

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015DS181
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<b>Name of Service:</b>	StartBright Bawnogue
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<b>Address of Service:</b>	ACE Enterprise Park, Bawnogue Road, Clondalkin, Dublin 22, Co. Dublin
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<b>Eircode:</b>	D22 W6V3
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<b>Name of Registered Provider:</b>	Elaine McQuillan
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	29/05/2025
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<b>No of pre-school children:</b>	AM	40	PM	36
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<b>Address of the Early Years Inspectorate:</b>	The Early Years Inspectorate -Tusla Child and Family Agency Loughlinstown Health Centre, Loughlinstown drive, Loughlinstown, County Dublin.
<b>Inspection undertaken by:</b>	O. Quill and H. Sutherland
<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).

<b>Conditions if applicable</b>	Not applicable
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### Description of service

StartBright Bawnogue provides full-time, part-time and sessional education and care for pre-school children aged 1 to 6 years. The service is one of seven not-for-profit childcare services operated by the registered provider in the Dublin region. The service operates from 07:30 to 18:15 Monday to Friday.

The early years service is located at ground floor level and operates from a two-storey office building in an urban area in Southwest Dublin. Care of the children is facilitated across four care rooms; Blossoming Butterflies for children aged 1 – 2 years, Busy Bees for children aged 2 – 3 years and the Young Explorers and Bright Sparks which catered for children aged 3 years and over. An outdoor area was available to the rear of the building and a small garden was also available to the children.

### Staffing

There are sixteen adults employed to work in the service. Eleven adults were present on the day of inspection. This included the person in charge, cook and nine adults who worked directly with the children.

### 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 and safety. The inspection may also focus on other areas as required.

9(1)(a), (b), (2) (a)-(d) and (4) Management and Recruitment

11(1), (2) and (8)(a) Staffing Levels

16 (1)(h), (i), (j) and (k) Record in relation to Pre-School Service.

23 Safeguarding health, safety and welfare of child

25(1), (2)(a) and (b) First Aid

26(1)(a)(b) and (4) Fire safety measures.

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 16 (1) (j) and (k) Record in relation to Pre-School Service.

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.

## Acknowledgments

The inspectors wish to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

## Part III – Management and Staff

### Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and

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

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

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

#### Compliance Information

(1)

- (a) The service had a person in charge and a named person to deputise.
- (b) The person in charge and a named deputy were always on the premises during the inspection.

The inspection focused on records for two adults who had been employed since the previous inspection in relation to regulations (2)(a)(b) and (d), and (4). Records for all adults employed in the service were inspected for regulation 9(2)(c).

(2) Four written validated references were required.

- (a) Three written validated references were available from past employers.

(b) A second written validated reference available for one adult was from a source other than a past employer.

(c) Garda vetting disclosures were available for all adults employed in the service. Garda vetting disclosures had been renewed in accordance with the Early Years Inspectorate Regulatory Notice, which requires services to renew Garda vetting every three years.

(d) Not applicable, the new adults employed in the service had not lived outside the State for a period of longer than six consecutive months.

(4) Both staff employed to work directly with children had completed a Bachelor of Arts in Early Childhood Care and Education.

### Part III – Management and Staff

#### Regulation 11 - Staffing levels

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

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

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

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

#### Compliance Information

(1) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were forty children attending the service being supervised by nine adults on the day of inspection.

(8)(a) There were at least two adults on the premises at all times of the inspection. The staff roster demonstrated that there are at least two adults on the premises 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:

(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;

(k) details of any accident, injury or incident involving a pre-school child attending the service.

### Compliance Information

- (1)
- (h) Details of the attendance of each child was recorded at the time of entering and leaving the service.
- (i) The staff roster was available and accurately reflected the adults working in the service on the day of inspection and adults who were on planned annual leave.
- (j) Records were available to demonstrate that signed parental consent was required prior to administering medication to a child.

### Non-Compliance Information

- (1)
- (k) All required information was not completed on the accident and incident forms. Four forms were not signed by the manager and two forms had not been signed by parents.

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

#### Corrective and Preventive Action

- (1)
- (k) Notice on electronic communication system notifying parents that there is a form to sign and all staff reviewed accident and incident policy to ensure parents and managers signature are recorded. Room leader review of forms on weekly basis to ensure all signatures are acquired. Use handover book to remind other staff members.

## Supporting documentation submitted

Written evidence.

## Summary Comment

The corrective and preventative actions as stated by the registered provider address the non-compliance.

## 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 front door to the service was secured to prevent unauthorised access or children leaving unsupervised. The outdoor area to the rear of the premises was enclosed by a high wall.
- Child proof locks were provided on low level cupboards in the care rooms. Medications was stored out of reach of children.
- Blind cords were secure.

### Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Staff were observed to carry out hand washing as appropriate. Children were supported to wash their hands at regular intervals including following outdoor play and using the toilet and before meals.
- Nappy changing practice was observed. Staff followed the nappy changing policy.
- A system was in place for effective sterilisation of soothers which were appropriately stored until sterilised after use.
- Individual bed linen was provided for the children in the Blossoming Butterflies room. Staff stated that all bed linen is laundered weekly or as required.
- Waste was managed appropriately with the use of pedal bins.

### Safe Sleep:

- Children under two years of age were placed to sleep in a standard cot with appropriate bedding. Low level beds were available for children over two years to sleep.

- The sleep room temperature was maintained between 16-20 degrees Celsius.
- Staff demonstrated they were familiar with the safe sleep policy. Ten minute sleep check observations were performed and recorded.

### Fire Safety:

- The fire exits were clearly marked and unobstructed.

### Non-Compliance Information

#### General Safety:

1. In the Busy Bees room, there was no care plan available for a child who had a specific medical condition. It is acknowledged staff were familiar with the steps to take in the event the child required medication. However, the absence of a care plan posed a safety risk that all staff may not be able to assist the child.
2. The door to the cleaning room was open throughout the inspection and cleaning materials were accessible posing a potential safety risk.
3. In the sensory room a trailing cable posed a potential trip hazard.

#### Administration of Medication:

4. All medication records were not completed in line with the medication policy. Four medication records were not signed by parents to confirm they were informed following administration of medication. Two forms were not signed by a second staff member to confirm they witnessed the medication given. There was no care plan available for a child who had a specific medical condition.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

1. Care plan in place and displayed in rooms. Medication instruction manual available for all staff to review. All allergies to have care plan regardless of centre being a nut free zone.
2. Cleaning room door closed at all times and all staff reminded to ensure it is closed. Door closures on all doors in working order and no doors propped open.
3. Trailing cable in sensory room removed. Risk assessment to include trailing cables in sensory room.

#### Administration of Medication:

4. Notice of reminder following call to inform on electronic communication for parent to sign upon pick up. Medication policy reviewed by all staff to ensure all forms signed by parents and witness following

information of administration. Room leaders to review all forms weekly and use handover book to remind other staff members.

### **Supporting documentation submitted**

#### **General Safety:**

Written evidence.

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

Written evidence.

### **Summary Comment**

The corrective and preventative actions as stated by the registered provider address the non-compliance. Practice will be reviewed on next inspection.

## Part VI - Safety

### Regulation 25 - First aid

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

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

### **Compliance Information**

(1) A person trained in first aid for children was immediately available to the children at all times on the day of inspection. Four adults present up to date First Aid Responder training certificates.

(2)  
(a) A first aid box was safely stored in an easily accessible and conspicuous location in three designated areas within the service.  
(b) A first aid box was available to the adults and children in the service at all times.

## 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 fire fighting 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 written record was available detailing fire drills that had taken place in the service. The last fire drill had been recorded as undertaken on the 20 May 2025.
  - (b) The number, type and maintenance record of the fire fighting equipment and smoke alarm was available. The maintenance record for the fire fighting equipment was dated 08 July 2025 and the maintenance record for the smoke alarm was dated the 05 November.
- (4) The procedures to be followed during a fire drill and in the event of a fire were displayed in a conspicuous location within the service.