

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL042			
Name of Service:	Bright Stars Childcare			
Address of Service:	1 St. Cronan's View, Swords, Co. Dublin			
Eircode:	K67 Y021			
Name of Registered Provider:	Niamh Knight			
Service type:	Part Time, Sessional			
Date of Inspection:	03/03/2025			
Date of Regulatory Compliance Meeting	30/04/2025			
No of pre-school children:	AM	33	PM	7
Address of the Early Years Inspectorate:	Early Years Inspectorate, Child and Family Agency, Unit 4&5 Nexus Building Block 6A, Blanchardstown Corporate Park, Dublin 15			
Inspection undertaken by:	Á Dunne			
Title:	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).				
Conditions if applicable	Not Applicable.			

Description of service

Bright Stars Childcare provides a part time and sessional service in a converted domestic dwelling in a residential area in Swords Co. Dublin. The service is open from Monday to Friday between 9am and 2pm and is registered to accommodate a maximum of 41 children aged 2 to 6 years at any one time. There are 3 care rooms in operation which are the Playschool room (2 to 3 years) and the ECCE 2 room (3 to 5 years) on the ground floor and the ECCE 1 room (2years 8 months to 4 years) which is located on the first floor. There is an enclosed outdoor area to the rear of the property which allows children to access outdoor play

Staffing

The registered provider is present in the service in an administrative capacity and does not work directly with the children attending the service. The registered provider employs nine staff.

On the day of inspection, the registered provider was present and facilitated the inspection and there were five childcare staff, and one staff member employed under the Access and inclusion Model, all working 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/ 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 the regulations 9, 11, 19, 23, 25, and 26.

A sampling process was used to assess compliance under Regulation 23 Safeguarding, Health, Safety and Welfare of child. Regulation 11 Staffing levels was assessed across all 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

Following the issue of the draft report a response to the identified non-compliances was required through a Corrective and Preventive Action (CAPA) plan. A CAPA 1 response was not received within the given timeframe so CAPA 2 was issued. However, there was a lack of information and evidence to adequately address some non-compliances.

The registered provider was invited to attend a Regulatory Compliance Meeting (RCM) which was held with the service on the 30 April 2025. This meeting was convened to discuss the outstanding information required following the CAPA process. A number of issues were discussed and clarified with follow up actions agreed. The registered provider engaged in the process throughout. Following the RCM evidence which addressed most outstanding non-compliances were submitted within the required timeframe and accepted by the inspectorate. Regulation 9(2)(d) currently remains an outstanding non-compliance as a process to obtain required documentation is still in process. The findings are outlined in the content of this report.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, 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) The files of ten adults were reviewed as part of the inspection, to include the Registered provider, seven childcare staff members and two staff members employed under the Access and Inclusion Model (AIM).

(a) The registered provider had two written references from a past employer and one written and validated reference was available in relation to three adults from a past employer.

(b) One written and validated reference was available in relation to two adults from a source other than a past employer.

(c) Garda vetting disclosures were available for ten adults. The service also demonstrated compliance, with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(4) Documentation was available to show that the nine adults 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 Minister

Non-Compliance Information

(2)

(a) Two written references for four adults from a past employer were not validated and one written reference for two adults from a past employer were not validated.

(b) One written reference for three adults from a source other than a past employer were not validated.

(d) Police vetting was not available for three staff who had lived outside of the state for longer than 6 months as an adult.

(3) The registered provider did not demonstrate that the procedures specified in paragraph (2) were carried out prior to staff being appointed, assigned or allowed access to or contact with a child attending the pre-school service as references for staff were not validated and police vetting's were not obtained.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)(b) The service has made up a reference check sheet to use going forward and have updated all references with this list.

(2)(d) The registered provider will check CVs going forward to assess police vetting requirements. The registered provider confirmed that one staff member was not outside the state for 6 consecutive months. Application for international police vetting was made for two staff members.

(3) The registered provider will validate references and check CVs going in advance of employee start date going forward.

Supporting documentation submitted

(2)(a)(b) Photographic Evidence of Checklist and references validated.

(2)(d) Police vetting for one staff member.

(3) No evidence. At RCM the provider stated a checklist had been established to support the new procedure.

Summary Comment

The Inspector has reviewed the actions and evidence submitted. Regulation 9 (2)(a)(b) and (2)(3) have been adequately addressed. However, as one police vetting application was still in process at time of publication the non-compliance under Regulation 9(2)(d) remains outstanding.

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)(2) There were an adequate number of adults working directly with the children as there were 6 adults working with 33 children for the morning sessional session from 9am to 12.30pm to include one adult working under to Access and inclusion model (AIM) and 3 adults working with 7 children for the afternoon parttime session from 12.30pm to 2pm to include one adult working under to Access and inclusion model (AIM) with ratios being maintained.

(8)(a) Documentation available demonstrated that two adults were present on the premises during the operation of the early years' service.

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

Basic Needs:

- Lunchtime was at 11.10 am and the children's water bottles were available in the classrooms for the children to drink.
- Lunchtime was observed to be a relaxed and sociable event, with children given time to sit at low tables eat independently, with staff on hand to help as required, supporting independence and wellbeing.
- Nappy changing and toilet visits were completed as needed and supervised to ensure each child's comfort.
- All children had access to the outdoor play area during the day of inspection.

Supporting relationships:

- The staff interacted with the children in a respectful, warm and sensitive manner. The atmosphere within the service remained calm and pleasant throughout the inspection.
- Staff interacted playfully with the children, by sitting at their level during circle time, and tabletop activities of painting a pancake and frying pan.
- The service demonstrated that communication with parents was completed using electronic email and messaging application, face to face meetings and social media.

Physical and Material Environment

- The materials and equipment provided to the children in the rooms were suitable to the age and stage of development of the children present. Children had the freedom to choose from materials and equipment available to them.
- Low level shelving and child sized furniture supported children's independence.
- Cosy areas were present in all rooms offering a quiet comfortable area for children to rest and relax during the day.
- Artwork completed by the children was displayed on the walls for example pictures of owls, ladybirds, whales, hearts, snails, firetrucks and maps.
- Pictures of the children, who were attending, with their families and their birthdays were displayed in the service which supported children's well-being and identity and belonging.
- The outdoor play environment to the rear of the premises was fully enclosed and secure, the surface of which was covered with artificial grass. The outdoor toys were suitable, available and included a slide, a see saw, a blackboard, a sand / water play pit and a ride on trike.

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 pre-school children were supervised at all times during the session.
- The play equipment and materials observed in use by the children on the day of inspection were safe and in good working order.
- The temperature of the care rooms was within the recommended ambient temperature of 18 - 22 °C.

Infection Control:

- Handwashing facilities for hand hygiene included liquid soap and thermostatically controlled warm water.

Administration of Medication:

- A care plan was available for a child that required emergency medication, with their required medication displayed in a conspicuous position in the office out of children' reach. No children were observed having medication administered on the day of inspection.

Non-Compliance Information

General Safety:

1. On the inspectors unannounced arrival at the service at 10.15am, the main door of the service was not secure or monitored by staff to restrict unauthorised persons from gaining access to the premises. It is acknowledged that on guidance from the inspector, the deputy person in charge took action to address the non-compliance and locked the front door of the service.
2. In the Playschool room staff belongings were accessible to the children leading to a risk of injury.

Infection Control:

3. In the ECCE 2 room, perishable food items such as cold meats, cheese and yogurts, brought from home, consumed by the children were not refrigerated on arrival to the service. This increased the potential risk of food borne infection.
4. Nappy changing was not completed in accordance with best practice as gloves and aprons were not removed in a timely manner and the hands of two children were not washed after the procedure to reduce cross infection.

5. A soother and toy which a child was using and playing with while having their nappy changed in the nappy changing room, were not sterilised on return to the playroom. This posed a risk of cross infection.
6. Paper towel rolls were not hygienically dispensed and were observed to be sitting out on a table and on counter surfaces in the service, leading to a risk of cross-contamination.
7. Infection control measures were not adequate in ECCE 1 and ECCE 2 sanitary facilities as evidenced by the following examples:
 - In the ECCE 1 sanitary facility, a communal hand towel was present and in use to dry hands and the bin was not a pedal operated lidded bin.
 - In the ECCE 2 room sanitary facilities, the toilet paper was not stored in a holder and was observed to be sitting on the back of each of the two toilets and the pedal bin had no lid.
8. There was evidence to demonstrate that regular and routine risk assessments were not completed by staff in the service, to reduce the potential risk of injury or cross infection. For example:
 - In the front corridor of the service a trailing flex from a plug adapter was accessible
 - In the corridor of the service, a couch was present with torn surfaces, exposing foam.
 - The sanitary facility used by ECCE 2 Room was observed to be congested with equipment which would not be an appropriate storage area.

Fire Safety:

9. In the ECCE 2 room, the service did not ensure that two of the four designated fire exit doors present were unobstructed during the operation of the service. This reduced the effective evacuation of staff and children in the event of an emergency.
10. In the Playschool room, at 12.05pm, four children were marked in on the attendance record from 9am but there were six children present in the room up to 12.30pm. Inaccurate attendance records poses potential risk to the safe evacuation of children in the event of an emergency.
11. Fire Drills were not carried out by the service monthly with no fire drill completed in December 2024, January 2025 and February 2025 posing a safety risk. It is recommended that fire drills are completed every month, this promotes fire safety awareness

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The main outside door is not usually locked but the interior doors are. Apart from the pre ecce room where parents are allowed to bring the smaller children in themselves. After they are in the classroom

door is closed and the doorway to the hall is also closed by staff from the main ECCE room. On this morning, the service were down two staff members, and the registered provider was off too.

The service has now have fitted a doorbell on main outside door which parents must ring at all times.

- All staff belongings will be kept out of the classrooms going forward and staff belongings are now kept in the office.

Infection Control:

- The service will re-introduce the small fridge.
 - The service will ensure the children who wear nappies also wash their hands after their nappy has been changed.
 - The service will ensure that these items will be sanitised going forward.
 - Blue roll dispensers have been purchased.
 - The service has purchased blue roll dispenser to eliminate the use of towel
- The service has replaced the swing bin with a pedal bin upstairs and has placed toilet roll holders in bathrooms.
- The service has secured the flex more tightly to the wall.
- The couch has been removed from corridor and disposed of.
- The service has removed equipment from foyer of bathroom and stored in the attic.

Fire Safety:

- The service cleared the two designated fire exit doors.
- The manager spot checks the attendance books in all rooms.
- Fire drills have been completed monthly up to that point, the service have recommenced fire drills.

Supporting documentation submitted

General Safety:

- Photographic evidence
- Photographic evidence

Infection Control:

- Photographic evidence submitted
- No evidence submitted
- No evidence submitted
- Photographic Evidence

- 7. Photographic Evidence
- 8. Photographic Evidence

Fire Safety:

- 9. Photographic Evidence
- 10. No evidence submitted
- 11. Fire drill record for March 2025 submitted

Summary Comment

The Inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 has 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) (a) and (b) Suitably equipped first aid boxes were available and safely stored in easily accessible and conspicuous positions in the kitchen of the service.

Non-Compliance Information

(1) There was no person on the premises and immediately available to the children from 12.30 pm to 2.00pm with in-date First Aid Response (FAR). A sufficient number of adults must be trained in first aid response to cover staff leave and breaks, a staff member qualified in first aid for children must be available to the children at all times.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1) Two staff members completed their First Aid Responder training 22 May 2025

Supporting documentation submitted

- (1) First Aid Responder certificates submitted 17 June 2025.

Summary Comment

The Inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 has been adequately 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 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 of the fire drills completed in the service. The last recorded fire drill took place on the 20 November 2024.

(b) A record was available of the number, type and maintenance of the firefighting equipment demonstrating it was last serviced on the 23 October 2024 and for the number, type and maintenance of the smoke alarms in the premises, which were last serviced on the 13 February 2025.

(4) A notice of the procedures to be followed in the event of a fire was conspicuously displayed on the premises