these opportunities for warm one-to-one interactions. Older children were supported to use the toilet independently. Staff addressed children by name and spoke to them in gentle positive tones. Children were comforted promptly if they became upset.

A rest area was provided within the rooms where the children could rest or take a break from activities. Children were given the opportunity to sleep after lunch time where required. The children were made comfortable for

sleep, with staff removing their shoes and outer clothing and providing soothers to those who used them. Staff provided comfort to children where required when going to sleep, offering reassurance sitting beside them and speaking softly. A record was kept for staff to communicate with parents/guardians regarding individual children's care, including information about diet, sleep, and nappy changes.

The routine and play experiences in the service were observed to be child-led and children were observed to be content in their play-based activities throughout the inspection. All children were provided with the opportunity for outdoor play and were dressed appropriate to the weather.

### 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

The inspectors found by observation of practice, review of documentation, discussion with the registered provider, and inspection of the premises that the following steps to safeguard children attending:

##### General Safety:

Steps were implemented to ensure the safety of the children. The entry and exit points were secured to prevent children from leaving the service unattended or unauthorised individuals from gaining access. The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order.

Potentially hazardous materials such as cleaning products and medicines were safely stored out of children's reach.

##### Infection Control:

Measures were taken to minimise the risk of infection spreading. Soothers were kept in individual containers to avoid cross-contamination. Appropriate infection control measures were taken during nappy changing including the use of gloves, aprons, and thorough handwashing after changes. Waste was managed appropriately using pedal-operated bins. Each child was provided with their own bed linen, which was laundered weekly and stored individually between uses. Staff were aware of guidelines on exclusion periods for adults and children with

infectious illnesses. Warm water, soap and paper towels were available for handwashing and both staff and children washed their hands at regular intervals and as required. Plates were provided to children for all meals and snacks.

### Administration of Medication:

Medications were stored in their original packaging out of reach of children. Staff demonstrated a clear understanding of procedures to safeguard children when administering medicine. This included ensuring written consent was obtained from parents or guardians, having a second staff member present as a witness during administration, and maintaining detailed records shared with parents or guardians upon collection. Care plans were available for children who required emergency medication.

### Safe Sleep:

Staff were familiar with safe sleep guidance and placed babies on their backs to sleep. Sleep logs were maintained in the dedicated sleep rooms and the younger care rooms, and individual children's observations recorded room temperature, breathing, colour, and position every ten minutes. Standard cots and low-level beds were available for sleep and were used in accordance with children's ages and developmental needs. The temperature of the rooms where children slept were recorded and maintained at the required temperature ranges.

### Fire Safety:

The designated fire escape routes were clearly indicated and free from obstruction on the day of inspection. Staff members adequately outlined the evacuation procedures in place in the event of a fire and stated that fire drills are practiced regularly on a monthly basis which was in line with records available in the service.

### Non-Compliance Information

#### General Safety:

1. The cord from a temperature monitoring device in the Nemo room was in reach of the children posing a risk of injury.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. The cord was immediately fixed to the wall. Subsequently a small shelf has been fixed to the wall to hold the monitoring device and the cord has been fixed to the wall. The non-compliance will be discussed at the next team meeting on Wednesday 26<sup>th</sup> March 2025 to ensure compliance going forward regarding all trailing flex/cords. All staff were reminded of the policy and risk for general safety for trailing cords/flexes. This has been addressed also on the morning checks, for manager and H&S officer.

#### Supporting documentation submitted

##### General Safety:

Supporting documentation was submitted and reviewed by the inspector.

#### Summary Comment

The regulatory requirement has been met.

### Part VI - Safety

#### Regulation 24 - Checking in and out and record of attendance

*(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.*

#### Non-Compliance Information

- (1) Documentation reviewed during the inspection evidenced that all preschool children were not checked into the service as required. Attendance records in the Toy Story room were reviewed by the inspector at 10:53am. One child in attendance who staff reported arrived at the service at 10:05am had not been signed into the attendance book which staff reported is taken with them in the event of an evacuation. This was at variance with the checking in and out policy in place in the service. Inaccurate records of attendance may hinder the safe evacuation of children in the event of an emergency. The corrective and preventive actions submitted following the last inspection of the service on the 9<sup>th</sup> and 10<sup>th</sup> October 2024 did not prevent the re-occurrence of the non-compliance.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective and Preventive Action

The child had been written into the daily log sheet for parent information in regards to sleep, nappy changes, meals etc. It was not recorded in the roll book used for evacuations. The Record of Attendance Policy was printed off and is on the wall in each room and all staff were immediately reminded to ensure that while the daily log for

children in and out is completed, the Roll book that is used for Fire Drills and Health & Safety must also be filled in immediately with the drop off time and collection times filled in immediately for compliance. The importance of accurate records and the policy will be reviewed at the next staff meeting. All staff to attend and understand the compliance issue of completing the roll book when children attend and leave the centre.

**Supporting documentation submitted**

Supporting documentation was submitted and reviewed by the inspector.

**Summary Comment**

The regulatory requirement has been met.

**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*
- (d) cleaned, maintained and repaired, as required, and*

**Compliance Information**

- (c) The registered provider ensured that the care rooms were adequately heated on the day of inspection at the required temperature range of between 18 - 22°Celsius.
- (d) The premises were found to be cleaned, maintained and repaired as required during the inspection. Concerns which had been previously identified had been addressed in line with corrective and preventive actions submitted following the last inspection of the service on the 9<sup>th</sup> and 10<sup>th</sup> October 2024.