

# Early Years Inspectorate Regulatory Report

## Pre School

**TUSLA Identifier:** TU2015DY285

**Name of Service:** Lighthouse Montessori School

**Address of Service:** 6a Pleasants Street, Dublin 8

**Eircode:** D08 PW27

**Name of Registered Provider:** Jean Smith

**Service type:** Full Day, Part Time

**Date of Inspection:** 22/07/2025

<b>No of pre-school children:</b>	AM	14	PM	20
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate Area 1 2 <sup>nd</sup> Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15   D15 CF9K
<b>Inspection undertaken by:</b>	T. Nelson
<b>Title:</b>	Early Years Inspector

**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

Lighthouse Montessori is a full and part-time day-care service located on the basement floor of a converted residential building located near Dublin city centre. The service is registered to provide early childhood care and education to a maximum of 21 children, currently operating Monday to Friday 8.30am to 5.30pm. The service has three care rooms each providing full and part-time care to children aged 2 years and 8 months old to 6 years of age. Other facilities include separate sanitary accommodation for staff and children and a service kitchen. There is an office located to the rear of the premises in the outdoor area.

The outdoor play area is located to the rear of the premises.

### Staffing

There are currently six staff employed by the registered provider, the person in charge and five childcare staff who work directly with the children. Both the registered provider and the person in charge manage the oversight of the service and provide cover where needed across the rooms. The registered provider, the person in charge, four childcare staff and a student were present on the day of 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, safety and premises and facilities. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under the following:

- Regulation 16(1)(h)(i)(j)(k) – Record in relation to Preschool 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.

## Additional Information

An Immediate Action Notice was issued to the registered provider on 22 July 2025 in relation to concerns under Regulation 9 Management and Recruitment. A response which adequately addressed the concern was received on 22 July 2025. Further details are available under Regulation 9.

## Acknowledgments

The inspector wishes 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
- (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.

(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 designated person in charge and named person to deputise as required.
- (b) A review of the roster showed either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.
- (c) There was a clear management structure in place, and staff reported being aware of this.
- (2) A review of the roster and discussion with the person in charge established there were a total of seven staff who work in the service and these full files were reviewed along with that of a student who was present on the day.
- (a) Eleven validated written references were available from recent past employers.
- (b) Five validated written references were available from a source other than a past employer.

- (c) Garda vetting disclosures had been obtained for seven of the eight adults on the premises. The registered provider did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.
  - (d) Seven adults who had lived in a state other than Ireland for six months or more as an adult had international police vetting from that state available for inspection.
- (4) The seven staff who worked directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or above on the National Framework of Qualifications or a qualification deemed eligible by the Department of Children, Disability and Equality.

### Non-Compliance Information

(2) The registered provider did not ensure the following:

- (c) There was no garda vetting disclosure available for an adult who was observed working in a room with children. Garda vetting disclosures must be obtained for all adults prior to them having access to children in order to establish they are appropriate to have access to children. This was identified as a non-compliance on the last inspection held on the 14 March 2023 and actions put in place failed to prevent a recurrence. An immediate action notice was issued to the registered provider on the day of the inspection with regards to this non-compliance. A response which addressed this was received that same day.

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

#### Corrective and Preventive Action

- (2) (c) The staff member was asked to leave the premises until vetting was in place. Garda vetting was obtained, and a checklist had been put in place to be completed before a staff member starts work.

#### Supporting documentation submitted

Documentation to verify the above was reviewed.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 (2)(c) has been adequately 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 5 staff available to 14 children present on the morning of the inspection.
- There were 5 staff available to 20 children present on the afternoon of the inspection.

(2) The adult to child ratios were maintained correctly throughout the inspection. The person in charge and registered provider were available to provide cover for breaks to ensure the ratios were maintained at this time.

### 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;*
- (b) details of the class of service and the age profile of children for which the service is registered to provide services;*
- (c) details of the adult:child ratios in the service;*
- (d) the type of care or programme provided in the service;*
- (e) the facilities available;*
- (f) the opening hours and fees;*

*(g) the policies, procedures and statements the service is required to maintain in accordance with Regulation 10;*

*(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.*

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

### Compliance Information

(1) The registered provider ensured the following records were maintained:

- (a) Details of the name, position, qualifications, and experience of all staff were maintained within the staff files.
- (b) The service Tusla certificate which was displayed in the hallway detailed the class of service and the age profile of children for which the service is registered to provide services.
- (c) The service policy document outlined the adult: child ratios.
- (d) The service policy document outlined the type of care or programme provided.
- (e) The service policy document outlined the facilities available within the service.
- (f) The service policy document outlined the opening hours and fees of the service.
- (g) The registered provider maintained all the policies required in accordance with Regulation 10.
- (h) Attendance records detailing the daily arrival and departure of the children were maintained.
- (i) A record was maintained of the staff roster which was reflective of the staff present on the day.
- (j) Following a review of a sample of eight records, the registered provider ensured a full record in writing was maintained for the administration of medication.
- (k) Following a review of a sample of eight records, the registered provider ensured a full record in writing was maintained for accident and incidents.

(3) All of the records required were available on the day of the inspection.

## Part V - Care of Child in Pre-school Service

### Regulation 21 – Equipment and materials

*A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.*

#### Compliance Information

The registered provider ensured there was adequate and suitable furniture and equipment available, for example:

- The furniture in the rooms was observed to be adequate for the number of children, it was appropriate for the age range and stage of development of the children in the rooms, and was well maintained, durable and easy to clean.
- The toys and equipment were laid out on low level shelving and grouped in themed interest areas.
- Each of the themed interest areas were resourced with a range of props, materials and accessories available to the children.
- There was an adequate supply of toys and table top activities suited to the age range of the children in the rooms, to facilitate fine motor skills, language and role play. For example: jigsaws, mark making equipment, craft materials, small world play, construction and books.
- The outdoor environment had a range of suitable equipment to facilitate gross motor play, for example: ride on toys, sand and water play, slide and climbing frame.

## 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 following measures were observed in place to safeguard children:

#### General Safety:

- The service had an electronic door release system in place which was managed by staff. This restricted unauthorised persons from gaining access to the premises and prevented children from exiting the service unsupervised.
- Tall units were observed to be secured to the wall.
- Cleaning agents were observed to be stored out of reach of children.

- The outdoor area was free from hazards, for example the sand pit in the outdoor area was observed to be appropriately covered and there was a suitable play surface for the children.
- The kitchen was observed to be inaccessible to the children throughout the inspection.
- Radiator covers were fitted throughout the rooms.

### Infection Control:

- Thermostatically controlled warm water, liquid soap and single use hand towels were available at all wash hand basins used by the children and the staff members.
- The premises appeared to be in a clean and hygienic condition and documented up to date cleaning records were available and displayed in the premises.
- Appropriate foot pedal operated bins were observed throughout the premises.

### Fire Safety:

- Exit routes were observed to be uncluttered and unobstructed.

### Non-Compliance Information

#### General Safety:

The following posed a potential risk to the safety of children:

1. Garda vetting was available for a staff member. However, this vetting disclosure was not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. The cable from the photocopier in the Finding Nemo room was trailing and accessible to the children. This posed a potential injury risk for children.

#### Administration of Medication:

3. One of the two bottles of fever reducing medication available for the use of children in the service was out of date. This could limit the effectiveness of the medication.
4. The administration of sun cream was not in line with safe practice and service practice on administration of suncream. Three of the eight sun creams in the Starfish room were not individually labelled. This posed a potential risk of skin irritation if used incorrectly.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

#### General Safety:

1. The service has re-applied for Garda Vetting which was made available to the inspectorate. The Staff checklist has been updated to have Garda Vetting end dates and the date for re-application for vetting. The staff folder will be reviewed every 6 months.
2. The copier was moved up a shelf immediately and the cable was secured to the wall. The cables have been attached to the wall since. The daily risk assessment included a check for cables.

#### Administration of Medication:

3. The medication was immediately removed and disposed of. A checklist included the dates of expiry of medication is now stored with the medication and will be reviewed by the manager.
4. The unlabelled suncreams are now labelled. A sunscreen checklist has been added to the sunscreen containers for each room which includes the child's name and best before date. Teachers are notified if a child has an allergy to a particular sunscreen.

### Supporting documentation submitted

#### General Safety:

1. Documentation to verify the above was reviewed.
2. Documentation to verify the above was reviewed.

#### Administration of Medication:

3. Documentation to verify the above was reviewed.
4. Documentation to verify the above was reviewed.

## Summary Comment

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

### 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

- (2) The registered provider ensured that:
- (a) A suitably equipped first aid box was stored by the kitchen room and office and there were signs displayed indicating this.
  - (b) The first aid box was easily accessible and readily available.

#### Non-Compliance Information

- (1) A review of the roster established that a person trained to First Aid Responder level was not always available to the children attending the service. There was no second person trained to provide cover for lunch breaks and absences of the FAR trained staff member. It is acknowledged that the registered provider had made arrangements to have a second person trained prior to the inspection.

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

##### Corrective and Preventive Action

The registered provider reports that FAR training for a second person has been booked and to be completed the weekend August 27th, 2025. Until then, the roster has been updated to ensure a FAR training person is always present. FAR training has been added to the checklist for the staff folder. Two people will be trained in FAR at all times

##### Supporting documentation submitted

Documentation to verify the above was reviewed

#### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 25 has 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) The registered provider ensured:
- (a) A record of fire drills was available on the premises with fire drills carried out monthly.
  - (b) An up-to-date maintenance record was available for the Fire extinguishers and smoke alarms in the premises. The fire extinguishers were serviced on the 15 May 2025, and the smoke alarms were maintained on the 13 May 2025.
- (4) A procedure to followed in the event of a fire was on display in each of the care rooms.