

# Early Years Inspectorate Regulatory Report

## Pre School

<b>USLA Identifier:</b>	TU2015CC117
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<b>Name of Service:</b>	Creche Cois Laoi
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<b>Address of Service:</b>	Brookfield Sciences Complex, College Road, Cork, Co Cork
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<b>Eircode:</b>	T12 V821
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<b>Name of Registered Provider:</b>	Paula Cooper
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<b>Service type:</b>	Full Day
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<b>Date of Inspection:</b>	12/03/2026
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<b>No of pre-school children:</b>	AM	43	PM	45
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<b>Address of the Early Years Inspectorate:</b>	Administration Office, St. Mary's Health Campus, Gurrabraher, Cork. T23X440.
<b>Inspection undertaken by:</b>	J Russell & D Cotter
<b>Title:</b>	Inspection and Registration Manager and 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>	N/A
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### Description of service

Creche Cois Laoi is a privately owned, play based, full day care service, which is registered to accommodate children aged 0 to 6 years, along with school age childcare. Children attending the Early Childhood Care and Education (ECCE) Scheme are facilitated from 9.00am to 12.00pm, over 38 weeks of the year. Operational hours are from 8.00am to 6.00pm, over 50 weeks annually.

Situated on the grounds of University College Cork, the service is provided from a split-level, detached, purpose-built premises. There are five operational early years care rooms, and a sixth room is allocated for school age children. Three sleep rooms are available, along with child and adult sanitary facilities, a kitchen/dining room, an office, a staff room and two outdoor play areas.

### Staffing

There are currently 23 adults attached to the childcare facility, 19 of whom are employed to work directly with the children. The registered provider, a cook/cleaner and an administrator are not involved in the direct care of the children. One student was undertaking a work placement at the time 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/ 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 Regulations 19 and 23. As a result, the scope of the inspection included the following rooms:

Junior Preschool, Nursery, and Junior Toddler rooms.

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 triggered by information received by the Early Years Inspectorate.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the 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

(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 registered provider had ensured that both a designated person in charge and a deputy person in charge were assigned to the setting.
  - (b) The person in charge was on duty at the service when the inspectors arrived to carry out the inspection and was available for its duration.
- (2) Following a review of previous inspection information, information available on inspection and discussion with the person in charge it was determined that 3 new staff members had been employed since the previous inspection. All 3 new staff members work directly with the children. On the day of inspection, 1 student were present. A total of 4 files were reviewed. In addition, Garda vetting for 1 staff member whose disclosure was identified as due for renewal were requested for review.

- (a) From a total of 8 required written and validated references, 5 had been provided by past employers.
- (b) A further 3 references were from sources other than past employers.
- (c) Garda vetting disclosures had been obtained for all new 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 indicated that none of the new adults required police vetting.
- (4) Records demonstrated that 2 staff had achieved a major award in Early Childhood Care and Education, as listed on the National Framework of Qualifications.

### Non-Compliance Information

(1)(b) The requirement for either the person in charge or a named deputy to be on the premises at all times was not met. The staff roster for the current week indicated that neither the person in charge nor the named deputy were rostered on duty for the following dates and times:

- 9 March 2026- 8:00 am to 8:45 am
- 10 March 2026- 4:45 pm to 6:00 pm
- 11 March 2026- 8:00am to 8:45 am
- 12 March 2026- 8:00 am to 8:15 am and 5:30 pm to 6:00 pm
- 13 March 2026- 8:00 am to 8:30 am and 1:30 pm to 6:00 pm

There was no named person in charge during these periods. This non-compliance was identified at the last inspection dated 10 October 2024. At that time the service stated via the CAPA process that room leaders have been appointed as alternate deputies, and the roster had been changed to ensure that either the person in charge or a deputy was always present. However, this was not found on inspection.

(4) One new staff member, who required a Letter of Qualification Recognition from the Department of Children, Disability and Equality did not have this on file. It is acknowledged that this had been applied for and was awaited.

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

#### Corrective and Preventive Action

- (1) (b) The registered provider has deputised the room leaders of the service and has amended the staff roster to reflect which staff member is in charge when the person in charge or the designated deputy is not on site.
- (4) The registered provider has provided the inspectorate with a Letter of Qualification Recognition.

#### Supporting documentation submitted

- (1)(b) A copy of the current staff roster.
- (4) A copy of the Letter of Qualification Recognition from the DCDE.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non compliances identified under Regulation 9 (1) (b) and 9 (4) have been adequately addressed.

## Part III – Management and Staff

### Regulation 10 - Policies, procedures etc. of pre-school service

*A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.*

## Compliance Information

The following policies were inspected and found to be in adherence to this regulation:

- Complaints policy.
- Policy on infection control.
- Policy on managing behaviour.
- Policy on accidents and incidents.
- Recruitment policy.
- Risk management policy.
- Staff training policy.

## 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.*

*(8) Without prejudice to paragraphs (2) to (7)-*

*(a) a registered provider of a pre-school service other than a child-minding service or a sessional pre-school service shall ensure that there are at least 2 adults on the premises at all times,*

### Compliance Information

(1) An adequate number of adults were working with the children on day of inspection. There were 11 adults working directly with 43 children in the morning and 12 adults working directly with 45 children in the afternoon. The deputy person in charge was observed providing relief cover where required.

(2) At all times the minimum required ratio of adults to children was maintained:

Name of Room	Age Range	Number of children AM	Number of Staff AM	Number of children PM	Number of staff PM
Junior Toddler	1.2-2.5 years	7	2	8	2
Nursery	7-14 months	6	3	7	3
Senior Toddler	2.5-3.2 years	9	2	9	2
Junior Preschool	3-4 years	10	2	11	3
Senior Preschool	4-5 years	11	2	11	3

(8) The registered provider has ensured that there were always at least two people on the premises. This was evidenced through inspection of the staff roster and through discussion with staff.

### 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.*

*(2) A registered provider shall ensure that no corporal punishment is inflicted on a pre-school child whilst attending the service.*

*(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

1 (a)

#### Basic needs:

- Children had access to their water bottles/cups at all times. Water bottles were stored within children's line of sight in each of the care rooms.
- Children's toileting and hygiene needs were attended to regularly and staff assisted children when they needed it.
- The rooms were well laid out to encourage the children to move freely between the interest areas.
- It was evident through observation on the day of inspection that children's voices were listened to, and children were able to communicate their needs to attentive adults.

#### Supporting relationships:

- Staff spoke at the child's level in a calm, soothing tone. Children were at ease with staff and were comfortable in expressing their feelings and emotions to the staff members. Staff were observant of children's needs and were seen to comfort children when they were upset.
- The foyer had information on each staff member, along with their photograph. This practice would support partnership with parents.
- During mealtimes, a relaxed social environment was evident. Staff allowed children to eat at their own pace and engaged in conversations with the children at snack time. Children were supported by staff with the opening of their snacks.
- The staff in the nursery were observed to sing and chat with the infants during nappy changing.
- Warm, reciprocal relationships were observed between staff and children. For example, when a staff member came to bring something to the Junior preschool room, the children were observed to run to greet the staff member who responded by hugging the children and enquiring as to how their day was going.

- (1) (b) On the day of inspection, all care practices observed within the care rooms were in line with best practice and showed due care and respect for the children. For example:
- Children who could use the bathrooms independently, were facilitated to do so.
  - Nappy changing times were used as opportunities for bonding.
  - Staff facilitated mealtimes in a child led way meaning children who could self-feed were encouraged to do so while younger children were fed by the staff.
- (2) Through discussion with staff members, it was evident that all staff were aware of the behaviour management policy and recited to the inspector the steps they are trained to take when a child displays behaviour which needs to be corrected. When asked, all staff stated that clear communication strategies are used with children and that no corporal punishment was tolerated by the management or staff of the service.
- (3) On the day of inspection, the inspectors observed no practices that were disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful in respect the children attending the service. It was observed that where necessary, positive reinforcement was used to redirect children’s behaviour.

## 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 was fitted with a release mechanism which could only be released from inside. This ensured no unauthorised entry to, or exit from, the service.
- Doors within the care rooms which led to the outside had been fitted with alarms to prevent children leaving unsupervised.
- Low level windows and doors had been fitted with visibility strips.
- All highchairs appeared to be in good condition and were fitted with safety harnesses.
- All play equipment appeared to be in a clean state and of good repair.
- Heavy equipment and furniture had been anchored to prevent them falling onto a child.

- The staircase was adequately lit and had been fitted with suitable handrails.
- All electrical cables or flexes were in good repair and out of reach of children.
- Pull cords in sanitary accommodations were secured.
- Cleaning materials were stored out of reach of children.
- The outdoor areas had been secured fenced to prevent unauthorised entry to or from the area.
- Floors were kept clear of unnecessary clutter to avoid trips.
- In the care rooms, the children's bags and coats were stored safely off the floor.

### Infection Control:

- Children's hands were washed prior to eating.
- Foot operated bins were in use throughout the service.
- Perishable food was refrigerated.
- Surfaces were sanitised before and after eating.
- Single use wash cloths were in operation in the care rooms for cleaning children's faces. It was noted that a staff member removed the washcloths regularly throughout the inspection.
- Staff were observed to comply with the services' nappy changing procedure. Staff wore single use aprons and gloves and removed them after each nappy change.
- Children and staff were observed to wash their hands after nappy changing.
- Staff were also observed to sanitise the nappy changing mats after each use.
- A supply of liquid soap and paper towels were in use in each of the nappy changing and sanitary accommodations.
- Thermostatically controlled water was available in each hand wash basin. It was noted that the water was within the ranges of 31.9°C to 41.9°C.
- Windows were open throughout the service to aid natural ventilation.
- Barrier creams for nappy changing were clearly labelled with each child's name to ensure there would be no cross contamination.

### Administration of Medication:

- Staff reported that no child attending the service needed ongoing medication. However, fever reducing medication was stored securely in an overhead cupboard and staff were able to detail the process for the administration of such medication. All such medicine was stored in its original container.

### Safe Sleep:

- Sleep logs were maintained in the dedicated sleep rooms where children slept, and individual children's observations recorded breathing, colour, and position at regular intervals.
- 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 was maintained at the required temperature ranges.
- A record was available in the sleep room to record the temperature; staff were observed to fill this in throughout the day of inspection.
- All cots and beds were fitted with appropriate bedding.
- Cots were spaced more than 50cm away from each other.
- Cots were fitted with waterproof mattresses.

### Fire Safety:

- Fire exit doors were free from obstruction.
- Wall tethered firefighting equipment was available in the care rooms.

### Non-Compliance Information

#### General Safety:

Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'. It is acknowledged this had been applied for and was awaited.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

In her written response, the registered provider has submitted the updated Garda vetting.

#### Supporting documentation submitted

#### General Safety:

A copy of the outstanding Garda Vetting.

### Summary Comment

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

The registered provider has ensured that there was always adequate supervision on the day of inspection. For example:

- It was observed that six children between the ages of two to three years were asleep on stackable beds. There was a staff member present while the children slept ensuring appropriate supervision as the ratio was maintained.
- Additional staff were rostered to begin later in the day to ensure there would be adequate cover for staff breaks.
- Staff were observed to supervise children while they used bathrooms and washed their hands.

### 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-*

- (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

- (1) The registered provider has ensured that the complaints policy for 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 way such a complaint shall be dealt with, and
  - (c) the procedures for keeping a person who makes such a complaint informed of the way it is being dealt with.
- (2) (b) On the day of inspection the person in charge was able to show written records of complaints within the service. Through the inspection of these records, it was evident that the complaint had been dealt with in accordance with the services policy.
- (3) (a) The review of the records clearly stated the nature of the concern and the manner with which they were being dealt with.
- (b) The record was available to review, on the premises on the day of inspection by an authorised person.