

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015GY225				
<b>Name of Service:</b>	Sea Garden Childcare				
<b>Address of Service:</b>	Leenane Childcare, Leenane, Co. Galway				
<b>Eircode:</b>	H91 C6H9				
<b>Name of Registered Provider:</b>	Joan Mulloy				
<b>Service type:</b>	Full Day				
<b>Dates of Inspection:</b>	14/11/2025				
<b>No of pre-school children:</b>	<table border="1"> <tr> <td>AM</td> <td>9</td> <td>PM</td> <td>4</td> </tr> </table>	AM	9	PM	4
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<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, Quality Assurance Directorate, Clinical & Administration Building, Block A- (1st Floor-Green Corridor),Merlin Park, Galway.				
<b>Inspection undertaken by:</b>	F Nic Dhonnacha				
<b>Title:</b>	Early Years Inspector				
<b>Authority to Inspect</b>					
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				

### Description of service

Sea Garden Creche operates from a modular prefabricated unit on the grounds of Leenane national school in the rural village of Leenane, county Galway. The service consists of an entrance hall, one playroom, a designated sleep room and a kitchen. Children's main meals are prepared, heated, served and stored on site. The preschool is located walking distance from the village and has public parking adjacent to the school. This community preschool service offers the options of full day care and part-time care provision from 08.30 to 17.30. An Early Childhood Care and Education (ECCE) pre-school care programme and sessional programme from 09.00 to 12.00 Monday to Friday is also offered. In the designated sleep room 3 cots are available for younger children under the age of 2 years and 3 stackable beds are available for older preschool children. The preschool has 2 designated play areas that have been recently refurbished, 1 to the side of the premises which was in use and 1 to the rear which was not in use. A preschool curriculum focusing on emerging interests of the children is provided. Additionally, the community creche provides a school aged service after school programme.

### Staffing

The registered provider is the chairperson on the board of management for the creche. The registered provider is supernumerary and not working in the service. Three adults were employed in the service, the person in charge and 2 additional adults. On the 14/11/2025 there were 2 adults on duty throughout the day.

### 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.

On inspection additional non-compliances which posed a risk were identified under Regulations 9, 16, 19, 22, 23, 24, 27 and 29. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation (Regulation 16 Record in Relation to a Pre School 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

On the 17/11/2025 the registered provider acknowledged that a referral has been made by the early years inspector to a support agency for quality and improvement.

## Acknowledgments

The inspector wishes to acknowledge the cooperation of the 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.

(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.

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

- (a) the policies, procedures and statements of the service specified in Schedule 5;

#### Compliance Information

(1)(a) The registered provider was the designated person in charge and there was a named person in charge who can deputise.

On the 14/11/2025, 4 files were reviewed including the registered provider and 3 staff files.

(2)(a) Seven of the required 8 written and validated references were available on file from a past employer in respect of the 4 adults.

- (b) One written and validated reference was available on file was from a reputable source for 1 of the 4 adults.

- (c) Garda vetting disclosures were available in respect of the adults employed by the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew garda vetting every 3 years.
- (d) Documentary evidence indicated that 3 of the 4 adults had lived outside the jurisdiction for longer than 6 consecutive months while over the age of 18 years and 2 of the 3 adults had the required police vetting.
- (4) Two of the 3 staff working directly with the children had evidence of Quality and Qualifications Ireland (QQI) Level 5 to Level 8 in Early Childhood Care and Education.

### Non-Compliance Information

(1)(b)

1. Neither the registered provider or the person in charge were on site during the inspection. There was no nominated person in charge available during the operating hours of the service on the day of inspection or the 2 days previous, from Wednesday 12/11/2025 to Friday 14/11/2025 inclusive.

(d)

2. One adult had worked outside the jurisdiction for longer than 6 consecutive months or more, while over the age of 18 years. The adult had lived and worked in another country on 2 separate occasions, evidenced on their curriculum vitae. There were no police vetting certificates on record for that adult.

(4)

3. One adult working directly with children since the end of July 2025, did not hold one of the following:
  - A minimum award in Quality and Qualifications Ireland (QQI) at a Level 5 on the National Framework of Qualifications, in Early Childhood Care and Education or a qualification deemed by the Minister to be equivalent.
  - An exemption from the qualification requirement and confirmation that the Minister accepts this exemption.
  - The qualification requirement or relevant specialist training and the basis on which the capitation may be used for a person employed under the Access and Inclusion Model (AIM), detailed in an exemption letter from Pobal.

- (7)(a) The service did not comply with their own staff training policy, which specified that the registered provider, when hiring employees and unpaid workers will maintain verified references, qualifications and vetting documentation on file.

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

On the 23/12/2025 the registered provider advised of the following.

## **Corrective and Preventive Action**

(1)(b)

A new management system has been agreed. Roles of management have been clearly identified. A person in charge and a deputy person in charge had been agreed amongst the staff members. The registered provider will review the staff roster on a weekly basis to ensure there is a clear management structure in place.

(d) 2.

All curricula vitae will be reviewed to ensure exact dates are included for all employment histories. Audits will be carried out regularly in the childcare service to ensure compliance with vetting and recruitment documents.

The staff member has ceased employment in the childcare service since the 17/11/2025.

(4)

A recruitment and compliance checklist has been implemented to confirm qualifications and exemption requirements have been met prior to employment in the service. Management will carry out regular audits of all staff files to ensure ongoing compliance with qualification, training and vetting requirements. Training has been provided to management on regulatory requirements regarding staff qualifications and ratio compliance.

The staff member with no qualification has ceased employment since the 17/11/2025.

(7)

The service's staff training and recruitment policy has been reinforced to ensure all qualifications, references and vetting documentation are verified and retained on file before staff commence employment.

Training has been provided to management on regulatory requirements.

## **Supporting documentation submitted**

(1)(b) A staff roster has been submitted highlighting who is in charge.

(d)2 The staff member has ceased employment. An email was submitted by the registered provider to inform the inspectorate of the cessation of employment for this staff member.

(4)3 On the 18/11/2025 an email was received from the registered provider to advise 1 unqualified adult was no longer working in the service. The staff member had ceased employment in the service.

(7)

The staff supervision policy was submitted and a checklist for all staff requirements prior to commencement of employment and a sign off sheet for policies and procedures will be maintained on each staff file.

A staff sign off sheet for reading and understanding the service policies and procedures.

A recruitment file for a new adult who commenced work on 1/12/2025 was submitted to the office of the early year's inspectorate.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 (1)(b), (d), (4) and (7) has been adequately addressed.

### Part III – Management and Staff

#### Regulation 10 - Policies, procedures etc. of pre-school service

*A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.*

### Compliance Information

A folder was available in the service with policies procedures and statements specified in Schedule 5. These are the policies reviewed by the inspector on the day of inspection.

- Safe Sleep Policy
- Outdoor Play Policy
- Fire Safety Policy
- Record Keeping Policy
- Healthy Eating Policy
- Staff Training Policy
- Staff Supervision Policy

### Non-Compliance Information

1. On the 14/11/2025 there was no evidence of a Policy on Infection Control. The adults working on this day were unable to locate any such policy.

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

On the 23/12/2025 and 15/01/2026 the registered provider advised of the following.

#### **Corrective and Preventive Action**

The service has an up-to-date Infection Control Policy available in the preschool service. This policy has been recently reviewed. Staff were informed and shown where this policy is located for future reference. All staff have been retrained in relation to the service Infection Control policy. Staff will be retrained annually on this policy and upon commencing employment in the service.

#### **Supporting documentation submitted**

An updated Infection Control Policy was submitted to the office of the early years inspectorate.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 10 1 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.*

*(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

(2) On the morning of Day 1 of the inspection, there were 9 children present.

- 2 children were aged under 1 year,
- 1 child was aged between 1 and 2 years,
- 1 child was aged between 2 and 3 years,
- 3 children were aged between 3 and 4 years,
- 2 children were aged between 4 and 5 years.

There were 2 adults caring for these children.

(8)(a) The registered provider ensured that there were 2 adults on the premises while the pre-school was operating.

### 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
- (h) details of attendance by each pre-school child on a daily basis;
  - (i) details of staff rosters on a daily basis;

#### Compliance Information

(h) Records were available of each preschool child's daily attendance in the preschool service.

#### Non-Compliance Information

- (i) There was no accurate up to date staff roster available to show staff attendance, start and finish times, absences and substitutions. This posed a risk of safety in the event of an emergency or fire. It was acknowledged that a record was available with the staff's first name, allocated administration time and break times. It did not give a true reflection of the staff attendance on the 14/11/2025

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

On the 23/12/2025 the registered provider advised of the following.

#### Corrective and Preventive Action

- (i) An immediate review of staff attendance records was carried out following the inspection. An accurate, up-to-date staff roster was created to clearly record the staff attendance, start and finish times, and absences. The staff have been educated on the importance of accurate record keeping. A monthly staff roster has been implemented, which includes staff names, start and finish times, break times, and absences. In addition, a daily staff attendance record has been introduced, where staff are required to record their arrival times, departure times and breaks each day. Both records are maintained in the classroom. The manager of the childcare service has designated responsibility of maintaining an up-to-date roster. Guidance has been provided to all staff on attendance recording procedures and the importance of accurate records for the safety of the service. From January 2026 the service intends to use the application 'Child Paths' to record staff attendance electronically.

#### Supporting documentation submitted

Staff attendance records have been submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 16 (i) has been adequately addressed.

### 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) **Basic Needs of Children:**

- The adults treated the children in a caring and respectful manner. Positive behavioural strategies were used during interactions. The adults conversed with the children in a sensitive manner, used soft tones of voice and engaged with the children at their level. The adults offered praise and encouragement. The children were respected and supported in their choice of individual and group engagement in activities.
- The adults demonstrated an appropriate level of knowledge of the children's interests and individual capabilities. The children were notified and consulted in advance of changes in the activities.
- The children were encouraged to be independent in play and learning, whilst caring for their belongings and using the toilet. The children were encouraged and supported to manage their own personal care needs.
- Three children wore a nappy on the day and had it changed in the designated changing area. The dignity and privacy of the children was respected during nappy changing.
- The infant's sleep was attended to on an individual basis. The children under 2 years of age were observed having a sleep on the day of inspection.
- The older children did not show cues of tiredness and did not take a nap or rest during the day. Three stackable beds were available for sleep provision if required.
- The infants were encouraged to feed themselves and promoted to be independent. Mealtime was observed to be a relaxed and unhurried period.

- The children were observed listening at circle time to stories and singing songs both in English and Spanish, they were observed painting and the theme was autumn colours.
- The children had the freedom to move around the indoor environment playing in the interest areas of their choice. The children transitioned from the indoor to the outdoor area to engage in play-based activities.
- The children had the opportunity to play in the outdoor play area, they were observed playing with ride on toys and play materials, climbing on the activity centre and building blocks.

### Physical and Material Environment

- There were areas of interest available in the playroom these included a role play kitchen, a free writing area, a black board area, a tuff tray with leaves, a construction area, individually coloured sensory floor mats and a sensory board with locks chains and switches attached.
- The children had access to aprons for messy play and the painting.

### Outdoor play area

- The outdoor play area has recently been developed into 2 separate areas. The area to the side of the premises was enclosed with a concrete surface, wooden fencing and gates.
- Play materials included a wooden playhouse with steps up, a bench, balance bikes, 4 wheelers, a playhouse/ kitchen, child size wheelbarrow, trucks and cars.
- The play area to the rear of the premises had a grass surface with a large open wooden cabin/den. The area had concrete paths and fencing to secure. This area was under development and was expected to be opened to the children in the Spring as advised by the staff.

### Non-Compliance Information

#### (1)(a) Physical and Material Environment

1. The dress up outfits available in the service were stacked randomly in a bundle in an open top box which reduced the opportunity for children to see what was available and select a costume of their choosing.
  2. The physical environment in the playroom was not purposefully structured to develop babies' curiosity and desire for exploration. There was no soft matting or pull to stand props to develop babies gross motor skills. Two children under 12 months of age had no safe soft play area where they could lie, roll, creep, crawl, pull themselves up, learn to walk and be protected from children who were more mobile.
    - It was acknowledged that 2 covered cot mattresses and 3 yellow cushions were available in the playroom.
- From 10.25 – 10.45 on the day of inspection, 1 adult and the 2 children under 12 months were observed

using this area for story time. The area was not an adequate environment to provide learning experiences for these children. This area needs further development.

3. There was no adult armchair provided in the playroom to allow the adult to sit and hold, feed, cradle or comfort the children. The adult was observed to sit on the mattresses that were on the floor in the corner of the room while holding a baby under 12 months of age.
4. It was observed that 7 children aged between 16 months and 4.5 years sat directly on the hard floor during story time. There was no adequate soft seating, couches or an area for rest and relaxation available for the older children attending the preschool service. This area needed further development.

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

On the 23/12/2026 the registered provider advised of the following.

#### Corrective and Preventive Action

(1)(a)

1. The dress-up area was immediately reorganised, with costumes displayed on hangers and placed in an accessible container, allowing children to clearly see the available materials and make independent choices. The playroom environment will be planned and reviewed on a regular basis to ensure it is developmentally appropriate for all age groups.
2. A safe soft play area for babies was immediately established. The required equipment had been ordered and was delivered the day following the inspection. The area is clearly defined and protected and equipped with cushions of various textures and shapes and appropriate materials to support the development of gross motor skills, including rolling, crawling, pulling to stand and early walking.  
  
The playroom was reorganized to clearly separate areas for babies and more mobile children, ensuring the safety of children under 12 months of age. The playroom environment will be planned and reviewed on a regular basis to ensure it is developmentally appropriate for all age groups, especially babies under 12 months of age.
3. An appropriate adult chair/armchair was provided in the playroom to enable staff to sit safely and comfortably while holding, feeding, soothing or comforting children. Appropriate furniture and equipment for both adults and children will be available at all times and maintained in good condition. Management will continuously monitor the organisation of the playroom.
4. Mats and rugs were added to ensure that older children do not sit directly on the hard floor during activities such as story time or circle time.

### Supporting documentation submitted

A photograph of the costumes on hangers and a new hanging unit for the costumes was submitted.

A new wipeable matted area for the preschool children to sit on was submitted.

A photograph of a new armchair for the adults working in the service.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 19 (1)(a) 1-4 has been addressed.

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

#### Regulation 22 – Food and drink

*A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.*

### Compliance Information

- The children had access to their sippy cups with water on a tray that was placed on a low-level unit throughout the day.
- The parents/guardians provided the mid-morning snack and afternoon snack. This consisted of a variety of fruits, vegetables, yogurts, sandwiches and brown bread.

### Non-Compliance Information

1. Adequate and suitable, nutritious and varied food was not provided at the evening meal for a child who had attended the service on a full day care basis. A rice cake was provided and when the early years inspector asked if additional food was being served a few raisins with water was provided to the child. The staff advised that rice cakes, crackers or raisins are provided as a snack at approximately 16.00 most evenings. A child in full day care requires at least 2 meals and 2 snacks if attending on a full day care basis.
2. A 3-week menu plan was not available. There was no evidence to demonstrate how the service ensures that food and drinks provided are suitable, sufficient, nutritious and varied whether they are provided by the service or from the child's home as per best practice guidelines in HSE Food and Nutrition Guidelines for Pre-School Services. It was acknowledged that there was a schedule with daily dinners on the wall in the service (this was the main hot meal of the day).

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

On the 23/12/2025 the registered provider advised of the following.

### **Corrective and Preventive Action**

1. Clear procedures will be established to ensure that food provided from home, where applicable, also aligns with healthy eating guidelines. Ongoing guidance and training will be provided to staff on children's nutrition, portion sizes and full day care food requirements. Management will carry out regular reviews of menus and food provision practices to ensure continued compliance with regulatory standards.
2. A 2-week menu plan will be implemented, detailing all meals and snacks provided by the service, ensuring variety, nutritional balance and age appropriateness. The menus will be developed in line with the HSE Food and Nutrition Guidelines for Pre-School Services and will be displayed and made available to all staff and parents.

### **Supporting documentation submitted**

A copy of a 2-week menu plan with the 2 main meals was submitted.

### **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 22 has been addressed.

### **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:**

- A system was in place at the entrance door to monitor the safe entry and exit of the children to and from the service.
- The outdoor play area to the side of the service was secured with fencing, walls and gates to protect the children within the area.
- All toys and play equipment were maintained in good condition.

#### **Infection Control:**

- The sanitary facilities were equipped with warm running water, liquid soap, hand paper towels and lidded, lined pedal operated bins.
- A nappy changing area was available in the sanitary facility with a curtain screen for privacy and maintenance of dignity.

### Administration of Medication:

- Medication was not administered in the service during the inspection.
- Documentation was available for the adults to record medication should medication be administered to the children in attendance.

### Safe Sleep:

- Three cots and 3 stackable beds were available for the preschool children attending the service.

### Fire Safety:

- One fire exit door had a sounder alarm to alert the staff if the children opened the door that leads out to the entrance path to the preschool service.
- The fire exit routes and passageways were clear from obstruction in the service.
- The fire exit routes and fire assembly point were readily identified with signage and known to the adults.

### Non-Compliance Information

#### General Safety:

The designated sleep room needed de-cluttering and safety measures to reduce the potential risk of harm and safety to the preschool children within.

1. At approx. 10.30 am one stackable bed was standing up against a cot in the designated sleep room. This posed a risk of harm to the preschool children.
2. A box of unopened new blinds and two folded highchairs were stored between 2 cots posing a risk of harm to the preschool children.
3. Staff personal belongings were accessible to the preschool children. A coat was stored on the wicker chair in the designated sleep room between 2 cots. The staff bags and coats were stored on the inside door of the main playroom. This posed a risk of harm to the preschool children.
4. An electric heater with trailing lead was stored behind the door in front of the desk in the sleep room posing a trip hazard.
5. The cosy area was located beside a wall mounted low level radiator with the turn dial directly located beside the area where the children under 12 months were observed sitting on mattresses with cushions to support them. This posed a risk of harm to the preschool children as there was no protective covering on the protruding turn dial.
6. An electrical printing device with trailing leads was located on the top shelf of the arts and crafts shelving unit beside the kitchen door, this posed a potential risk of harm to a child.

7. A lamp with trailing lead was resting on a cardboard box behind the door in the sleep room posing a trip hazard.
8. A pink soother with beads attached spelling the child's name was noted on the desk in the sleep room posing a risk of safety and harm to the preschool child.

### Infection Control:

9. The children's perishable food items were not stored in the refrigerator in the kitchen. The early years inspector observed 2 yogurt pouches in lunch boxes on a trolley inside the playroom at 10.00 and remained on the trolley until approximately 14.30 when the children were having snack time. This posed a risk of the food spoiling. It was at variance to the service policy and the guidelines on the yogurt pouch stating they should be refrigerated between 0 and 4°C.
10. On the day of inspection, items were stored inappropriately in the sleep room posing a risk of cross contamination.  
  
Equipment was not consistently stored safely and in an organised hygienic way.  
  
For example, the inspector noted the following.
11. In the children's sanitary area at 11.00 there was a bin that was overflowing and the lid would not close.
12. Three stackable beds that were not in use were made up with sheets and blankets. However, the sheets were touching the floor posing a risk of cross infection.
13. A box with wheelie bin liners were stored under a cot.
14. Brown paper was stored under a cot.
15. Loose sheets were stored on an open shelf unit in the corner on the floor of the sleep room. It was difficult to identify if the items were used or unused. There was no evidence of individually labelled containers or storage boxes with each child's bedding items. There was no evidence of how the bed clothes/cot sheets were cleaned or laundered. The staff advised they send them home with parents/guardians.
16. Additionally, on open shelving in the designated sleep room 3 electronic printing devices, folders, writing materials and an electric fan were inappropriately stored posing a potential risk of harm.
17. An adult's black bedroom slippers, a child's car seat and an orange and yellow poof seat were stored inappropriately posing a risk of cross infection.
18. The nappy changing mat was frayed and torn. This posed a risk of cross infection to the pre-school child as the mat cannot be cleaned sufficiently and needed replacement.

19. There was evidence of a build-up of dust under the cot mattresses that were on the floor in the main playroom posing a risk of cross infection.
20. A used apron and gloves were observed on top of the desk in the designated sleep room, this posed a risk of cross infection as the items were not disposed of safely. The staff were informed but the items remained on the desk throughout the inspection.
21. A pink soother was noticed on the desk in the sleep room with no storage box. This posed a risk of infection as it was not stored safely. Additionally, a blue uncovered soother was found on the wicker chair under clothes in the designated sleep room. The 2 shelf unit in the designated sleep room contained 3 loose and uncovered soothers this practice posed a risk of cross infection to the preschool children. No safe storage or sterilisation practices were observed during the inspection.

### Safe Sleep:

22. The designated sleep room temperature was recorded after 2 children got up. They were unsettled and did not sleep. The room temperature was recorded at 23.1° C at approximately 10.49. It was observed that an electric heater was turned on beside the desk. It was recorded at 60.4°C and the wall mounted low level radiator was recorded at 35.4°C. No child was sleeping at this time. The staff member was informed immediately. The radiator was turned off. The service sleep policy states the room temperature should be between 16-20°C. This posed a potential risk of harm to the preschool children.
23. No room temperature checking device was available, however a staff member continued to write 18°C on the sleep check records that were stuck to the door of the designated sleep room. When questioned she stated this was the temperature the room was supposed to be at. This practice posed a potential risk of harm to the preschool children.
24. The 3 mattress covers were not waterproof thereby the staff were unable to wipe them clean between use. The staff advised that 1 cot was used by 2 children at different times. This posed a risk of cross infection as the staff cannot clean the mattress cover in between use.
25. Two fleece blankets were observed in the designated sleep room. In conversation both staff were unaware that children under 1 year old required cellular blankets while sleeping. This was at variance with the safe sleep service policy and posed a potential risk of harm to the preschool children.

### Fire Safety:

26. Records of monthly fire drills were not available. It was acknowledged that a fire drill was completed on the 25/07/2025. This posed a safety risk to children and staff in the event of an emergency or fire.

### Action submitted by the Registered Provider

On the 23/12/2025 the registered provider advised of the following.

#### **Corrective & Preventive Action**

##### **General Safety:**

The designated sleep room was reorganized immediately to reduce potential risks and ensure a safe environment for children.

1. Stackable beds are now placed flat on the floor and safely stacked one on top of another when not in use.
2. The box of blinds was removed following the installation of blinds on the windows.
3. & 4. The electric heater was removed from the childcare service and the staff members personal belongings will be left in their cars or in the locker unit that has been ordered. Management will monitor the organization of the sleep room to ensure ongoing compliance with safety requirements.
5. Temperature control dials were removed from the radiators in the playroom to prevent access by the children.
6. The cable from the electrical printing device was secured correctly to eliminate any risk to the children.
7. The box and lamp were replaced safely. A new storage unit for the children's belongings has been ordered. Daily safety checks of the sleep room will be carried out to ensure the area remains free from hazards.
8. Staff were informed of the importance of storing soothers in each child's individual designated container before and after use.

##### **Infection Control:**

9. Perishable food items such as yoghurt and cheese are now stored in the service refrigerator upon the child's arrival and provided at the first snack time.
10. The designated sleep room was re organized immediately following inspection to reduce the risks of cross infection.
11. Staff were instructed to remove waste bags that were full immediately and replace them with new bag.
12. Bed sheets are removed daily and stored in a designated storage unit.
13. &14. Bin liners and brown paper were removed from under cots and stored in a designated area.
15. A dedicated storage unit with closed shelving was purchased for children's bedding, soothers and personal items.
16. & 17. Printers, fan, adult footwear and a child's car seat were removed from the designated sleep room.
18. The frayed nappy changing mat was replaced with a new one.

19. Cots will be deep cleaned weekly in the service in addition to daily cleaning routines.
20. Used gloves and aprons will be disposed of immediately in the designated waste bin.
21. Staff were informed of the importance of storing soothers in each child's designated container before after use.

### Safe Sleep:

22. Room temperature is now checked regularly to ensure it remains within the required range.
23. A new temperature monitoring device was ordered and arrived the day after the inspection.
24. Three waterproof cot mattress covers were purchased to allow effective cleaning between uses.
25. The childrens parents will provide appropriate cellular blankets for the children under 12 months of age and additional blankets were purchased by the service for the designated sleep room.

### Fire Safety:

26. Fire drill records were identified and relocated to the correct folders to ensure easy access for all staff members. Fire drills will be carried out and recorded on a regular basis in line with fire safety requirements and the management of the service will monitor the fire safety records to ensure they are maintained correctly going forward.

### Supporting documentation submitted

#### General Safety:

- Photographs were submitted of the reorganised, decluttered designated sleep room.
- Photographs of the wall mounted storage organiser.
- Photographs of the new individual labelled storage pots for the children's soothers.
- A copy of the letter sent to parents advising not to send in soothers with lanyards etc and to place in a storage pot to reduce the risk of infection.
- A copy of the daily checklist for indoors and the outdoor environment was submitted.
- A photograph with the staff s personal belongings removed was submitted.

#### Infection Control:

- A copy of the service updated infection control policy was submitted.
- A copy of the designated sleep room cleaning schedule.
- A copy of the soother cleaning/sterilising records.
- A photograph of a new nappy changing mat in use in the nappy changing area.

### Safe Sleep:

- A photograph of the new temperature monitoring device was submitted.
- A photograph of a new cot mattress protector.
- A photograph of the new cellular blankets in use for the younger children in the service.
- A copy of an email sent by the childcare service to the preschool children's parents was submitted.

### Fire Safety:

- A copy of the fire drill records was submitted for September, October and November 2025.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 23 1-26 has been addressed.

## Part VI - Safety

### Regulation 24 - Checking in and out and record of attendance

*(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.*

*(3) A registered provider shall ensure that-*

*(a) no person other than-*

*(i) pre-school child attending the service,*

*(ii) a person dropping or collecting such a child,*

*(iii) an employee, or*

*(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and*

*(b) a daily record in writing is kept of the entry on the premises of any such person.*

### Compliance Information

(1) A record was maintained of the children's daily attendance in the service.

(3)(a) A verbal consent was provided by the adults working on the premises to allow the early years inspector entry.

### Non-Compliance Information

(3)(b)

1. There was no evidence of a check in check out record book on the day of inspection for the early years inspector or other parties listed in (3)(a)(i)-(iv) entering the service. The adults on duty were unaware if a visitors' book was available to record the persons in (3)(a)(i)-(iv) details, date, time, name, contact details,

reason for entry, the person who approved entry, time in and time out of the service. This posed a potential safety risk to the staff and children in the service.

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

On the 23/12/2025 the registered provider advised of the following.

#### **Corrective and Preventive Action**

(3)(b)

1. A visitor sign-in and sign-out record book has been implemented and is now available on site at all times. Staff have been informed of the location of the visitor book and of the requirement to ensure that all visitors complete the record to support the safety of children and staff.

#### **Supporting documentation submitted**

A copy of a receipt dated 22/12/2025 for a new visitor's book was submitted.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 24 (3)(b) 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

- (1) Two adults working directly with the children held a record of up to date First Aid Responder (FAR) training.
- (2)(a) A suitably equipped first aid box was stored in an accessible and conspicuous position in the kitchen.
- (b) The first aid box was available in the service for use by the adults 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.
- (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 in writing was available to demonstrate a fire drill was carried out by the service. The last fire drill took place on the 25/07/2025.
- (b) Up-to-date records of the number, type and maintenance service were available for the firefighting equipment. The most recent service of the firefighting equipment took place on the 13/08/2025.  
Up-to-date records of the number, type and maintenance of smoke alarms. The most recent service of the smoke alarm took place on the 17/04/2025.
- (4) Fire action notices were displayed in the service demonstrating the procedures to be followed in the event of a fire.

### Part VI - Safety

#### Regulation 27 – Supervision

*A registered provider shall ensure that pre-school children attending the service are supervised at all times.*

#### Non-Compliance Information

3. Insufficient qualified staff were available to provide adequate safe supervision to the children aged between 6 months and 4 years 6 months who were in attendance on the day of inspection during transition to sleep, nappy changing, indoor and outdoor play activities and during mealtime activities. The adult child ratios were inadequate during these times.
- From approximately 10.05 to 10.15 one staff member was in the playroom with 7 children aged between 16 months and 4 years 6 months while the other staff member was in the sleep room with 2 other preschool children.
  - At approximately 11.15 one staff member went to the kitchen to prepare the dinner while one staff member was left supervising 9 children between the ages of 7 months and 4 years 6 months.

- Between 11.30- 12.05 one staff member was supervising 7 children in the outdoor play area to the side of the premises while the other staff member was in the kitchen preparing the main hot meal of the day.
- There was no relief staff available to allow the staff members to have a break throughout the day of inspection.
- At approximately 12.55 one staff member was changing a child’s nappy while one staff was gone to the kitchen to prepare lunch for this child while the other children played together in the indoor playroom.
- From approximately 13.50-14.20 one staff member was assisting the early years inspector with the administration part of the inspection while one staff member was outside talking to parents/guardians while the children played indoor activities together.

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

On the 23/12/2025 the registered provider advised of the following.

#### **Corrective and Preventive Action**

An immediate review of the staffing rosters and supervision arrangements was carried out following the inspection.

The service has 3 adults working within the crèche during the hours of operation now.

Staff rosters and daily schedules have been reorganized to ensure that adult-to-child ratios are maintained at all times, including during sleep transitions, nappy changing, indoor and outdoor play and mealtimes.

The manager provides operational cover and prepares meals, supporting the team by covering staff breaks and stepping into rooms when another staff member needs to leave the room to carry out nappy changing or other essential duties.

#### **Supporting documentation submitted**

A copy of the staff rota and recruitment file for a new staff member was submitted to the office of the early year’s inspectorate.

### Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 27 has been addressed.

### Part VI - Safety

#### Regulation 28 - Insurance

*A registered provider shall ensure that the pre-school service is adequately insured.*

#### Compliance Information

Up to date insurance cover was available for 20 children attending the service. The policy is valid until 27 March 2026.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-*  
*(b) safe and secure,*

#### Non-Compliance Information

- (b)
1. A yellow wheelie bin was accessible and stored at the entrance to the preschool service. This requires a safe secure location inaccessible to the preschool children.
  2. An old mud kitchen was left against the portacabin and 2 impact absorbing slabs (red and black in colour) were located near the entrance gate to the preschool service posing a risk of safety to the children entering and leaving the service.
  3. The window opening was difficult to access as there was material stuck with velcro adhesive and blue tac to block out the sunlight on both windows thereby making it difficult to open the windows in the designated sleep room if remedial action was required.

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

On the 23/12/2025 and the 15/01/2026 the registered provider advised of the following.

#### Corrective and Preventive Action

- (b)
1. The yellow wheelie bin was immediately moved to a safe and secure location, inaccessible to the preschool children. All waste bins and non-child-related equipment will be kept in secure, designated locations at all times. A new enclosure for the wheelie bin was expected to be built in the new year.
  2. The old mud kitchen was removed from the area and disposed of, as it was broken and posed a safety risk. The outdoor area and entrance points will be checked regularly to ensure that no hazardous items are stored in areas accessible to children.
  3. All materials previously attached to the windows using velcro adhesive and blue tac were removed. Appropriate curtains were installed to allow for easy window opening, effective ventilation and safe

cleaning of the windows. Windows and ventilation points will be kept clear and accessible to allow for prompt action in the event of an emergency or for ventilation purposes.

### **Supporting documentation submitted**

- A photograph of the entrance area to the preschool service.
- A photograph of an environmental outdoor checklist was submitted.
- A photograph of the windows in the designated sleep room were submitted.

### **Summary Comment**

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 29 (b) 1-3 has been addressed.