

# Early Years Inspectorate Regulatory Report

## Pre School

<b>Tusla Identifier:</b>	TU2015CE102
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<b>Name of Service:</b>	Mother Goose Creche
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<b>Address of Service:</b>	Clonfadda, Killaloe, Co. Clare
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<b>Eircode:</b>	V94 YP63
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<b>Name of Registered Provider:</b>	Catriona Devereux
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	05/02/2025
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<b>Date of Regulatory Compliance Meeting:</b>	19/02/2025
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<b>Date of Regulatory Enforcement Meeting:</b>	01/05/2025
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<b>No of pre-school children:</b>	AM	47	PM	44
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<b>Address of the Early Years Inspectorate:</b>	Quality and Regulation Directorate Tusla Child and Family Agency Ennis Primary Care Centre Station Road Ennis County Clare
<b>Inspection undertaken by:</b>	A. McCarthy & J. Hayes
<b>Titles:</b>	Early Years Inspectors

### Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

### Conditions if applicable

16<sup>th</sup> June 2025

Regulation 9 Child Care Act 1991 (Early Years Services) Regulations 2016

The Registered Provider will be required to comply with the following condition:

- Ensure 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.

This condition is in place for 12 months.

### Description of service

Mother Goose Creche was established in 2000, as a private childcare facility in Killaloe, County Clare. A programme of care is facilitated on a sessional, part time and full day care basis Monday to Friday from 08:00 to 17:30. During the inspection four care rooms were in operation. The rooms included the Baby room (age range: six months to twenty months), the Toddler room (age range: 15 months to 2.5 years), the Junior ECCE room (age range: three to four years) and the Senior ECCE room (age range: four to five years). The outdoor play area is divided into two sections and is located at the back and side of the service. A school aged childcare service is facilitated in the Senior ECCE room every afternoon and during school holidays.

### Staffing

Fifteen staff are employed by the service. Eight adults worked directly with the pre-school children in attendance, a chef prepared and cooked the meals and is present three days each week. The manager and assistant manager provided an administrative role, prepare and cook the meals when the chef is on leave, provides relief cover in the rooms and assists with the drop off and collection of children to and from three primary schools.

The registered provider is not rostered to work in the service but arrived subsequent to the inspector's arrival, providing assistance in the baby room and school aged childcare room. A student was present on work placement in the morning in the Senior ECCE room and was employed to work directly with the children in the Toddler room in the afternoon. An adult worked with the school aged children and a secondary school student in the Senior ECCE room in the afternoon.

### Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance, health, welfare and development of child, safety and premises and facilities. The inspection focused on assessing areas of non-compliance from last inspection. The inspection focused on an examination of compliance under regulations:

Regulation 9 – Management and recruitment (1)(a)(b)(2)(a)(b)(c)(d) and (4)

Regulation 11 - Staffing levels (1) (2) (8)(a)

Regulation 16-Record in relation to pre-school service (1)(a)(h)(i)(j)

Regulation 19 - Health, welfare and development of child (1)(a)

Regulation 23 - Safeguarding health, safety and welfare of child

Regulation 29 –Premises (d)(e)

Regulation 30 Minimum space requirements (2)

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

05 February 2025

This inspection was carried out to review actions taken by the registered provider to address the non-compliances identified on the last inspection dated 14 and 17 October 2024.

05 February 2025

An immediate action notice was issued to the registered provider to respond to significant risks found under Regulation 23 Safe Sleep practices.

06 February 2025

A response was received from the service outlining interim measures taken to remedy the significant risks. Please refer to regulation 23 in the body of the report.

19 February 2025

A regulatory compliance meeting was facilitated by the Inspection Registration Manager, with the registered provider and the service manager to discuss the non-compliances identified on inspection and the corrective and preventative action responses.

20 February 2025

A letter was issued to the registered provider outlining the non-compliances and outstanding actions required following the regulatory compliance meeting. A response to this letter was not received by the Inspectorate.

01 April 2025

This service was referred to the National Registration Enforcement Panel in relation to unresolved areas of recurring and outstanding non-compliance within the early years' childcare facility.

04 April 2025

A letter of caution and a request for further information was issued by the National Registration Enforcement Panel to the registered provider.

04 April 2025

Representations in response to outstanding non-compliances were submitted by the registered provider to the Early Years Inspectorate. These representations were assessed by the Inspectorate, and the outcome of this assessment is located in the body of the report.

01 May 2025

A regulatory enforcement meeting was facilitated by the national manager for escalation and enforcement and the national inspection manager with the registered provider, a company director and the service manager. The meeting was convened to discuss the repeated non compliances found on inspections.

07 May 2025

Representations in response to outstanding non-compliances were submitted by the registered provider to the Early Years Inspectorate. These representations were assessed by the Inspectorate, and the outcome of this assessment is located in the body of the report.

## 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

(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)

On the 05 February 2025, the manager was the person in charge and a person was available to deputise in their absence. The registered provider arrived at the childcare facility subsequent to the inspector's arrival at approximately 13:10.

(b)

The manager and a named person to deputise were available at all times during the inspection.

(2)

Three files were reviewed in respect of the new adults employed and working in the service since the last inspection. The files of staff where areas of non-compliance were found on last inspection dated 14 and 17 October 2024 under Regulation (2)(a)(c)(4) were also reviewed. The findings included the following:

- (a)  
Seven of the eight references required in respect of four adults were sourced from a past employer.
- (c)  
Garda vetting disclosures were available in respect of all adults employed by the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (4)  
Six of the thirteen adults who required a childcare qualification working directly with the children held Early Childhood Care and Education qualifications at Level 5 and Level 6 on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.

### Non-Compliance Information

- (2)(a)(b)  
A written reference was not available in respect of one adult employed by the service. A non-compliance was noted on last inspection 14 & 17 October 2024 under Regulation 9 (2)(a)(b). This posed a risk to the safety of children when vetting procedures are not completed.
- (d)  
International police vetting was not available in respect of one adult working directly with the children who had lived in another state for a period longer than six months.
- (4)  
Six of the thirteen adults employed to work directly with the preschool children did not hold an Early childhood Care and Education qualification at a minimum of Level 5 on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent. A non-compliance was noted on last inspection 14 & 17 October 2024 under Regulation 9 (4).

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

The following outlines the Corrective and Preventive Actions response and supporting documentation submitted by the registered provider on the 14 February 2025:

#### **Corrective Action**

- (2)(a)(b)  
A reference has been requested by the relevant adult working in the service.
- (d)  
A copy of International police vetting documentation was submitted. The certificate was not translated into English.

(4)

Two adults are enrolled to commence an Early childhood Care and Education qualification at a minimum of Level 5 or equivalent on the National Framework of Qualifications QQI Level 5.

Two adults are in the process of completing an Early childhood Care and Education qualification at a minimum of Level 5 or equivalent on the National Framework of Qualifications QQI Level

An Early childhood Care and Education qualification at a minimum of Level 5 or equivalent on the National Framework of Qualifications remains outstanding for two adults.

### **Preventive Action**

The reference and vetting policy will be reinforced to management.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National registration and enforcement panel. The details are as follows in relation to outstanding non-compliance:

(2)(a)(b)

The outstanding written reference for one adult from a past employer was provided to the Inspectorate. Evidence of validation for this reference was not provided.

The following vetting documentation was provided for the newly appointed adult (February 2025) who maintains the service during operational hours. Two references from sources other than the past employer were provided. Evidence of validation for these references was not provided.

(c)

A record of Garda vetting was not provided in respect of the newly appointed adult (February 2025) who maintains the service during operational hours. The registered provider provided an additional written response stating that Garda vetting was applied for on 24 February 2025. The registered provider noted that until the Garda vetting comes through, the said person does not work while children are on the premises.

(d)

It is acknowledged that international police vetting was submitted to the Inspectorate. However, an official certified translation of page one of this document has not been provided.

There was no confirmation or employment history record provided in respect the newly appointed adult (February 2025) to determine if international police vetting was required.

(4)

The registered provider stated that the baby/wobbler room has been closed, and this will release two qualified staff to work in other areas of the creche.

The registered provider stated that she is returning to take over overall management of the creche, releasing the current manager as a backup qualified staff member. The registered provider noted that the current manager will still manage the day-to-day running of the creche. The registered provider noted that the staffing will be as follows:

Room – Staff - No of children

**Toddler room:** two adults with QQI Level 5 to care for 11 children. A record of an Early Childhood Care and Education qualification has not been provided in respect of one of these adults.

**Junior ECCE room:** two adults with a QQI Level 6 to care for 14 children.

**Junior ECCE room:** two adults with QQI Level 5 and 6 to care for 15 children (11 plus 4 from senior ECCE).

**Senior ECCE room:** a.m., two adults with QQI Level 6 to care for 16 children (one adult works in this room a.m. only).

**Senior ECCE room:** p.m. (formerly the baby room), one adult with QQI Level 5 to care for 10 children.

The registered provider stated that three of the four adults that did not hold an Early Childhood Care and Education qualification QQI Level 5 will look after the after schoolers until they receive their qualifications. The registered provider also noted that these courses will ensure that the adults are qualified going forward, however no record of confirmation of the staff commencement in an Early Childhood Care and Education qualification QQI Level 5 course has been provided to the Inspectorate.

(7)

A copy of the recruitment policy and a checklist for new employees was provided by the registered provider. The registered provider stated that each existing employee has been re-issued with the policy and procedure document. The registered provider stated that a staff training meeting was scheduled for 03 March 2025 to re-emphasise the importance of all aspects of safety in creche.

**Supporting documentation submitted 14 February 2025:**

(2)

(a)(b)

No evidence submitted.

(d)

A copy of International Police vetting documentation was submitted. The certificate of translation into English was not submitted.

(4)

An Early childhood Care and Education qualification at a minimum of Level 5 or equivalent on the National Framework of Qualifications was not submitted in respect of the six adults.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration and Enforcement Panel. The details are as follows in relation to outstanding non-compliance:

(2)(a)(b)

A copy of the outstanding written reference for one adult from a past employer was provided to the Inspectorate. A copy of two references from sources other than past employer were provided for the maintenance person. No evidence of reference validation for the three references submitted.

(c)

No evidence of Garda vetting in respect of the newly appointed adult (February 2025) who maintains the service.

(d)

A copy of international police vetting with an official certified translation of page one of this document has not been provided in respect of one adult who had lived in another State for a period longer than six months. No evidence provided in respect of the newly appointed adult (February 2025) to determine if international police vetting was required for this adult.

(4)

No evidence of Early Childhood Care and Education qualification QQI Level 5 course or a qualification has been provided to the Inspectorate in respect of four adults employed by the service.

(7)

A copy of the service's recruitment policy and a checklist for new employees was provided by the registered provider.

### Summary Comment

The following information is based on the registered provider's CAPA response 14 February 2025 and representations submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration and Enforcement Panel.

Regulation 9 (2)(a)(b) remains outstanding, as evidence of reference validation was not provided in respect of the three references submitted.

Regulation 9 (2)(c) remains outstanding, as evidence of garda vetting in respect of one newly employed adult (February 2025) remains outstanding.

Regulation 9 (2)(d) remains outstanding, as an official certified translation of page one of the international police vetting document has not been provided in respect of one adult. In respect of a newly employed adult, it could not be determined if international police vetting was required.

Regulation 9 (4) remains outstanding and cannot be determined as no evidence of the commencement or completion of the Early Childhood Care and Education qualification QQI Level 5 course or qualification has been provided to date in respect of four adults employed by the service.

Regulation 9 (7) if the CAPA response is implemented this should address the non-compliance. This will be assessed on the next inspection.

Based on representations received 07 May 2025

Regulation 9 (2)(a)(b) remains outstanding, as evidence of reference validation was not provided in respect of the three references submitted.

Regulation 9 (2)(c) is addressed, as evidence of garda vetting in respect of the newly employed adult was submitted.

Regulation 9 (2)(d) remains outstanding. An official certified translation of page one of the international police vetting document has not been provided in respect of one adult. The registered provider has requested additional time to get the police vetting translated. In respect of a newly employed adult, it has been confirmed at the regulatory enforcement meeting that international police vetting was not required. Additionally, an employment history record was submitted on respect of this person.

Regulation 9 (4) remains outstanding and cannot be determined as no evidence of completion of the Early Childhood Care and Education qualification QQI Level 5 course or qualification has been provided to date in respect of four adults employed by the service.

Based on representations received 22 May 2025

Regulation 9 (2)(a)(b) remains outstanding, as evidence of reference validation was not provided in respect of the three references submitted.

Regulation 9 (2)(d) The registered provider advised that the adult with outstanding translation of the police vetting document is no longer employed in the service however the certified translation of the document was not submitted.

Regulation 9 (4) A letter of completion of QQI Level 5 in Early childhood care and education was submitted in respect of one adult. One adult who did not have the required qualification is no longer employed in the service. The third of the four adults without qualifications only works with the school age children now and is no longer working directly with pre-school children No evidence of completion of the Early Childhood Care and Education qualification QQI Level 5 course or qualification has been provided in respect of a fourth adult employed by the service.

The registered provider provided a staffing overview in the email dated 22 May 2025. The staff qualifications were outlined and the childcare rooms where each staff member worked were named however the staff members themselves were not named and this is required in order to cross check the staffing and their qualifications that are currently on record

## 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)  
During the inspection, an adequate number of adults worked directly with the children in attendance.
- (2)  
On the 05 February 2025 the ratio of adults caring for children was maintained in the service. Ten adults worked directly with forty-seven children in the morning and eleven adults worked directly with forty-four children in the afternoon.
- (8)(a)  
During the inspection more than two adults were available in the childcare facility at all times.

### 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;*

*(h) details of attendance by each pre-school child on a daily basis;*

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

*(j) details of any medication administered to a pre-school child attending the service with signed parental consent;*

#### Compliance Information

(1)

(a)

Employment history and photo identification records were available in respect of the adults working in the service.

(h)

The children's arrival and departure times were recorded by the adults on the childcare application system.

(j)

Written and electronic records were available detailing medication administered to pre-school children attending the service with signed parental consent.

#### Non-Compliance Information

(1)(i)

The staff roster for week ending 07 February 2025 did not accurately reflect the adults working directly with the children in the service during the inspection. One adult and one student were not detailed on the staff roster. This non-compliance was found on last inspection 14 & 17 October 2024 under Regulation 16(1)(i). This posed potential risk to the safety of the adults in the event of an emergency.

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

The following outlines the Corrective and Preventive Actions response and supporting documentation submitted by the registered provider on 14 February 2025:

##### **Corrective Action**

(1)(i)

The registered provider advised that the staff roster has been amended to allow for change which would include if staff were absent or were present when not rostered.

### Preventive Action

The importance of maintaining an accurate staff roster has been stressed to management.

The business owner will carry out sporadic checks of the staff roster in future.

### Supporting documentation submitted 14 February 2025

(1)(i)

A staff roster was presented during the regulatory compliance meeting.

### Summary Comment

Based on the registered providers CAPA response 14 February 2025 the non-compliance under Regulation 16(1)(i) has been addressed.

## 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 of Children:

The adults treated the children in a kind and caring manner and positive behavioural strategies were used during interactions. The adults conversed with the children in a sensitive and respectful manner, used soft tones of voice, engaged with the children at their level and responded promptly to their cues for assistance and comfort. The children were encouraged to be independent in play, whilst caring for their belongings and using the toilet. Staff supervised and treated the children in a sensitive manner during nappy changes and toileting. Nappies were changed frequently and on an individual need's basis. The children were encouraged and supported to manage their own personal care and nasal care appropriate to their age and level of development. The infant's sleep was attended to on an individual basis and an alternative area and activities were offered for children who did not wish to sleep. The infants were encouraged to feed themselves and promoted to be independent. Appropriate crockery and feeding utensils were provided in each room and these periods were observed to be relaxed and unhurried. All children were offered an opportunity to transition from the indoor to the outdoor area for play based activities.

## 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 internal and external entrances were secured to monitor the safe entry and exit of the children to and from the childcare facility.
- The designated outdoor area was secured with fencing and gates to protect the children within.
- The seven highchairs in the room adjacent to the Baby room were fitted with five-point safety harnesses.
- Looped blind cords on the windows were secured and out of reach of the children.
- Protective covers were placed over the light fittings in the service.
- Thermostatically, controlled warm water was available at the wash hand basins throughout the service.

##### Infection Control:

- Infant baby formula was stored in labelled bottles in the refrigerator in the room adjacent to the Baby room.

##### Administration of Medication:

- Documentation was available for the adults to use should medication be required to be administered to a child.
- An administration of medication policy was available to inform the adults working in the service and parents/guardians of the service's procedures.

#### Non-Compliance Information:

##### Safe Sleep:

During the inspection an immediate action notice was issued to the registered provider in relation to the significant risk as outlined in the following six points. The following procedures are at variance with the service's safe sleep best practice guidance and the service policy and posed a risk to the safety of sleeping children:

1. Standard cot mattresses were not in use in the cots available in the service. Five play mats were observed in use in the cots. These were not firm, were thin and did not have labels to indicate compliance with European Union safety standards. This is at variance with the corrective actions provided in response to the non-compliance found on inspection 14 & 17 October 2024 which stated that new cot mattresses had been purchased.
2. A cot where a child slept was placed in contact with a radiator in the sleep room. The temperature of the radiator was recorded as 47.2°Celsius. This posed a risk of burning to a child.
3. The sleep room was not maintained within the required range of 16 to 20° Celsius for children aged less than twelve months and 18 to 22° Celsius for two children aged over 12months. The sleep room temperature was recorded as 23°Celsius while three children aged fifteen, eighteen and nineteen months slept. The thermometer in the sleep room was not turned on to support staff to monitor and maintain the room temperature.
4. Light weight blankets were not in use for sleeping children. Two children aged 15 and 19 months were observed sleeping with fleece blankets over them in the cot room where the temperature was recorded at 23°Celsius. These children were observed to have red cheeks. This posed a risk to the children overheating.
5. During the inspection the children's observations, to include position, colour and breathing were not physically monitored every ten minutes during sleep periods. This non-compliance was found on previous inspections on the 14 & 17 October 2024.

### General Safety:

6. The room temperature in the baby room was not maintained between 18 to 22 °Celsius. The room temperature was recorded as 29.4 °Celsius. This posed a potential risk of harm to the babies attending this room. It is acknowledged once notified by the inspectors, that the adults caring for the babies took immediate action by opening the windows and turning off the radiator. Subsequently the temperature reduced to 19.4 °Celsius.
7. A fan with a long lead was placed adjacent to cots in the sleep room and accessible to the children. This posed a potential risk of strangulation as the children were not supervised at all times.
8. The radiators in the Baby room, Toddler room, the children's sanitary facility adjacent to the manager's office and the Senior ECCE room were recorded with touch temperatures of 52.4°Celsius, 53.2°Celsius,

55°Celsius and 51.2°Celsius. This posed a potential risk of a burn injury to children as the acceptable maximum temperature of 50°Celsius was exceeded.

9. A clothes dryer that was used to dry clothing was located at the entrance to the Senior ECCE room and was in use during the inspection. This posed a potential risk of injury to a child.
10. A cupboard in the nappy changing area was unlocked and toxic cleaning agents and plastic packaging for nappies were accessible to the children. One of the containers of cleaning agent which was located on a low-level shelf did not have a secure lid. This posed a potential risk of harm or poisoning should a child access this cupboard.
11. The shower door in the adult sanitary facility was broken and placed lying against the wall. This was accessible to children and posed a potential safety risk.

### Infection Control:

12. Soothers were not stored in an adequate manner. The soothers were not stored in individually labelled containers. This posed a risk of cross infection. This non-compliance was found on previous inspections on 14 & 17 October 2024 and on the 07 September 2022.
13. The containers for liquid soap were not suitable at the wash hand basins in the sanitary facilities and nappy changing areas. The containers had to be touched to open the lid each time the children and adults washed their hands. This posed a risk of cross infection and did not facilitate effective hand hygiene. A non-compliance was found on last inspection 14 & 17 October 2024 in relation to inaccessibility to liquid soap for children to wash their hands.
14. The adult sanitary facility was used inappropriately to store equipment.

### Corrective and Preventive Actions submitted by the Registered Provider

The following information is based on the registered provider's CAPA response on 14 February 2025 and representations submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration and Enforcement Panel. The details are as follows in relation to outstanding non-compliance under regulation 23:

### Corrective & Preventive Action

#### Safe Sleep:

1. During the regulatory compliance meeting the registered provider advised that the mats in the cots had been replaced with the previous mattresses which were removed following the inspection 14 & 17 October 2024. These mattresses were unsuitable as they were noted to be unclean, stained and not covered with a

wipeable surface. The registered provider stated that new mattresses had been ordered and were due to be delivered 19 February 2025 and confirmed that floor mats were no longer being used as mattresses in the cots.

2. The cots in the sleep room will no longer be placed close to radiators.
3. The boiler temperature has been reduced to less than 50 degrees. Individual thermostatic valves have been ordered for all radiators in the premises and will be fitted as soon as possible.
4. Only lightweight blankets will be used in future. All heavier blankets have been removed from the cots. Parents have been informed that only lightweight blankets should be provided in future.
5. The sleep monitoring policy has been updated to include a check sheet in the room where each ten minute check will be recorded.

Representations were submitted by the Registered Provider 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel. The details are as follows in relation to outstanding non-compliance found under Regulation 23 Safe Sleep points 1 and 3:

The registered provider stated that a training meeting was scheduled for the 03 March 2025 after the creche closed to emphasise the safety aspect of sleep protocol and more generally, the safety statement. Also, each employee to be re-issued with the policy and procedure document and to be signed off once read.

The registered provider stated that the service will no longer cater for babies or wobblers under two years old from 28 March 2025.

The service policy for over two-year-olds is as detailed in the Tusla Early Years Inspectorate website which states the following:

- Each child will be provided with an individual sleep mat or child bed (stackable bed) positioned in a way that allows easy access around each mat or bed.
- Beds and mats must meet recognised EU safety standards.
- Each mat/bed must be 50 cm apart from the next mat/bed on all sides.
- Sleep mats must be cleaned between use.

### General Safety

6. A new temperature display unit has been installed in the baby room with the permitted temperature range of 18 – 22 degrees displayed also.
7. The fan has been removed from the sleep room.

8. The boiler temperature has been reduced to less than 50 degrees. Individual thermostatic control valves have been ordered for all radiators in the premises.
9. The clothes dryer that was located at the entrance to the Senior ECCE has been relocated.
10. A lock has been fitted to this cupboard in the nappy changing area.
11. The shower door in the adult sanitary facility has been repaired.

The following information is based on the registered providers CAPA response 14 February 2025 and representations submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration and Enforcement Panel. The details are as follows in relation to outstanding non-compliance under Regulation 23 General Safety points 6, 8, 10:

6. No evidence was provided in relation to the monitoring of the permitted temperature range of 18 to 22 degrees Celsius within the playroom/previous Baby room.
8. No evidence was provided in relation to actions taken to maintain the permitted temperature of the radiators in four's room to a maximum of 50 degrees Celsius.
10. No evidence was provided in relation to actions taken to secure the cupboard in the nappy changing area.

### **Infection Control:**

12. New individual soother containers have been purchased.
13. The soap containers have been replaced.
14. This equipment that was stored in the adult sanitary facility has been removed.

### **Supporting documentation submitted 14 February 2025**

#### **Safe Sleep:**

1. Photograph of the old mattresses that were required to be replaced.
2. Photograph of the cot moved away from radiator
3. No evidence.
4. A copy of email sent to parents requesting that only cellular blankets are to be used in the cots while children sleep.
5. A copy of the service sleep policy and a copy of an email issued to staff outlining safe sleep practices.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel in relation to outstanding non-compliance found Regulation 23 Safe Sleep points 1 and 3. The registered provider advised that the sleep room is no longer in use.

### General Safety:

6. No evidence.
7. Photograph of the sleep room
8. No evidence.
9. Photograph of the clothes dryer relocated.
10. No evidence.
11. Photograph of the shower enclosure.

Representations were submitted by the registered provider 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel.

The evidence is as follows in relation to outstanding non-compliance under Regulation 23 General Safety points 6, 8, 10:

6. No evidence was provided in relation to the monitoring of the permitted temperature range of 18 to 22 degrees Celsius within the playroom/previous Baby room.
8. No evidence was provided in relation to actions taken to maintain the permitted temperature of the radiators in four rooms at a maximum of 50 degrees Celsius.
10. No evidence was provided in relation to actions taken to secure the cupboard in the nappy changing area.

A risk assessment document and a risk assessment checklist template were submitted. The registered provider advised that this is a work in progress and is updated when issues arise and includes as much as is evident currently, but it will be added to and changed with experience. The registered provider noted that a checklist will be completed weekly on a Monday morning before the children arrive at the service.

### Infection Control:

12. Photographic evidence the soother storage container.
13. Photograph of the liquid soap containers.
14. Photographic evidence of adult sanitary facility.

### Summary Comment

The details are as follows in relation to regulatory compliance under regulation 23:

#### Safe sleep

The following information is based on the registered provider's CAPA response on 14 February 2025 and representations submitted 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel. The areas of non-compliance under Regulation 23 Safe Sleep have been addressed.

#### General Safety:

Based on the registered providers CAPA response 14 February 2025 and representations submitted 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel in relation to outstanding non-compliance found under Regulation 23 General Safety:

The areas of non-compliance that have been addressed are Points 6,7,8 9, 10, 11.

#### Infection control:

Based on the registered providers CAPA response on 14 February 2025:

The areas of non-compliance have been addressed under Regulation 23 infection control.

### Part VII - Premises and Space Requirements

#### Regulation 29 – Premises

*A registered provider shall ensure that the premises of the service are-*

- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

#### Non-Compliance Information

- (d)
- The premises was not cleaned, maintained and repaired as required as outlined below:
1. Trailing ivy foliage and layers of cobwebs were observed protruding from the extractor fans and ceiling windows in the two sanitary facilities adjacent to the senior ECCE rooms. This non-compliance was found on last inspection 14 October 2024. The extractor fans did not appear to be in working order. There were no openable windows to allow for exchange of air. This posed a risk to both the staff and children attending the service.
  2. Signs of mould were observed in the Toddler room. Four large areas with black spots were visible on the ceiling.
  3. The walls in the sanitary facilities adjacent to the Senior ECCE and school aged childcare room had areas of chipped and peeling paint.
  4. A hole was observed on a skirting board in the Senior ECCE sanitary facility. A rodent bait box was placed in front of this hole. This sanitary facility is accessed by preschool and school aged childcare children. This posed a risk to children as they had unsupervised access to this area.
- (e)
5. An insufficient number of sanitary facilities was available to the adults working in the service. Only one toilet and one hand wash basin were available for the fifteen adults. One toilet and one wash hand basin are required for every eight adults working in the service.

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

The following outlines the Corrective and Preventive Actions response and supporting documentation submitted by the registered provider 14 February 2025:

#### Corrective Action

- (d)
1. Trailing ivy foliage and layers of cobwebs has been cleaned. All broken extractor fans have been identified and will be replaced by 19/02/2025.

2. The signs of mould observed in the Toddler room have been cleaned repainted.

3. The walls in the sanitary facilities adjacent to the Senior ECCE and school aged childcare room have been repainted.

4. The skirting has been repaired and the bait box removed from the sanitary facility adjacent to the senior ECCE room.

(e)

5. Planning permission to build a 47.43sqm extension which will include 2 extra toilets has been obtained and tenders are currently being requested. The registered provider confirmed at the regulatory compliance meeting that an insufficient number of toilets are currently available for the number of adults working in the service.

### Preventive Action

(d) (e)

A maintenance person will be engaged on contract for one day per week to improve building maintenance. An extension to the premises is planned.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel. The evidence relates to outstanding non-compliance under (d) and (e) as follows:

(d)

A building survey report from a competent person was submitted which indicated that the cause of the ivy growth and mould has been addressed and will be monitored to prevent any future issues.

(e)

The registered provider stated that the service has ordered a temporary toilet which was to be delivered 27 February 2025 while the service is waiting to build a second toilet beside the staff room.

The service is currently looking for builders to undertake the installation and will update the Inspectorate when a date is known.

### Supporting documentation submitted 14 February 2025

(d)

1. No evidence.
2. No evidence.
3. No evidence.
4. No evidence.

(e)

5. Documentation in relation to planning permission for a small extension comprising of a staff room.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel. The evidence relates to outstanding non-compliance under (d) and (e) as follows:

(d)

A building survey report from a competent person was submitted which indicated that the cause of the ivy growth and mould has been addressed and will be monitored to prevent any future issues.

(e)

The registered provider stated that the service has ordered a temporary toilet which was to be delivered 27 February 2025 while the service is waiting to build a second toilet beside the staff room.

The service is currently looking for builders to undertake the installation and will update the Inspectorate when a date is known.

### Summary Comment

Based on the registered provider's response, the non-compliances under regulation 29 (d) are addressed.

Based on the registered provider's response, the non-compliances under regulation 29 (e) remains outstanding. A timeframe to address the insufficient number of adult toilets has not been submitted.

Based on representations received 07 May 2025

Based on the registered provider's response and photographic evidence indicating the installation of an additional toilet and wash hand basin, the non-compliance under regulation 29 (e) is addressed.

## Part VII - Premises and Space Requirements

### Regulation 30 - Minimum space requirements

(2) A registered provider of a full day care service or a part-time day care service shall ensure that the minimum amount of clear floor space specified in column (3) of Schedule 7 opposite a particular reference number specified in column (1) of that Schedule in respect of the age range of children specified in column (2) thereof at that reference number is available for each child in that age range attending the service.

### Compliance Information

(2)  
Adequate space was provided for the children in attendance in the Baby room, the Toddler room the Junior and Senior ECCE rooms (morning only).

### Non-Compliance Information

(2)  
Adequate space was not provided for the children attending the Junior ECCE room in the afternoon once the school age children arrive and start to use the Senior ECCE room. This non-compliance was found on 14 and 17 October 2024. The following table illustrates the non-compliance relating to space requirements:

Rooms:	Number and age range of children present:	Type of Service required:	Space required per child:	Space available:	Space required:
Junior ECCE Room Afternoon	25 pre-school children (3-4yrs)  <b>Note:</b> 14 children transferred from the Senior ECCE Room in the	FDC	2.3 m <sup>2</sup>	38.27 m <sup>2</sup>	57.5 m <sup>2</sup>

	<p>afternoon to join the 11 children in the Junior ECCE room.</p>				
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### Corrective & Preventive Action submitted by the Registered Provider

The following outlines the Corrective and Preventive Actions response and supporting documentation submitted by the registered provider 14 February 2025:

#### Corrective and Preventive Action

(2) Planning permission has been obtained to build on an extra 47.43sqm extension. This is currently for a staff room but discussions with the planners are ongoing to convert this into a playroom. Failing this option, the service can go ahead with the staff room and incorporate the current kitchen and staff room into the existing playroom to add extra space.

The registered provider stated that parents of 4 babies booked in and due to start in April have been contacted to inform them that the service can no longer take them.

Representations were submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel. The evidence relates to outstanding non-compliance under Regulation 30 (2) as follows:

The registered provider stated that the service no longer accommodates babies under two years of age from 28 March 2025.

The registered provider stated that once the baby room is free, the service will use that space for the 10 junior ECCE children, which is the cause of the overcrowding in the middle room in the afternoons.

The registered provider stated that with the high-chairs and cot removed from the room at the back, this space can be used as a quiet workspace (story time, colouring, painting) while the front room will be the play area.

The registered provider stated that a change in circumstances in relation to change in details of the service was submitted. A change in circumstances submission was received on 20 February 2025 in relation to change in:

**Age profile of children:** from: 0 - 6 Years to 1– 6 Years.

**Change of room type:** from baby room to pre-school room

However, as all the required documentation was not received, the application has been closed as incomplete by the Early Years Inspectorate.

## **Supporting documentation submitted 14 February 2025**

(2) Documentation in relation to planning permission for a small extension comprising of a staff room.

No supporting documentation was submitted by the registered provider on the 04 April 2025 following receipt of a letter of caution and a request for further information from the National Registration Enforcement Panel in relation to outstanding non-compliance found under Regulation 30(2).

## **Summary Comment**

Based on the registered provider's CAPA response on 14 February 2025 and representations submitted 04 April 2025 the non-compliance under regulation 30 (2) remains outstanding. The change in circumstances process remains outstanding and no evidence was submitted or a confirmation of the timeframe to undertake the extension to the premises.

Based on representations received 07 May 2025

Evidence of a change in circumstance application with supporting documentation has been submitted and this is currently awaiting assessment. Following assessment, the registered provider submitted further clarification on 14 May 2025, and the CIC application can be approved. This will address the outstanding non-compliance under regulation 30(2).