

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015FL311
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Name of Service:	Park Drive Day Nursery
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Address of Service:	82 Park Drive Green, Castleknock, Dublin 15
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Eircode:	D15 X6XR
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Name of Registered Provider:	Mary Grant
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	11/06/2025
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No of pre-school children:	AM	10	PM	7
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	L Jameson
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
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Description of service

Park Drive Day Nursery is a full day care service located in a residential area in Dublin 15 and is registered to provide early childhood care and education to a maximum of 16 children aged 2 to 6 years, Monday to Friday from 8.00am to 6.00pm. The service operates from the ground floor of a converted residential premises and has two care rooms, the Front room and the Back room. There is sanitary accommodation located off the Back room, and the enclosed outdoor play area is also accessed from this room. The service participates in the Early Childhood Care and Education (ECCE) scheme, delivering a morning session from 9:00am – 12:00pm daily. The service is also registered to provide school age care in the afternoons.

Staffing

The registered provider works in the service in a supernumerary capacity, providing support and covering lunch breaks, and employs three adults to work directly with the children, including the deputy person in charge, an early year's educator and a relief early years educator. On the day of the inspection, the registered provider, the deputy person in charge and one early year's educator was present when the inspector arrived unannounced in the service.

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 and premises and facilities. 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 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

(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.

(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

(1)

- (a) The service had a designated person in charge and a named person to deputise as needed.
- (b) The person in charge and the deputy person in charge were present when the inspector arrived unannounced to the service and at all times during the operational hours of the service on the day of inspection.
- (c) The service had a clear management structure and staff members were aware of their own role and responsibilities.

- (2) The registered provider currently employs three adults. The full staff record of the registered provider, the deputy person in charge and two staff members were reviewed. From the four files that were reviewed:
- (a) Six written and verified references were available from past employers.
 - (b) Two written and verified references were available from a source other than a past employer.
 - (c) Garda vetting disclosures were available for the four adults employed in the service. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
 - (d) Documentary evidence showed that one adult had lived in a state other than Ireland for more than six consecutive months as an adult. International police vetting from the relevant country was available for this staff member.
- (3) Evidence was available to demonstrate that the procedures specified in paragraph (2) were carried out in relation to three adults before employment commenced.
- (4) Evidence was available to show that the four adults who worked directly with the children held 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.

Non-Compliance Information

- (3) Evidence was not available to demonstrate that the procedures specified in paragraph (2) were carried out in relation to one adult who had access to the children. The following was observed:
- Garda vetting for one adult was dated 6 days after their commencement in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (3) Management will ensure that all relevant checks are carried out prior to new staff members commencing employment in the service.

Supporting documentation submitted

- (3) No evidence submitted.

Summary Comment

The corrective and preventive actions taken by the registered provider are sufficient to address the non-compliance under Regulation 9. This will be reviewed on the next inspection.

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) There were a sufficient number of staff members working directly with the children on the day of inspection. There were three staff members, including the registered provider, working with ten children on the morning of the inspection. The same staff members worked with seven children in the afternoon.
- (2) The adult child ratios were maintained for the duration of the 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-*
- (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) The following practices were observed on the day of inspection which supported the health, welfare and development of the children attending:
- Staff members were observed to use positive and respectful language on the day of inspection. Children's achievements were reinforced with praise and recognition.
 - The children were supported to follow their own interests; decision making was encouraged by staff who were observed to actively supervise and guide the children throughout the day.
 - Staff members were attentive to children's individual needs, for example, one child who had recently started in the service was showing signs of tiredness and became upset. Staff members were observed to interact warmly and kindly, using gentle and reassuring tones of voice and offering hugs, to support the

child. Staff members discussed the child’s routine, likes and dislikes with the inspector, demonstrating their familiarity with the individual children attending the service.

- Staff members were observed to support the children to resolve minor conflicts and disagreements in a positive and calm way.
- Mealtimes were observed to be a sociable and pleasant event, with staff members sitting alongside the children, engaging in meaningful conversations and interactions. Alternative meal options were available if required.
- Staff members were observed to tend to children’s individual personal needs promptly, offering discreet supervision for toileting and assisting with hand washing.

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 that an adequate supply of suitable materials and equipment were available to the children in the service. The following was observed:

- Low level tables and chairs were available for use by the children which allowed them to engage in tabletop activities and meals comfortably.
- Toys and materials were accessible on low level shelving which allowed children to access them independently.
- Equipment and materials in the care rooms were in good working order. Materials including jigsaws and puzzles, magnets, cars, animals, dolls, sensory activities, kitchens with supporting props and Montessori materials were available to the children, facilitating a range of play and learning experiences and promoting imaginative play.
- A selection of books was available to support children’s language development.
- The outdoor area provided opportunities for a variety of play experiences including sensory play, gross motor and imaginative play. On the day of inspection, the children were observed to play with sand and water while in the outdoor play area.

Non-Compliance Information

1. Suitable and inviting cosy areas were not available to the children to allow for rest and participation in quiet activities, for example, there was no cosy or rest area provided to children in the Front room, and although a sofa was provided in the Back room, it was not adequate for the number of children present.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. Management have purchased new child sized armchairs and a footstool for the back room and added a cosy corner to the front room to facilitate rest time for the children and opportunities for quiet activities.

Supporting documentation submitted

1. Photographic evidence in relation to the above has been reviewed.

Summary Comment

The corrective and preventive actions taken by the registered provider are sufficient to address the non-compliance under Regulation 21.

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 main entrance door leading into the service was appropriately secured to prevent the children from exiting unsupervised and to restrict unauthorised persons from gaining access to the premises. A buzzer system was in place which was managed and monitored by staff members.
- A visitor book was available at the front door. The inspector was asked to sign in and sign out at their arrival to and departure from the service.
- Flexes and cords were stored safely out of reach of children.
- An ambient temperature of 18-22°C was maintained in the care rooms.

Infection Control:

- The care rooms and sanitary area were equipped with warm water, liquid soap and hand paper towels. Staff members were observed to support children with handwashing at regular intervals throughout the day, before eating and after toileting.
- Windows were observed to be open to allow circulation of fresh air and reduce malodour in the care rooms and sanitary accommodation.

Administration of Medication:

- Antifebrile medication was stored in its original packaging and out of the reach of children. Medication was not observed to be administered on the day of inspection.

Fire Safety:

- Fire exits were clear and unobstructed on the day of inspection.

Non-Compliance Information

General Safety:

1. A cleaning agent was observed to be stored on a low-level sink unit, accessible to children. This posed a potential risk to children.

Infection Control:

2. Lunches containing perishable items, such as yogurts, were not refrigerated. This increased the risk of bacteria multiplying to levels which could result in illness in young children.
3. Items, including a soft plush toy, were observed to be stored on the nappy changing area. This increased the risk of cross contamination.
4. A lidded bin was observed to be in use in the Front room, resulting in repeated touch to the surface and increasing the risk of cross contamination.
5. The green couch in the Back room was observed to be torn in places, this reduced the likelihood of effective cleaning and increased the risk of cross contamination.

Outing:

6. There was no written risk assessment available for a recent outing to the local park. Through conversation with management, it was confirmed that a recent outing to the local green area took place to facilitate a sports day, no written risk assessment was carried out prior to this outing. This was a non-compliance on the previous inspection, dated 23/03/2023, corrective and preventative actions have not been maintained.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The bottle was removed and placed on a high shelf. A sign is now displayed in the care rooms as a reminder to staff members to properly store cleaning products.

Infection Control:

2. A basket is now in the fridge to store perishable lunch items. On arrival, staff members will assist the children in placing perishable lunch items into individual bags before placing them into the basket in the fridge.
3. The soft toy was removed from the changing area. A notice has been displayed as a reminder to staff members not to store any items in the changing area.
4. The old bin has been removed and replaced with a foot operated pedal bin. Bins will be changed twice a day to avoid overflowing waste.
5. The green couch has been removed and replaced with new armchairs and a footstool.

Outing:

6. Management will ensure that a risk assessment is carried out for all outings to the local green area. A notice has been displayed to remind staff members to complete risk assessments prior to any outing.

Supporting documentation submitted

General Safety:

1. Photographic evidence in relation to the above has been reviewed.

Infection Control:

2. Photographic evidence in relation to the above has been reviewed.
3. Photographic evidence in relation to the above has been reviewed.
4. Photographic evidence in relation to the above has been reviewed.
5. Photographic evidence in relation to the above has been reviewed.

Outing:

6. Documentation and photographic evidence in relation to the above has been reviewed.

Summary Comment

The corrective and preventive actions taken by the registered provider are sufficient to address the non-compliance under Regulation 23.

Part VI - Safety

Regulation 25 - First aid

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

(2) A registered provider shall ensure that a suitably equipped first aid box for children-

(a) is safely stored in an easily accessible and conspicuous position on the premises, and

(b) is available to the children attending the pre-school service at all times.

Compliance Information

(1) A person who held in-date First Aid Response (FAR) training was at all times immediately available to the children attending the service. This was evidenced in the FAR training records maintained for two staff members and their scheduled attendance in the service.

- (2)
- (a) The first aid box available in the service was suitably equipped and stored in a conspicuous location on the premises.
 - (b) First aid boxes were available for the children in attendance in the event of an emergency.

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.

(2) The record referred to in paragraph (1) shall be open to inspection by-

(a) a parent or guardian of a pre-school child attending or proposing to attend the pre-school service,

(b) an employee, and

(c) an authorised person.

(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 was maintained of all fire drills which had been completed in the service. The records indicated and staff members reported that fire drills were carried out monthly. The last recorded fire drill took place on 16/05/2025.
 - (b) A record was kept of the maintenance of the fire extinguishers and smoke alarms in the premises which was certified as having been serviced most recently on 23/07/2024.
- (2) (c) Records were open to inspection by an authorised person. All fire records requested by the inspector were available for review.
- (4) The evacuation procedure was conspicuously displayed on the premises which contained details in relation to the procedure to be conducted in the event of a fire or emergency in the service.