

# Early Years Inspectorate Regulatory Report

## Pre School

**TUSLA Identifier:** TU2015DS119

**Name of Service:** Kids Inc Rathfarnham

**Address of Service:** Hillside Park, Ballyroan Road, Rathfarnham, Dublin 16.

**Eircode:** D16 KX50

**Name of Registered Provider:** John Harnett

**Service type:** Full Day

**Date of Inspection:** 24/02/2026

<b>No of pre-school children:</b>	AM	52	PM	38
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate 2 <sup>nd</sup> Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15   D15 CF9K
<b>Inspection undertaken by:</b>	C. Harte & L.A Webster
<b>Title:</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** Not applicable

### Description of service

Kids Inc Rathfarnham is a private full day care service located in grounds of Coláiste Eanna school in Rathfarnham Dublin 16. The service is one of three early years services owned by the registered provider.

The service operates 7:30am-6:30pm Monday to Friday. The service has the following care rooms Baby room (1-2 years), Toddler 1 (1-2 years), Preschool room (2.5 – 4 years), Montessori Room (3-5years) and ECCE room (4-5 years). The service participates in the Early Childhood Care and Education scheme (ECCE) from 9:00am-12:00pm offering sessional care. The premises also includes an office, staff room, sanitary facilities and an outdoor play area. The service also offers a registered school age service.

### Staffing

The registered provider currently employs 17 staff to work in the service including the person in charge, deputy person in charge and 15 early years professionals who work directly with the children two of which are relief staff and work across other premises operated by registered provider. On the day of the inspection there were 14 staff present including the person in charge, deputy person in charge and 12 early years professionals. All staff worked directly with the children including the management team.

### 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.

The inspection focused on an examination of compliance under Regulations 9,11,19,23 and 26. However, on inspection additional non-compliance which posed a risk was identified under Regulation 29 Premises. These findings are outlined within the relevant regulation within this report.

A sampling process was used to assess compliance under regulation 19 Health, Welfare and Development of Child. As a result, the scope of the inspection included the Toddler, Preschool and Montessori 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

An Immediate Action Notice was issued to the registered provider on the day of the inspection under Regulation 23, in relation to a non-compliance identified under Regulation 23. A response was received from the registered provider which mitigated the risk identified. See body of report for details.

## 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
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.

(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,
- (b) consideration of references from reputable sources in the case of a person who has no past employers,
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.

(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.

(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.

#### Compliance Information

(1) The registered provider ensured that:

- (a) The service had a designated person in charge and a named person to deputise as required.
- (b) A review of the roster showed that either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service on the day of inspection.
- (c) There was a clear management structure in place this was demonstrated through discussion with staff and a display in the hallway.

(2) Following a review of previous inspection information, information available on inspection and discussion with the person in charge it was determined that seven new staff members had been employed since the previous inspection. All seven of these new staff members work directly with the children. One student was present on an educational work placement programme. A total of eight files were reviewed. In addition, Garda vetting for three staff member whose disclosures were identified as due for renewal was requested for review.

The registered provider had completed the following checks:

- (a) Ten written and validated references were available from past employers.
  - (b) Six written and validated references were available from a source other than a past employer.
  - (c) Garda vetting disclosures had been obtained for all 11 reviewed. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
  - (d) Police vetting was available for four adults who had lived in a country other than Ireland for a period of seven months or more as an adult.
- (4) Evidence was available to show that seven staff members who worked directly with the children held 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.

### Non-Compliance Information

(3) Although a vetting disclosure was available for a staff member, there was no consideration of the disclosure such as a risk assessment undertaken by the service. Any disclosures should be assessed to determine any potential risk to the children.

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

#### **Corrective and Preventive Action**

A risk assessment was done with the staff member on 27th Feb 2026. Kids Inc's HR Manager is responsible for close monitoring of recruitment team's review of police clearance forms and Garda Vetting. For any disclosures they will carry out risk assessments.

#### **Supporting documentation submitted**

Documentary evidence.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 has been addressed.

## Part III – Management and Staff

### Regulation 11 - Staffing levels

*(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*

*(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

### Compliance Information

(1) On the day of inspection there were an adequate number of adults available to the children attending the service to meet their care needs.

- There were 13 staff available to children present on the morning of the inspection when the inspectors arrived unannounced.
- The person in charge and deputy person in charge provided support across the rooms.

(2) The adult to child ratios were maintained correctly throughout the inspection. A review of the room attendance sheets showed there were sufficient staff allocated to the care rooms for the numbers of children in attendance.

### 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

#### Compliance Information

(1) (a) The following practices were observed to be in place to support the learning, development and wellbeing of the children attending:

- Staff actively engaged with the children throughout the day and joined them in conversation and play. The interactions were calm and pleasant.
- Staff were observed to use age-appropriate strategies for behaviour management and engage with children at their level.
- A staff member was observed to gently encourage a child to join an activity with their peers.
- Staff were aware of children's dietary requirements.
- Appropriate outdoor clothing was available for children to support comfort while playing outside.
- Soft music was played to support a resting environment for sleeping children.
- Children's heavy clothing was removed before sleep to support comfort.
- Low level drinks stations were present in the care rooms for children to access water throughout the day.
- Staff advised how parents are given verbal daily updates at collection time on the child's day.

#### Non-Compliance Information

(1)(a)

Basic needs:

1. Staff did not adequately support children with nasal hygiene aiding comfort in the Toddler room. Despite interaction with the children, staff did not address the need for nasal hygiene as children were observed to be left with nasal discharge for prolonged periods on the morning of the inspection.
2. Dinner was not served in a prompt manner to ensure a warm meal was provided in the Toddler room. The dinner arrived in the care room at 11.40am in a large plastic bowl, at 11.44am it was covered using two hand tissues and was not served till 12.09pm.

### Physical and material environment:

- Resources in the Preschool room were limited and not laid out in an inviting accessible manner to promote play. This reduced children's opportunity for choice and play experiences.

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

#### Corrective and Preventive Action

- Management met with staff to reiterate the importance of nasal hygiene. Staff were reminded that nasal hygiene must be addressed constantly and it is not acceptable that children are left with nasal discharge for any period of times. Staff signed off on Kids Inc infection control policy and confirmed they will abide by the policy at all times. All staff will continue to be reminded on monthly staff meeting about the importance of nasal hygiene and infection control. Management will observe practices onsite and staff will be regularly retrained in all compulsory policies.
- Management held a meeting with staff to discuss the importance of communication between the room and staff on kitchen duty on any changes/ delays in the routine that could impact the mealtimes. Staff on kitchen duty were retrained in correct procedures of serving food ensuring covers are on when leaving the kitchen. All staff will continue to be reminded on monthly staff meeting about the importance of communication between team members and staff on kitchen duty. Management will observe practices onsite.
- Management met with staff to discuss room layouts in line with Aistear/ Siolta Practise Guide – Pillar: Creating Inclusive Learning Environments. The room was completely reorganised with new room layouts and some new resources purchased to support needs, interests and abilities of children in the room. Management will support the staff in the room to make sure the room layouts are working for the room, are inviting for children and equipment is stored in an organized manner. Room Leaders will continue to attend cross collaboration meetings with other Kids Inc room leaders to share ideas with peers.

#### Supporting documentation submitted

Service policy

Signed staff meeting minutes.

Displayed signage.

Photographic evidence.

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 19 have been addressed.

## 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 service entrance was secure when the inspectors arrived unannounced. Staff attended the door to allow access.
- The garden area was observed free from hazards and suitable for use on the day of the inspection.
- An ambient room temperature was maintained in a room where children over the age of 2 years old played.
- Toys and play equipment were observed to be suitable for use.

##### Infection Control:

- Thermostatically controlled water, liquid hand soap and dispensed hand towels were available.
- Windows were open allowing fresh air to circulate.

##### Administration of Medication:

- Medication was clearly labelled.

##### Safe Sleep:

- An ambient room temperature between 18-22°C was maintained in a room where children over the age of 1 year old were sleeping.

##### Fire Safety:

- Fires exits were observed free of obstruction the day of the inspection.

#### Non-Compliance Information

##### General Safety:

1. The lock on the low-level press under the sink was damaged and did not work correctly in the Toddler room. This resulted in cleaning agents being accessible to children and posed a risk of accidental poisoning. This was a non-compliance on the previous inspection. The preventive action has not been maintained in line with the information provided to the inspectorate following the last inspection.  
Exposed screws on a shelf in the Preschool room posed a potential risk of injury to children.

### Infection Control:

3. Hand hygiene practices were not completed in line with the service policy and posed a potential infection control risk. A staff member did not wash their hands following nappy changing. Inadequate handwashing practice was a non-compliance on the previous inspection. The preventive action has not been maintained in line with the information provided to the inspectorate following the last inspection.
4. Teddies and pillows in the Toddler room cosy area were observed visibly stained and posed a potential infection control risk.

### Administration of Medication:

5. The emergency medication available for a child with a medical need who was attending the service on the day of inspection was expired. This posed a significant risk to the child's safety, and an immediate action notice was issued.

### Safe Sleep:

6. Safe sleep practices for children under the age of 2 sleeping in cots were not carried out in line with Tusla safe sleep guidance or service policy which posed a risk to children's safety.
  - Between 1.29pm - 1.51pm no physical sleep check was conducted. Physical sleep checks are required every ten minutes.
  - An inaccurate record of sleep checks was maintained. The record detailed a physical sleep check that was not conducted.

The practice and recording of comprehensive and timely physical sleep checks helps provide for children's safety. This was a non-compliance on the previous inspection. The preventive action has not been maintained in line with the information provided to the inspectorate following the last inspection.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

##### General Safety:

1. A new lock was installed on the low-level press. The premises will continue to be monitored by health and safety officer. All defects will be reported to the manager who will update the maintenance list and will report it to Head Office.
2. The screws on the shelf were removed on the evening of the inspection, and a new foam protector was put on bottom of the shelf. The premises will continue to be monitored by health and safety officer. All defects will be reported to the manager who will update the maintenance list and will report it to Head Office.

### **Infection Control:**

3. Management had a meeting with staff to discuss the importance of hand hygiene practices following changing nappies. Staff reread and signed off on Kids Inc nappy changing policy. The manager retrained the staff in the nappy changing protocol. All staff will continue to be reminded on monthly staff meeting about the importance of following a correct protocol for nappy changing. Management will observe practices onsite and staff will be regularly retrained in compulsory policies.
4. Management had a meeting with staff to discuss infection control and cleanliness and hygiene. Staff reread and signed on Kids Inc infection control policy and cleanliness and hygiene. New schedule for washing soft toys, cushions and dress-up was introduced for the Toddler Room.

### **Administration of Medication:**

5. On the day of the inspection, the parent was contacted and the new emergency medication was requested before the child was allowed to come back to the centre. The staff members reread and signed Kids Inc Policy on administration of medications. Monthly checks will be completed on all emergency medications by staff and spot checks completed by management. First aid officer will continue to run additional audits on medications.

### **Safe Sleep:**

6. On the day of inspection, a meeting was held with the staff involved to remind them of the importance of carrying out comprehensive and timely physical checks in the sleep room and recording correct information on the sleep chart in line with Kids Inc policy on safe sleep. The sleep policy will continue to be discussed with team at staff meetings. Management will do regular spot checks on sleep check forms and comprehensive physical checks being carried out.

### **Supporting documentation submitted**

#### **General Safety:**

Photographic evidence.

#### **Infection Control:**

Service policy

Signed staff meeting minutes.

Cleaning schedule.

#### **Administration of Medication:**

Service policy.

Signed staff meeting minutes.

## Safe Sleep:

Service policy.

Signed staff meeting minutes.

## Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 have been addressed.

## 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) A record was maintained of all fire drills which had been completed in the service. The records indicated that fire drills were carried out monthly. The last recorded fire drill took place on 29 January 2026.
  - (b) A record of the number, type and maintenance record of firefighting equipment and smoke alarms in the premises was available. The certificates reviewed showed that the firefighting equipment and the smoke alarms had been serviced on 18 June 2025.
- (4) A visual notice of the procedures to be followed in the event of a fire was consistently displayed around the service.

### 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*

#### Non-Compliance Information

(d) During the inspection it was observed that the premises was not cleaned and maintained as required. The following was observed:

- The anti-slip flooring on the staircase was damaged and torn.
- The light in the Toddler room by the sink area was not operating correctly and was flickering intermittently.
- A shelving unit in the Toddler room had a sticky residue which held dirt and debris and had exposed sections of chipboard.
- Low level tables in Toddler room were heavily stained.
- The blind in the Toddler room was heavily stained.
- The flooring in Toddler room was visibly dirty with a layer of residue.

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

##### Corrective and Preventive Action

- The anti-slip flooring on the staircase was repaired.
- A bulb was replaced in the light fitting in the Toddler Room by the sink area.
- The shelving unit in Toddler Room was repaired, and the residue was cleaned off
- The low-level table in Toddler Room was replaced.
- The blind in Toddler Room was cleaned thoroughly.
- The flooring in Toddler Room was cleaned and buffed.
- The premises will continue to be monitored by health and safety officer.

All defects will be reported to the manager who will update the maintenance list and will report it to Head Office.

##### Supporting documentation submitted

Photographic evidence.

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 29 has been addressed.