

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY266
--------------------------	-------------

Name of Service:	Sundrive Nursery & Montessori School
-------------------------	--------------------------------------

Address of Service:	24b Sundrive Road, Crumlin, Dublin 12, Co. Dublin
----------------------------	---

Eircode:	D12 C958
-----------------	----------

Name of Registered Provider:	Noeleen Tynan
-------------------------------------	---------------

Service type:	Full Day
----------------------	----------

Date of Inspection:	10/03/2025
----------------------------	------------

No of pre-school children:	AM	22	PM	22
-----------------------------------	----	----	----	----

Address of the Early Years Inspectorate:	1st floor Trinity Building, IDA Business Park, Southern Cross Road, Bray, Co. Wicklow.
Inspection undertaken by:	Sarah Quigley & Fiona Carty
Title:	Early Years Inspector(s)

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

Sundrive Nursery & Montessori School is a privately owned service which was established in 1993 by the current registered provider. The service is registered to provide full day care to children aged 0-6 years and also offers an early childhood care and education scheme. The service is registered to operate from 07:30 to 18:30 each weekday and is located in an urban area of Crumlin, South County Dublin. The service operates from a purposely adapted single storey premises and consists of three care rooms. A fully enclosed outdoor play area is available and located to the front of the premises with a shock absorbent surfacing.

Staffing

The service currently employs six staff members, not including the registered provider who does not work directly in the service. On the day of inspection, five staff members were present. The registered provider was not present during the inspection.

Methodology

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

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

The findings on inspection are based on:

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

This inspection was unannounced and focused on the area of governance/ health, welfare and development of child/ safety/ premises and space requirements. The inspection may also focus on other areas as required.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the

registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

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

(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

- (2) Documentation was reviewed in respect of regulation 9(2)(3)(4) for two adults who were employed to work in the service since Regulation 9 was last inspected on the 21st November 2024.
- (a) (b)
- The registered provider appropriately verified the references obtained from two sources for one of the adults, and from one source for the second adult.
- (c) A Garda vetting disclosure from The National Vetting Bureau was available for both adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) International police vetting was available for one of the adults who required it.
- (4) The two adults held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications, or a qualification deemed to be equivalent.

Non-Compliance Information

The registered provider did not ensure that the two adults employed to work in the service were suitable and competent prior to allowing them access to children as follows:

- (2)
- (a) (b)
- The registered provider did not verify one reference obtained for one of the adults.
- (3) Documentation reviewed evidenced that the procedures specified under Regulation 9(2) had not been carried out prior to the adults commencing employment in the service, as detailed above Under (2)(a)(b) and as follows:
- A Garda vetting disclosure for one adult was not obtained by the registered provider prior to allowing the adult access to children. The adult commenced employment in the service on the 15th January 2025 and a Garda vetting disclosure was not obtained until the 10th February 2025.
 - A second reference for one adult was not verified until the 21st December 2024 when the adult had commenced employment in the service on the 16th December 2024.

Regulation 9(2)(3) was found to be non-compliant on the previous inspection of the service dated 21st November 2024. In response to these previous non-compliances the provider stated 'Prospective staff members will not be allowed to commence until all references have been verified appropriately. The staff recruitment policy has been

updated to reflect this change'. This is at variance with the findings on this inspection as noted above under Regulation 9(2)(a)(b)(3).

Corrective & Preventive Action submitted by the Registered Provider

The registered provider provided the following response:

Corrective and Preventive Action

(2)(a)(b)

The service has since implemented stricter document management procedures to ensure that each staff file is clearly organized and individually tracked throughout the recruitment process. All references have now been verified, and we are committed to maintaining full compliance with regulatory requirements going forward. To prevent recurrence, the service have a checklist to ensure all required documentation is complete and up to date.

(3)

The service fully recognise the importance of adhering strictly to Garda Vetting requirements and have since reviewed and strengthened the service document of internal procedures to ensure that no staff members will commence work in the future without full vetting clearance in place.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The regulatory requirement has been met. The corrective and preventive actions as stated will address the non-compliances identified. These actions will be outlined on the next inspection of the service.

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.

Non-Compliance Information

(1)
An adequate number of adults were not working directly with the pre-school children attending the service during the inspection as the minimum ratio of adults to children was not maintained at all times as outlined below.

(2)
The registered provider did not ensure that the minimum ratio of adults to children was maintained in the service throughout the day of inspection as follows:

- An insufficient number of adults were available to the children attending on a full day care basis in the Montessori room on multiple occasions throughout the day of inspection. From 11:10am, one adult was observed caring for eleven children aged three to four years whilst the second adult in place provided cover in other care rooms for lunch break and to prepare dinner. One adult remained with these 11 children alone for the duration of the inspection. The required minimum adult to child ratio is 1:8.
- One adult was observed caring for seven children aged two years in the Toddler room from 12:20pm for the duration of the inspection while lunch breaks occurred, and one staff member finished work for the day. The required minimum adult to child ratio is 1:6.

Regulation 11 was found to be non-compliant on the three previous inspections of the service dated the 21st November 2024, the 7th March 2023, and the 2nd March 2022.

In response to these previous non-compliances the provider stated ‘Staff and manager are aware that any breach of this requirement will result in disciplinary action. A new staff member has been hired and has started employment on the 16th December after receiving the Garda Vetting. The registered provider has been in the service each day monitoring compliance with the regulations.’ The preventive actions submitted by the registered provider did not sustain compliance with Regulation 11.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service have advertised for additional staff and have scheduled interviews and are actively recruiting qualified practitioners to strengthen the team. The service are closely monitoring daily attendance and staffing levels, and where ratios cannot be guaranteed, staff will be moved between rooms if numbers allow, to ensure compliance, and in cases where the service are unable to meet required ratios despite adjustments, will temporarily close the affected room or limit the number of children accepted for the day.

Also, the service have assigned a designated person to conduct real-time checks throughout the day, to ensure ratio compliance is consistently maintained.

Supporting documentation submitted

No supporting documentation was submitted.

Summary Comment

The corrective and preventive actions as stated by the registered provider will address the non-compliance, these actions will be assessed on the next inspection of the service. The regulatory requirement has been met.

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-

(b) appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.

Compliance Information

(1)(b)

Appropriate and suitable care practices were observed to be in place. Meals and snacks were offered to the children regularly throughout the day and additional food was provided if children were still hungry. Drinks of water were available within the rooms and were offered regularly. Self-feeding was promoted in younger care rooms and staff assisted children where required. Staff supported the children in managing their personal care, cleaning younger children's noses and faces when required. Bibs were provided to protect younger children's clothes at mealtimes and children's clothing that became soiled was changed promptly. Children's nappies were changed routinely and as needed. Staff spoke to the children in gentle, positive tones and children were comforted promptly if they became upset. Behaviours were managed appropriately where required and staff

were observed using positive reinforcement and encouraging conflict resolution when managing minor disputes between children.

Children's learning was child led, and children were all given the opportunity to play outside. An area with matting and cushions was provided within the rooms where the children could rest or take a break from activities. Babies and younger children were provided with the opportunity to sleep at a designated time after lunch. Staff reported that children could be accommodated to sleep outside this time if they displayed signs of tiredness.

The children were made comfortable for sleep, with staff removing their shoes and outer clothing, and providing soothers to those who used them. Alternative activities were provided for children who did not wish to sleep. Staff communicated with parents through an online application in each care room. Records were communicated to parents/guardians regarding individual children's care, including information about activities, diet, sleep, and nappy changes.

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

The inspector found by observation of practice, review of documentation, discussion with the registered provider, and inspection of the premises that the following steps to safeguard children attending:

General Safety:

The entrance door into the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons gaining access or children exiting unsupervised. The toys and play equipment observed in use by the children on the day of inspection were safe and in good working order. Cleaning products and hazardous materials were stored securely out of reach of the children.

Infection Control:

Pedal-operated, lidded bins were in place throughout the service to appropriately manage waste. Staff members outlined appropriate exclusion periods for adults and children with infectious illnesses were implemented in the service as per the policy.

Administration of Medication:

There was written evidence of prior parental consent for the administration of both temperature reducing and prescribed medications.

Fire Safety:

The designated fire escape routes were clearly indicated and free from obstruction on the day of inspection. Staff members adequately outlined the evacuation procedures in place in the event of a fire and stated that fire drills are practiced regularly on a monthly basis.

Non-Compliance Information

General Safety:

1. Throughout the inspection, the kitchen of the service was unlocked and accessible to the children in the Montessori room. At times the oven was on, and the kitchen was unattended by a staff member. The door to the kitchen did not fully close and could be easily opened by a child which may pose a risk of harm to a child should they access it unsupervised.

The corrective and preventive actions submitted following the last inspection of the service on the 21st November 2024 did not prevent the re-occurrence of the above non-compliance.

Infection Control:

2. Children attending the Wobbler room did not have their hands washed prior to snack posing a risk of cross contamination. This was at variance with the infection control policy in place in the service. The corrective and preventive actions submitted following the last inspection of the service on the 21st November 2024 did not prevent the re-occurrence of the above non-compliance.
3. There was no warm water available in the children's toilets/nappy room to facilitate handwashing.
4. A build-up of dirt, dust and debris was present on the surface of the nappy changing unit indicating it had not been adequately cleaned, posing a risk of cross contamination.
5. Two empty sand pits in the outdoor play area were accessible to the children and had accumulations of stagnant water in them, posing a risk of gastrointestinal illness should the water be ingested by a child.

Administration of Medication:

6. Seven of the ten medication records reviewed on the day of inspection were incomplete and at variance with the policy in place in the service. This posed a risk of harm or overdose to the children receiving the medication as follows:
 - Seven of the records had no documented evidence that a second staff member was present to witness the administration of medication to a child.

- One of the records did not detail the dosage of medication that was administered to a child.

The corrective and preventive actions submitted following the last inspection of the service on the 21st November 2024 did not prevent the re-occurrence of the above non-compliance.

Action submitted by the Registered Provider

The registered provider provided the following response:

Corrective & Preventive Action

General Safety:

1. A reminder was issued to all staff regarding the importance of ensuring that the kitchen remains securely closed at all times when not in use. The service have implemented the following measures, a new visual reminder has been placed on the kitchen door to reinforce the need to keep it closed at all times, also, the staff have also been reminded of the importance of maintaining restricted access to the kitchen area in accordance with safety and supervision policies.

Infection Control:

2. Since the inspection, the service has reinforced hand hygiene protocols with all staff and implemented additional visual reminders and prompts in each room to support consistent handwashing routines before and after meals. Staff have also received updated training on our washing hands control policy to prevent future occurrences.
3. To address this, a new procedure has been implemented whereby the opening staff each morning are responsible for running the taps to ensure warm. Additionally, the service have introduced a water temperature monitoring chart, which will be used daily to record and verify that the water reaches the required temperature for effective handwashing.
4. The service takes hygiene in nappy changing areas very seriously. Following the inspection, the service have deep cleaned the entire unit and revised the daily cleaning and sanitisation schedule to ensure all surfaces are maintained to a high standard. A new daily cleaning checklist has been implemented and must be signed by staff to confirm completion. Additionally, room leaders are conducting daily inspections to ensure ongoing compliance with our infection control standards.
5. The issue was addressed immediately following the inspection. The sandpits were thoroughly cleaned, dried, and securely covered. Moving forward, staff will carry out daily checks of the outdoor area, and any accumulation of water will be dealt with promptly to eliminate any risk.

Administration of Medication:

6. All staff have received refresher training on our medication policy, with emphasis on documenting every administration clearly, including the required second staff signature. Medication forms have been updated to include clearly marked sections for dosage, time, and witness confirmation. The manager or person in charge now reviews all medication records weekly to ensure completeness and compliance.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the early years inspector.

Summary Comment

The corrective and preventive actions as stated by the service will address the non-compliances. The regulatory requirement has been met.

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)

An adult trained in First Aid Responder (FAR) training was available to the children on the day of inspection.

(2)

(a) The first aid box was stored in a conspicuous location within the service.

(b) A first aid box was available in the service at all times on the day of inspection.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(c) kept adequately lit, heated and ventilated

Compliance Information

(c)
Regulation 29(c) was assessed as part of this inspection to ensure the care service was adequately heated as non-compliance had been noted on the previous two inspections of the service. The care rooms and children's bathrooms/nappy room were found to be maintained at the required temperature range of between 18 - 22°Celsius during the inspection.

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.

Non-Compliance Information

(2)
The minimum amount of clear floor space required for the number and age of the children attending the Montessori room was not available on the day of inspection as follows:

- Eleven children aged 3 to 4 years were present on the day of inspection on a full day care basis requiring a minimum of 25.3sqm clear floor space when only 19.1sqm is available.

Regulation 30 was found to be non-compliant on the previous inspections of the service on the 7th March 2023 and the 21st November 2024. In response to this non-compliance, corrective and preventive actions were submitted to the inspectorate which stated:

In 2023 the registered provider stated 'The registered provider with the person in charge and the deputy person in charge will ensure each room meets the minimum amount of space required for the number and age of children attending'.

In 2024 the registered provider stated 'From September onwards there will be two children less attending the Montessori Room so only a maximum of 9 children are in the room'.

These actions had not yet been implemented.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service acknowledges the non-compliance observed in relation to the required clear floor space in the Montessori room. On the day of the inspection, eleven children were present in a room that only accommodates the space requirement for a maximum of nine. To rectify this, the service has confirmed that from the end of June 2025 onwards, there will be six children leaving the Montessori room. The service can confirm that the number of children attending the Montessori room will be reduced to a maximum of nine children. A revised room attendance register, and floor space plan will be maintained and monitored weekly by the person in charge to avoid future recurrence

Supporting documentation submitted

No supporting documentation was submitted.

Summary Comment

The corrective and preventive actions once implemented in the stated timeframe will address the non-compliance. The actions outlined will be assessed on the next inspection of the service. The non-compliance remains outstanding as it has not yet been addressed.