

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015FL064
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<b>Name of Service:</b>	Child's Play Creche
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<b>Address of Service:</b>	Rolestown Hall, Rolestown, Swords, Co. Dublin
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<b>Eircode:</b>	K67 TF10
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<b>Name of Registered Provider:</b>	Fiona Kavanagh
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<b>Service type:</b>	Full Day, Part Time, Sessional
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<b>Date of Inspection:</b>	03/10/2025
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<b>No of pre-school children:</b>	AM	21	PM	8
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<b>Address of the Early Years Inspectorate:</b>	2 <sup>nd</sup> Floor, Unit 4/5, The Nexus Building, Blanchardstown, Corporate Park, Ballycoolin, Dublin 15
<b>Inspection undertaken by:</b>	Y Kelly
<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

Child's Play Creche is a privately-owned early years service which has been in operation since 2006. The service is conducted from a community hall located in a small village setting in rural north county Dublin.

### Staffing

The registered provider employs four staff members to work in the service. One of these four staff members is employed as the service manager and assumes the role of the person in charge in the absence of the registered provider. Three staff including the registered provider work directly with the preschool children and two staff members are employed to solely work with the school aged children.

### Methodology

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

The inspection focused on an examination of compliance under the regulations 9, 11, 15, 19, 23, 25, and 26 however, on inspection additional non-compliance which posed a risk was identified under regulation 16. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 15. As a result, the scope of the inspection included the Playschool Room.

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 6 October 2025 as no staff member employed in the service held an in date First Aid Response (FAR) or evidence of a paediatric first aid certificate. A response which adequately addressed the concern was received on 7 October 2025.

An immediate action notice was issued to the registered provider on 7 October 2025 in relation to Garda vetting requirements under Regulation 9 Management and Recruitment. A response which adequately addressed the concern was received on 8 October 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

(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 registered provider was the designated person in charge of the service and there was a named person to deputise as required.

(b) The registered provider was present and in charge of the service when the inspector arrived unannounced to the service at 09:40am and was present for the duration of the inspection.

(2) The files for 5 adults including the registered provider were reviewed, and the following was recorded:

- (a) Seven validated and written references were available from past employers.
- (b) Three written references, one of which was validated were available from a reputable source other than a past employer.

(c) Garda vetting disclosures were available for 4 adults whose files were reviewed. Garda vetting disclosures that were available demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring the service to renew Garda vetting every three years.

(d) International Police vetting was not required as no adult had lived outside of the state for a period of more than six months.

(4) Documentary evidence was available to confirm that 5 adults whose files were reviewed and who may work directly with the children in 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(c) The registered provider had not ensured the following:

There were no Garda vetting disclosures available for 2 adults who were present on the day of inspection and had access to children. An immediate action notice was issued to the registered provider.

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

#### Corrective Action

2(c) Garda vetting was renewed immediately for the staff member whose vetting had lapsed. Upon receiving the updated vetting disclosure, it was sent to the inspectorate on 22 October 2025 and added to the staff member's file. Garda vetting was also received for the second staff member.

#### Preventive Action

2(c) To prevent recurrence, the following action will be taken. Staff files will be reviewed annually to ensure all certificates and Garda vetting disclosures are up to date.

#### Supporting documentation submitted

Garda vetting disclosures for 2 adults.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance 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.*

*(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) On the day of the inspection there was an adequate number of staff members working directly with the children attending the service.

(2) The adult to child ratios were correct in the service when the inspector arrived unannounced at the service and remained so throughout the inspection.

The following adult to child ratios were observed during the inspection:

- In the Playschool Room there were 21 children aged 2 years 9 months to 4 years 5 months being cared for by 3 staff members including the registered provider and the person in charge.

(8)(a) The registered provider ensured that 2 adults were present in the service at all times.

### Part IV – Information and Records

#### Regulation 15 – Record of pre-school child

*(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:*

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (g) the name and telephone number of the child’s registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

*(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-*

- (c) an authorised person.*

#### Compliance Information

(1) On review of a sample of 12 children’s registration records, the required information and details were available. The following information was included:

- (a) the name and date of birth of the child.
- (b) the date on which the child first attended the service.
- (c) a provision for the date the child ceased to attend the service.
- (d) the name and address of an emergency contact of the child that can be contacted during the hours of operation of the service.
- (e) authorisation for the collection of the child.
- (f) details of any illness, disability, allergy (f) special need of the child, together with all the information relevant to the provision of special care or attention.
- (g) the name and telephone number of the child’s registered medical practitioner.
- (h) record of immunisations, if any, received by the child.

- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.  
(3)(c) Records were open to inspection by an authorised person. All records requested by the inspector were available for review.

## 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;*

### Non-Compliance Information

(1)(a) In respect of 1 adult, there was no recorded history of past employment and relevant experience available for inspection. Therefore, it was not possible to determine whether international police vetting was required in accordance with Regulation 9(2)(c).

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

#### **Corrective Action**

(1)(a) A review was carried out to determine whether international police vetting was required for any staff member.

#### **Preventive Action**

(1)(a) To prevent recurrence, staff files will be reviewed annually to ensure they are up to date.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The registered provider has given assurance that international police vetting was not required for any staff member. This staff file will be reviewed at the next inspection.

### 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

(1)(a) The following observations were made on each child's learning, development and well-being was facilitated within daily life in the service:

#### Basic needs:

- Children's snack and water bottles were brought from home. Snack consisted of sandwiches, rolls crackers, yoghurts and fruit. Through conversation with staff, it was discussed that children are offered sandwiches and crackers in the afternoon at 2pm. Children were observed to sit and eat together and chatted socially during this time and staff offered help to children as needed. Children independently get drinks of water from their water bottles throughout the morning.
- Children's independence was supported. Children tidied up their lunch boxes independently after snack time and children get their coats and bags at home time.
- There was no outdoor play on the day of the inspection due to adverse weather conditions. However, there was an opportunity for children to play in the hall where children could run. Physical games such as "Duck, Duck Goose" were facilitated with the children. This supported gross motor and fundamental movement skills for the children. Children who preferred not to join in games in the hall were given the opportunity to stay in the main room to do a colouring activity.

#### Supporting relationships

- Staff demonstrated warm and caring interactions with the children. Children were offered comfort and support when needed. There was a welcoming atmosphere in the service.
- Staff were observed interacting with children at their level and engaging in children's play.
- Identity and belonging were promoted in the service. For example, each child had their own coat and bag hook identified by photographs of the children.
- Transitions were observed to be well managed; the children engaged well with tidying up, putting items

away independently. Routines provided for predictability and comfort for young children. There was a daily routine timeline with photographs of the children so that children could anticipate what was happening next in the daily routine.

- The staff members were observed greeting parents at the door at collection time where they exchanged information about the child's day in the service.

### **Physical and Material Environment:**

- The furniture provided in the care rooms was low level and appropriate to accommodate children whilst they played and ate in the care rooms. Toys and equipment were visible and accessible to children on low level shelving which facilitated children's independence in play.
- The room was divided into areas of interest which provided opportunities for a variety of spontaneous play experiences and choice for the children. Interest areas included a home corner with wooden kitchen, dolls, large dolls house and workbench to support imaginative and interactive play. There was a construction area with wooden blocks, plastic building bricks, wooden animals and people and natural materials to include pieces of wood. There were transportation toys such as cars and diggers. In addition, there was a sand pit with spades and trucks for sensory play, an art table and mark making area with pencils, and paper to support children's creativity and mark making. There were tabletop materials to support fine motor development. Small world items included a large doll house, people and dinosaurs to support children's imaginative and dramatic play. There were books available in the reading area which supported children's language development and a sofa in the room for children to sit and relax.

### **Programme of activities and its Implementation:**

- Children's learning and development is documented in children's learning journals which include observations and photographs of children's learning and development and themes included; All About Me, Healthy Eating, My Emotions, Autumn, Hibernation and Halloween.
- The large room was partitioned into two smaller groups, ECCE1 and ECCE2 group. Small group times were facilitated at this time. ECCE1 engaged in play with modelling dough and colouring and ECCE2 listened to story time whilst another group of children played with magnets.

## 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:

- On arrival to the service, the inspector observed that the door was secure and monitored by staff.
- Cleaning agents were stored safely out of the reach of the children.

##### Infection Control:

- Thermostatically controlled water, liquid hand soap and dispensed handtowels and electronic hand dryers were available in the sanitary facilities.
- Pedal operated bins were available for waste and disposal of contaminated items.
- Children were observed washing their hands before snack time.

##### Fire Safety:

- Fire drill procedures and fire assembly point were displayed in the service.

#### Non-Compliance Information

##### General Safety:

1. Grapes were observed not to be sliced in half for one child on the day of the inspection. This posed a choking hazard for the child. It is acknowledged that a staff member cut the remainder of the grapes when brought to their attention by the inspector.

##### Infection Control:

2. Although a fridge was on the premises, the children's packed lunches supplied from home were not refrigerated on arrival to the service. This increased the risk of bacteria growth in perishable food items.

Non-compliance under regulation 23 point 2 was identified on the previous inspection dated 12 April 2023. The corrective action submitted following inspection failed to prevent recurrence of this non-compliance.

#### Action submitted by the Registered Provider

##### Corrective Action

##### General Safety:

1. A reminder message was sent to all parents on the class messaging application to explain the importance grapes being sliced in half to prevent choking.

### Infection Control:

2. The refrigerator for storing lunch boxes has been relocated to the classroom. A staff rota has been established, assigning a designated team member each week to remove lunch boxes from students' school bags and place them in the refrigerator.

### Preventive Action

#### General Safety:

1. Staff will continue to be vigilant and monitor children's lunch boxes for choking hazards. In future grapes will be sent home if not sliced in half. Reminder messages will be sent out regularly to remind parents.

#### Infection Control:

2. Staff Training and Reinforcement: All staff have been reinforced on the importance of proper food storage and the health risks associated with improper refrigeration. Daily Compliance Checks: A daily checklist has been created to confirm that all lunch boxes have been stored correctly. This will be signed by the designated staff member and reviewed by person in charge on the day.

### Supporting documentation submitted

- Packed Lunch Fridge Storage Checklist

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances under Regulation 23 have been 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) An adequately stocked first aid box was observed in the service. There was one first aid box stored in the kitchen.
- (b) The first aid box was stored out of the reach of the children but available to staff as needed.

#### Non-Compliance Information

- (1) The registered provider did not ensure that an adequate number of staff trained in First Aid Response (FAR) or Paediatric First Aid was available on the premises at all times throughout the opening hours of the service. A person trained in first aid is required on the premises at all times. An Immediate Action Notice was issued to the registered provider.
- (2) (a) There was expired antibacterial antiseptic gel and hydrogel stored in the first aid kit. This posed a risk that if administered the antiseptic gel and hydrogel may not provide the required effect.

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

##### Corrective Action

- (1) Three staff members successfully completed the First Aid Response (FAR) course on 29 October 2025. Copies of their FAR certificates have been forwarded to the inspector. This ensures that an adequate number of FAR-trained staff are always now present on the premises throughout the service's operating hours, thereby addressing the non-compliance and meeting the required regulatory standard.
- (2)(a) As the regulations do not require antiseptic gels or hydrogels to be included in the first aid box, these were surplus to requirement and removed and disposed of immediately.

### **Preventive Action**

(1) To prevent recurrence, the following action will be taken. Staff files will be reviewed annually to ensure all certificates and Garda vetting disclosures are up to date.

(2)(a) The manager will continue to check the first-aid kit monthly to ensure all items are within their expiry dates. Only items recommended under the Early Years Services Regulations and HSE will be included in the First Aid Kit.

### **Supporting documentation submitted**

- First Aid Response (FAR) certificates received for 3 staff members.

### **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliances under Regulation 25 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 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 record of fire drills was available on the premises with the last fire drill dated as having been carried out on the 25 August 2025.

(b) The number, type and maintenance record for firefighting equipment was available. Firefighting equipment was last serviced on 29 May 2025.

(4) Fire evacuation procedures were displayed in the service.

### **Non-Compliance Information**

(1) (b) The number, type and maintenance record for smoke alarms was not available.

Non-compliance under regulation 26 (1) (b) in relation to the smoke alarm was identified on the previous inspection dated 12 April 2023. The corrective action submitted following inspection failed to prevent recurrence of this non-compliance.

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

## **Corrective Action**

(1) (b) Request for records. As the registered provider rents part of the community building, the smoke alarm maintenance records have been formally requested from the committee. The registered provider is currently awaiting their provision. In the meantime, the service has conducted a full internal audit of all smoke alarms within the area the service occupies. All alarms have been visually inspected, tested where possible, and are operational with no faults detected on the control panel. Once the maintenance records are received, these will be added to service's safety log, and they will maintain a complete record of all smoke alarm checks, tests, and maintenance activities to ensure compliance with Regulation 26 (1) (b).

## **Preventive Action**

(1) (b) Going forward, regular contact will be maintained with the management committee to ensure that all smoke alarm maintenance records are up-to-date and provided promptly.

## **Summary Comment**

The inspector has reviewed the actions and evidence submitted. It is acknowledged that the registered provider has taken action in relation to the smoke alarm maintenance records. However, as these records have not yet been submitted, the non-compliance under Regulation 26 (1) (b) in relation to the smoke alarm still remains outstanding. It is the responsibility of the registered provider to furnish the smoke alarm maintenance certificate to the inspectorate when received.