

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015CC459
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Name of Service:	Walterstown Community Playschool
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Address of Service:	Walterstown, Cobh, Co Cork
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Eircode:	P24 K034
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Name of Registered Provider:	Noel Murtagh
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Service type:	Sessional
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Date of Inspection:	21/05/2025
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Date of Regulatory Compliance Meeting:	2/07/2025
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No of pre-school children:	AM	29	PM	N/A
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Administration Building, St Mary's Health Campus, Gurrabraher, Cork T23 X440
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Inspection undertaken by:	D Prendergast
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Title:	Early Years Inspector
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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	N/A
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Description of service

Walterstown Community Playschool is registered to cater for children aged 2 to 6 years, between the hours of 9.00am and 12.30pm daily. This includes children attending the Early Childhood Care and Education (ECCE) Scheme, which is facilitated over a 38 week annual period.

Situated in the village of Walterstown in Cobh, the service is provided from an old primary school, which now operates as a community centre. There are two operational care rooms within the single storey, detached premises. Sanitary facilities are available adjoining and adjacent to the care rooms. The service also has the use of a kitchen and an outdoor play environment.

Staffing

In total, there are six adults attached to the setting, of whom five work directly with the children. Each of these five adults has achieved a major award in Early Childhood Care and Education. This includes one adult employed under the Access and Inclusion Model (AIM) support scheme. The registered provider is not based at the setting.

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.

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

An Immediate Action Notice (IAN) was issued to the person in charge on 21 May 2025, in relation to the absence of Garda Vetting, for one adult. A response to the IAN was subsequently received on the same date.

Following review of the CAPA and CAPA 2 responses that were submitted, it was determined that some of the non-compliances had not been adequately addressed. The registered provider was therefore invited to attend a regulatory compliance meeting, which took place on 2 July 2025. Subsequent to this meeting, additional supporting evidence was forwarded to the inspectorate.

Acknowledgments

The inspector wishes 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) A named person in charge of operating the service had been appointed, along with a deputy person in charge.
 - (b) The person in charge was available at the premises for the duration of the inspection.
- (2) Recruitment records in respect of the six adults attached to the service were reviewed and the following was deemed satisfactory:
- (a) Six of the 12 required written and validated references were from a past employer.
 - (b) Two of the required written and validated references were from sources other than previous employers.
 - (c) Garda vetting disclosures had been obtained for five of the adults. However, the service did not adhere to the re-vetting timeframes 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) Police vetting was available on file for the staff member who had lived outside the State for a period longer

than six consecutive months, as an adult.

- (4) The records provided demonstrated that each of the five adults who worked directly with the children held a recognised award in Early Childhood Care and Education.

Non-Compliance Information

- (2)
(a)(b)
Two written and validated references were unavailable in respect of one adult.
Records of validation were not provided for the references held in respect of a second adult.
- (c)
A Garda vetting disclosure was not available for one of the adults. An Immediate Action Notice was issued on 21 May 2025, in response to the breach of Regulation 9.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)(a)(b)
The written reply stated that two written and validated references have been provided for the adult and that references for the second adult have been validated. All references will be validated and maintained on file.
- (c)
Previous attempts to obtain Garda vetting had been refused, however the vetting application in respect of the adult has been submitted. Going forward, Garda vetting will be in place for all personnel before their employment commences.

Supporting documentation submitted

- (2)(a)(b)
Two written and validated references in respect of one adult and evidence of reference validations in respect of the second adult.
- (c) The required Garda vetting has been received by the Agency.

Summary Comment

Following the corrective actions implemented, regulatory compliance is determined to have been met.

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*
- (3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.*

Compliance Information

- (1) It was observed that there was an adequate number of adults responsible for the direct care and supervision of the children in attendance.
- (3) The adult child ratio was correct on the day of the unannounced inspection. The rooms were in operation as follows:
- In the Corbally room, there were 2 adults working directly with 14 children, aged 3 to 5 years.
 - The East Ferry room was attended by 15 children, aged 2 ½ to 4 ½ years and there were 3 adults available to these children.

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

Non-Compliance Information

- (1)
- (a) A curriculum vitae was unavailable for one of the adults.
- (i) There were no current or previous staff rosters available, as confirmed during conversation with the person in charge.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)

(a) The curriculum vitae is now in place.

(j) Staff rosters are now in place. Staff rosters will be completed within the roll book.

Supporting documentation submitted

(1)

(a) A copy of the C.V.

(j) A copy of the recent staff roster.

Summary Comment

The corrective action implemented has addressed the non-compliances identified under Regulation 16.

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

Compliance Information

(1)(a)

Basic needs:

- In the East Ferry room, the children were accommodated to have a snack break at 11.15am. At this time, staff members were observed to sit at the tables with the children and encouraged conversation. Appropriate supervision and assistance were also ensured.
- The children in the East Ferry room could readily access their water bottles, which were stored on a low-level display unit.
- When using the toilet facilities, the children were supported by the adults, through the provision of verbal prompts. The deputy advised the inspector that children in nappies were changes as needed, during the sessional service.

- The spacious care rooms enabled children to move freely, as they initiated and participated in various activities. Outdoor activities were also accommodated at the time of inspection.

Supporting relationships:

- The adults were kind, patient and reassuring towards the children in their care. Daily routine activities such as nappy changing and mealtimes were conducted at an unhurried pace, with a focus on children's individual needs.
- During discussion with the person in charge, the inspector was advised in relation to the service's methods of sharing of information with parents. It was stated that daily informal conversations at arrival and collection times, phone calls and a messaging application, were regularly used to ensure that parents were kept informed. Examples of the messages sent via the messaging application were presented for review.
- The person in charge also stated that monthly staff meetings were held to discuss any upcoming changes and to plan events and activities.

Non-Compliance Information

Basic needs:

1. Drinking water was not freely available to the children in the Corbally room, outside of the allocated snack time. The inspector was advised that the children's water bottles were stored in the fridge, which was located in the kitchen.
2. While it was acknowledged that the East Ferry room had a clearly identifiable cosy area, furnished with a soft mat, cushions and a bookshelf, the rest area in the Corbally room required development, in order to adequately meet the children's need for rest and relaxation. The inspector was advised that children in this room could use a large teddy bear as a seat, if they wished to rest. However, no additional furnishings or books were available, to create an inviting rest area for the children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Drinking water is readily available.
2. Books are always available to the children and suitable seating is now also provided.

Supporting documentation submitted

1. Photographic evidence to demonstrate that the children's reusable water bottles are available at their level.
2. A photograph of the rest area.

Summary Comment

The response and evidence submitted are accepted in meeting the regulatory requirements.

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 risk of unauthorised entry into the building and the risk of a child exiting the building unsupervised, were both reduced, through ensuring the security of the main entrance door, when it was not in use.
- The first aid boxes were maintained out of the children's reach.
- Cleaning agents were securely stored and inaccessible to the children.
- Wall mounted storage was provided for the available firefighting equipment.

Infection control:

- The sanitary facility that adjoined both care rooms was equipped with a supply of warm running water, liquid soap, paper towels and a foot pedal operated bin.
- It was observed that children washed their hands after using the toilet facility and before the mid-morning snack was facilitated.
- Children were allocated individually labelled, lidded containers to store their bags and personal items.
- The children's perishable snacks were refrigerated until the mid-morning meal was accommodated.

Fire safety:

- It was noted that fire exits were clear and free from obstruction.

Non-Compliance Information

General safety:

1. The Garda vetting disclosures available for two of the adults were not dated within the previous three years, in adherence to the Early Years Inspectorate Regulatory Notice, 'EYI-RN12.3 Renewal of Garda Vetting'.

- While it was acknowledged that good supervision practices were ensured during outdoor play, the risk of a child exiting the premises was increased through unsecured gates, in the outdoor play area. During outdoor play time, a child was observed to run towards one of these gates, which led to a road. A staff member immediately followed the child and intervened before the child had an opportunity to reach the gate, however, the unsecured gate increased the risk of a child exiting the service. The issue of the unsecured gates was also found at the previous inspection on 24 May 2023. The CAPA response at the time outlined that all three gates, which formed part of the enclosure surrounding the outdoor play space, had been fitted and secured with locks. However, this was not found in practice.

Infection control:

- During an observed nappy changing procedure, the following practices increased the risk of cross infection:
 - the adult undertaking the nappy changing procedure did not wear a disposable apron
 - the child's hands were not washed after having their nappy changed
 - the adult did not dry their own hands after washing them. When the inspector queried this, the adult stated that children did not like the sound of the electric hand dryer. It was also noted that no paper towels were available in this sanitary facility. The inspector subsequently requested to see the service's nappy changing procedure and the person in charge advised that this was not available.
- A lidded, lined, foot pedal operated bin was unavailable for the hygienic disposal of nappies. It was noted that several nappies had been disposed of into a loose plastic bin bag, which was on the floor, untied and accessible to any child who entered the area, to have their nappy changed. This posed a risk of cross infection.
- The shower tray in the staff sanitary facility was not maintained in a clean condition. Dirt was visible in the corners and a bag of sweets had been left on the shower tray. Non-compliances in relation to the dirty shower tray were also found at the previous two inspections, on 24 May 2023 and 23 April 2021.

Action submitted by the Registered Provider

Corrective & Preventive Action

General safety:

- Updated Garda vetting has been sought through the official channels. Records will be monitored and maintained up to date.

- Locks have been installed on the gates until a new secure, playground is installed. The new playground has been ordered and is due to be installed within a month. The new playground will include secure fencing and was specifically ordered to alleviate the observed issue.

Infection control:

- Disposable aprons are now in place. Instructions regarding handwashing after nappy changing have been provided to all staff. A nappy changing policy has been developed. New paper towels are available for use.
- A pedal bin is now available for nappies.
- The shower tray has been cleaned.

Supporting documentation submitted

General safety:

- Copies of Garda vetting were submitted.
- A copy of the quotation for the new playground was submitted.

Infection control:

- A copy of the service's nappy changing policy, which includes the nappy changing procedure and a copy of the hand hygiene policy.
- Photographic evidence in relation to the pedal bin.
- A copy of the cleaning schedule, including reference to the cleaning of the shower tray and a photograph of the shower tray.

Summary Comment

Based on the statements and evidence submitted, regulatory compliance is determined to have been met. The security of the outdoor play area will be reviewed at the next inspection.

Part VI - Safety

Regulation 25 - First aid

- 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.*
- A registered provider shall ensure that a suitably equipped first aid box for children-*
 - is safely stored in an easily accessible and conspicuous position on the premises, and*
 - is available to the children attending the pre-school service at all times.*

Compliance Information

- (1) The certification presented for examination indicated that two of the adults had completed First Aid Responder (FAR) training.
- (2)
- (a) Two first aid boxes were easily accessible to adults, while out of reach of the children.
- (b) The first aid boxes were consistently available, should the need for their use arise.

Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-
- (a) any fire drill that takes place in the premises, and
- (b) the number, type and maintenance record of firefighting equipment and smoke alarms in the premises.
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

Compliance Information

- (1)
- (a) The monthly fire drills which had been conducted previously were recorded in writing. The most recent fire drill was noted to have been undertaken on 3 April 2025.
- (b) A list of the number and type of firefighting equipment available in the service was documented. According to the servicing records, the firefighting equipment was last checked on 7 June 2024 and the wired smoke alarm was tested on 5 October 2024.
- (4) The fire evacuation notice was displayed in the East Ferry care room.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-
(e) equipped with adequate and suitable sanitary facilities.*

Non-Compliance Information

(e) There was an insufficient number of wash hand basins available for the 29 children in attendance, at the time of the inspection. It was acknowledged that two toilets and two wash hand basins were accessible adjoining the care rooms and that a nappy changing facility was provided within the staff toilet facility, which had three toilets in total. However, only 1 wash hand basin was available in this staff toilet facility, which was allocated to the staff members and to the 10 children who required nappy changing. One wash hand basin is required for every 11 children and one wash hand basin is required for every 8 adults.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The accessible toilet has been designated for use by staff members and staff have been informed of same. The toilet facility formerly referred to as the staff toilet is now solely for the children's use.

Supporting documentation submitted

The statement from the person in charge is accepted as evidence.

Summary Comment

The response submitted is accepted in meeting the regulatory requirements.