

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL102				
Name of Service:	Giraffe Childcare Clonsilla				
Address of Service:	Station Court Road, Clonsilla Road, Clonsilla, Dublin 15.				
Eircode:	D15 XY81				
Name of Registered Provider:	Dearbhala Cox Giffin				
Service type:	Full Day				
Date of Inspection:	20/04/2026				
No of pre-school children:	<table> <tr> <td>AM</td> <td>118</td> <td>PM</td> <td>96</td> </tr> </table>	AM	118	PM	96
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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 JA. McKimm				
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).

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Description of service

Giraffe Childcare Clonsilla is a privately owned full day care service in North Dublin. The service is one of twenty-five services operated by the registered provider. The service is registered for a maximum of 148 preschool children aged between 0 to 5 years. At the time of the inspection, the service did not have children under 1 years of age present. The service participates in the Early Childhood Care and Education (ECCE) scheme and operates three morning sessions between 9:30am to 12:30pm.

The service operates from a purpose-built single storey building including eleven care rooms. The care rooms include:

Room name	Age group
Bably/Wobbler Baringo	1-2 years
Wobbler Acacia	1.5-2 years
Wobbler Cameroon	1.5-2 years
Wobbler Masi Mara	1.5-2 years
Toddler Kilimanjaro	2-2.5 years
Toddler Serengeti	2.5-3 years
Toddler Safari	2-2.5 years
Toddler Botswana	2-2.5 years
Preschool Madagascar	3-4 years
Preschool Kenya	4-4.5 years
Preschool Zambezi	4-5 years

There are two designated cot rooms and each care room in the service is equipped with its own sanitary facilities. There is an office, a staff room, a kitchen and an enclosed outdoor play space.

Staffing

The registered provider currently employs forty staff to work in the service including an area manager, a person in charge, two deputy persons in charge, thirty-three early years professionals, a housekeeper, a chef and relief chef. The registered provider does not work directly with the children attending the service.

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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(2), (4) and (7), Regulation 191(a)(b) Health, Welfare and Development of Child and Regulation 23 Safeguarding Health, Safety and Welfare of Child. As a result, the scope of the inspection included the Toddler Kilimanjaro room and the Toddler Serengeti 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.

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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 management, 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,*
- (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.

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(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 designated person in charge was rostered to be on the premises during the opening hours of the service on the day of inspection. The person in charge and two deputy persons in charge were present in the service when the inspectors arrived and remained in the service for the duration of the inspection.
 - (c) There was a clear management structure in place, and staff reported being aware of this.
- (2) A review of paperwork and discussion with management showed that there are currently forty adults employed by the registered provider to work within the service. The files of fifteen adults were reviewed. This included fourteen adults who had commenced work since the previous inspection and one adults file which had not been reviewed on previous inspection. In addition, garda vetting disclosures for three adults whose files had been reviewed on the last inspection were also reviewed.
- (a) There were thirty written and validated references available from past employers.
 - (c) Garda vetting disclosures had been obtained for all eighteen 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 thirteen adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (4) The thirteen adults who worked directly with children attending the service held a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications, or a qualification deemed by the Minister to be equivalent.

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Non-Compliance Information

(7) (a)

- A review of documentation and discussion with staff and management showed that the last staff supervision sessions conducted by management was during August and September 2025.
- The supervision documents from August and September 2025 reviewed by the inspectors identified a need for team building and training support for staff and there was no documentary evidence this had been done.

This was not in line with best practice and was at variance with the service staff supervision policy which states “supervision forms are to be completed every 12 weeks, providing an opportunity for managers and staff to review progress, discuss support or training needs and share any concerns or feedback”.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (7) (a) Staff supervision forms have been completed, and the review meetings are in progress. Staff supervision reminders have been inputted into the diary as a prompt to ensure they are completed in line with our policy. Staff are aware that should they wish to discuss any practice/ training needs outside of the supervision meetings, to not hesitate to speak to management so that this can be addressed. Management will also address training needs/ concerns with staff in a more formal and written manner to evidence the work they do on an ongoing basis.

Supporting documentation submitted

- Documentary evidence of staff supervision tracker.

Summary Comment

The registered provider has addressed the non-compliance identified under Regulation 9. The practices outlined in the corrective and preventative actions will be reviewed on the next inspection.

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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) There were 118 preschool children being cared for by 25 adults on the morning of inspection. There were 96 preschool children being cared for by 24 adults on afternoon of inspection. The person in charge, two deputies and the area manager were available to provide assistance in the care rooms as required.
- (2) The adult child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection. Staff were aware of the correct adult to child ratios.

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) (a) The following observations are examples on how each child's learning, development and well-being was observed being facilitated during the inspection:
- At morning snack time children were observed to be offered bread sticks with cheese and a selection of fruit sliced up into small pieces. The service also provided a hot meal option for children which was prepared on site, for example, at dinnertime tuna pasta was served at 11.30am. There was an alternative

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food option of pasta with sauce available. Children were observed to be offered milk for drinking and extra portions of food.

- Children's labelled water bottles were available within their reach throughout the session, should they feel thirsty at any stage.
- The care rooms in the service were designed with the age and stage of development having been taken into consideration. Children were observed to take part in free play and group work. The layout of the rooms facilitated these choices as the toys and equipment were laid out on low level shelving and were visible and accessible to the children. Developmentally age and stage appropriate tables and chairs were present throughout the care rooms to allow children to engage in tabletop activities and mealtimes independently and comfortably.
- The presence of a 'Family Wall' display, 'Birthday Time' display, and the children's artwork were displayed throughout the care rooms in the service. This promoted a sense of identity for the children.
- A rest area was available to the children in the care rooms. This area included a soft mat, and books providing the children with a comfortable place to rest or engage in quiet activities.
- The children were observed to play outdoors during the inspection. This supported their social, cognitive, and gross and fine motor development.

Non-Compliance Information

(1) (b) The follow practices were observed on the day of inspection which did not support the health, welfare and development of the children attending.

1. A child aged between 2 to 2 ½ years was observed to suck a soother throughout the day including mealtimes, activity time and nappy changing. This was not in line with best practice and was at variance with the service policy which states "soothers are used solely for sleep and in the event of an upset child".
2. Nappy changing procedures before dinner time in the Kilimanjaro room were observed to be carried out in a rushed manner. Nappy changing time is a unique time for one-to-one early years interactions where the adult gets to connect with the child in a sensitive and engaging manner.
3. Staff did not ensure a smooth transition from mealtime to sleep time for the children in the Kilimanjaro room. During this time the room was noisy, and children were observed to run around the room while staff attended to cleaning up duties. This did not support a calm restful atmosphere for the children to rest and sleep. A similar non-compliance was observed on the previous inspection, and the preventive action had not been sustained.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Management spoke with the child's parent; it was agreed the use of the soother would be reduced both at home and in the centre. At present, the child is offered the soother only for sleep time. Management will carry out regular checks on children who use soothers to ensure compliance.
2. Staff were retrained on the nappy changing policy and procedures. Management will monitor compliance of Nappy Changing Policy, and either management or part time staff will support during nappy changing times.
3. An additional staff member is based in this room to support transitions. Management will continue to check and support the rooms during the busy times of the day.

Supporting documentation submitted

1. Documentary evidence of file note, Staff Training Agenda and Training Card.
2. Documentary evidence of Staff Training Agenda and Training Card.
3. Documentary Evidence of staff roster.

Summary Comment

The registered provider has addressed the non-compliance identified under Regulation 19. The practices outlined in the corrective and preventative actions will be reviewed on the next 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 main entrance door which leads into the service was appropriately secured to prevent a child from exiting unsupervised and to prevent unauthorised access to the service. The inspector was asked to show identification and sign in the visitor book.
- The enclosed outdoor play area was secure reducing the risk of unauthorised access. Children who were brought out to the outdoor play areas from indoors were observed to be supervised.
- Blind cords were secured and there were window restrictors in place.
- The kitchen area was inaccessible to the children throughout the inspection.

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- Toys and equipment used by the children were observed to be well maintained and in a good state of repair.
- Cleaning agents were stored safely out of the reach to the children.
- There were no flexes or cables observed that were accessible to the children.

Infection Control:

- The premises was observed to be in a clean and hygienic condition. There were cleaning schedules on the wall of the care rooms and sanitary facilities.
- Foot pedal operated bins were available in the care rooms and sanitary areas to allow hygienic disposal of waste.
- Individual bed linen was used for the sleeping children and staff were familiar with the washing schedule.
- An ambient temperature of 18-22°C was maintained and windows were open in the care rooms to allow for the fresh circulation of air.

Administration of Medication:

- Medication was stored out of reach of children. No children were observed having medication administered on the day of inspection.

Safe Sleep:

- Heavy outer clothing was removed from the children before sleep time.
- Staff discussed how they monitor sleeping children's breathing, position and colour every ten minutes by carrying out physical checks.
- Children under two years of age were provided with a cot for sleeping. Children over two years of age were provided with individual sleep beds.
- An ambient temperature of 18-22°C was maintained for sleeping children aged between 1 to 5 years old.

Fire Safety:

- Up to date contemporaneous attendance logs for children were available which facilitate the safe evacuation of the premises in the event of an emergency.
- Emergency evacuation routes were clear of obstructions and fire evacuation procedures were displayed on the walls of the service.

Non-Compliance Information

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Infection Control:

The service did not ensure that effective infection control measures were in place to reduce the spread of inspection. The following practices were observed and were not in line with best practice and was at variance with the service policy. Evidence by the following.

1. Nappy changing procedures.

- Children's nappy lotions were not individually labelled. This posed a risk of cross infection.
- A staff member was observed to wear the same apron for all nappy changing procedures observed. In addition, the staff member was observed to enter and exit the care room multiple times wearing this apron. This posed a risk of cross infection.
- A staff member was observed to touch the foot pedal operated bin with their hands on multiple occasions. This posed a risk of cross infection.
- A staff member was observed not to wash their hands after each nappy changing procedure.
- A staff member was observed not to disinfect the nappy changing mat between nappy changing procedures. This posed a risk of cross infection.

2. Toileting and potty procedures.

- A potty which had been used by a child was left on the floor of the nappy changing bay for over ten minutes. During this time children entered and left the nappy changing bay. This posed a risk of cross infection.
- A potty was observed to be stored in the sink in the sanitary accommodation used by the children. This posed a risk of cross infection.
- Five children were observed not to have their hands washed after toileting. This posed a risk of cross infection.

Administration of Medication:

3. The service did not ensure the safe administration of medication. Evidenced by the following.

- The prescribed emergency medication for one child had expired in March 2026. In addition, the documented care plan which outlined the procedures for the safe administration of medication for this child detailed the administration of an over-the-counter medication. This medication was not available on the day of the inspection. This posed a risk of safety.

Action submitted by the Registered Provider

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Corrective & Preventive Action

Infection Control:

1. Staff were retrained on company's Infection Control Policy and Nappy changing Policy. Management will regularly monitor the infection control measures in each room to ensure compliance.
2. Staff were retrained in the company's Infection Control and the Toileting Policy and Procedures. Management will regularly monitor the infection control measures in each room to ensure compliance.

Administration of Medication:

3. Management contacted parents the same day regarding expired medication. Parents provided in-date medication the same day. The child's individual care plan was reworded to confirm that over the counter medication was only to be administered at home. Management reviewed all individual care plans, will continue checking them regularly and control expiry dates of emergency medications.

Supporting documentation submitted

Infection Control:

1. Documentary evidence of Training Card and Staff Training Agenda.
2. Documentary evidence of Training Card and Staff Training Agenda.

Administration of Medication:

3. Photographic evidence of medication in original box and documentary evidence of care plan.

Summary Comment

The registered provider has addressed the non-compliance identified under Regulation 23. The practices outlined in the corrective and preventative actions will be reviewed on the next inspection.

Regulation 25 - First aid

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(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1) There was documentary evidence to show that two adults held certification in First Aid Response training and that one of the two adults was rostered to be available at all times to the children attending the service.

(2) (a) The first aid equipment was safely stored, and unobstructed if needed to access quickly.

(b) A suitably equipped first aid box was available at all times to the adults caring for children attending the service.