

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015KE096
--------------------------	-------------

<b>Name of Service:</b>	Little Toppers
-------------------------	----------------

<b>Address of Service:</b>	Ovidstown, Straffan, Co. Kildare
----------------------------	----------------------------------

<b>Eircode:</b>	W23 DX97
-----------------	----------

<b>Name of Registered Provider:</b>	Josephine Kiernan
-------------------------------------	-------------------

<b>Service type:</b>	Full Day, Sessional
----------------------	---------------------

<b>Date of Inspection:</b>	27/01/2026
----------------------------	------------

<b>No of pre-school children:</b>	AM	47	PM	27
-----------------------------------	----	----	----	----

<b>Address of the Early Years Inspectorate:</b>	Suite 7, Vista Primary Care, Ballymore Eustace Road, Naas, Co Kildare
-------------------------------------------------	-----------------------------------------------------------------------

<b>Inspection undertaken by:</b>	F Carty and R Flynn
----------------------------------	---------------------

<b>Title:</b>	Early Years Inspectors
---------------	------------------------

### 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.
---------------------------------	-----------------

### Description of service

Little Toppers is a privately owned service operated by the registered provider and provides full day and sessional care to children aged 1 to 6 years. The service is registered to operate from 7:30am to 6.00pm, Monday to Friday. Sessional care is provided from 9.00am to 12.00pm.

The service is located in a purpose-built service located on the outskirts of Straffan, Co. Kildare. There are seven care rooms in the service. On the day of inspection there were six care rooms in operation.

The service also operates a school age childcare service.

There is a large outdoor area to the rear of the building.

### Staffing

The service employs 15 adults.

On the day of inspection there were 13 staff present including the registered provider and an adult employed to work with school age children. The person in charge and deputy was available to help out in rooms when required. The service also employed a cook who was not present on inspection.

### Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance, information and records, 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 following regulations:

9 (1)(a)(b),(2)(a)(c)(d),(3),(4) – Management and recruitment,

11 (1),(2),(8)(a) – Staffing levels,

15 (1)(a) to (i)

16 (1)(h)(i)(k) – Record in relation to pre-school service,

19 (1)(b) – Health, welfare and development of child,

23 – Safeguarding, health, safety and welfare of child,

A sampling process was used to assess compliance under regulation 15 (1). A sample of 12 child records were reviewed. A sampling process was used to assess compliance under Regulation (16)(1)(k). A sample of 10 Accident and Incident records were reviewed.

A sampling process was used to assess compliance under regulation 19 (1)(b) – Health, welfare and development of child. As a result, the scope of the inspection included the Little Cubs, Little Beavers and Little Giraffes rooms.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

### Acknowledgments

The inspectors wish 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

*(2) A registered provider shall ensure that each employee, unpaid worker and contractor is suitable and competent taking into consideration the nature of the needs of children, including by-*

*(a) consideration of references from the person’s past employers, if any, and in particular the most recent employer, if any,*

*(b) consideration of references from reputable sources in the case of a person who has no past employers,*

*(c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*

*(d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

*(3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*

*(4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.*

#### Compliance Information

(2)

The inspection focused on the recruitment records for three staff employed since the last inspection on 13<sup>th</sup> November 2024. Regulation 9(2)(c) was reviewed in respect of all adults who work in the service. Documentation was reviewed in respect of these adults and met regulatory requirements as follows:

(a)(b)

Six written and validated references from a past employer were available for inspection in respect of the three adults.

(c)

Garda vetting disclosures had been obtained for all adults employed in the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for all adults in the service.

(4)

Records were available evidencing that the three staff members who were employed to work directly with the children held the required qualification at a minimum Level 5 on the National Framework of Qualifications or equivalent as deemed by the Minister.

## Non-Compliance Information

- (3)
- The registered provider did not take appropriate measures to ensure that all adults were suitable to work in an early years service prior to their commencement as follows:
- International Police vetting was not available for one adult who had lived outside the State for a period exceeding six months.
  - Garda vetting in respect of two adults had not been received or reviewed prior to them commencing work in the service.
  - Two references in respect of one adult had not been validated prior to them commencing in the service.

## Corrective & Preventive Action submitted by the Registered Provider

### Corrective and Preventive Action

We have changed our procedure on recruitment to include criminal and sex offences for international police requests and made all management staff aware of these changes.

We have changed on policy on recruitment to ensure that no new staff member will start working with children until Garda vetting, international police clearance and 2 written references have been received and that all these documents have been checked and verified prior to starting. We have made all relevant management staff aware of these changes.

### Supporting documentation submitted

Garda and Police vetting documents and a revised Recruitment Policy submitted.

## Summary Comment

The corrective and preventive actions together with the supporting documents were submitted and reviewed by the inspector and are deemed to meet the requirements of Regulation 9.

## 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)

An adequate number of adults were working directly with the children at all times during the inspection.

(2)

The minimum ratio of adults to children for full day care services were adhered to at all times during the inspection. There were 47 children attending the service being supervised by 12 adults on the day of inspection.

(8)(a)

There were at least two adults on the premises 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.*

### Compliance Information

(1)  
A sample of 12 records were reviewed. The registered provider ensured that a record in writing was kept of the details relating to (a)(b)(c)(d)(e)(f) and (i) of the above regulation for all the records reviewed.

### Non-Compliance Information

- (g)  
One record did not contain details of a child's medical practitioner.
- (h)  
One record had no immunisation details recorded.

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

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

We have changed our pre-admission policy to state that children cannot start until all relevant information required is provided and the registration form is complete. This will be signed off by the relevant manager or deputy manager prior to commencing in the creche.

## **Supporting documentation submitted**

Updated Settling in/admissions policy and updated child record form.

## **Summary Comment**

The corrective and preventive actions together with the supporting documents were submitted and reviewed by the inspector and are deemed to meet the requirements of Regulation 15.

## **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:*

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

## **Compliance Information**

- (h)  
Details of the attendance of each child were recorded at the time of entering and leaving the service.
- (i)  
The staff roster was available on the day of inspection and reflected the adults working in the service.
- (k)  
A sample of 10 accident and incidents records were reviewed. These records were signed by staff and parents and were completed appropriately.

## 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 service had a healthy eating policy in place and meals were prepared and cooked onsite. Children bring in a morning snack from home. Meals were provided at regular intervals. Dinner was served from 11:30am. Younger children were given bibs for dinnertime. Drinking water was available to children throughout the inspection and children were given a drink with their meal. Staff supported younger children who needed assistance with their meal.

Children's hands and faces were cleaned after dinner. Children's nappies were changed regularly, and staff were observed engaging warmly with children when providing this care.

There was a designated nap time in the Little Giraffes and Little Cubs rooms. All children were made comfortable for sleep, each child had an individual bed or cot to sleep in, staff provided the children with blankets, and they offered soothers and comforters to those who used them.

Children's independence was supported, staff were observed encouraging children to feed themselves, to put their bowls away after dinner and to clean up after their play. Staff provided an appropriate level of supervision whilst supporting the children's independence during play and mealtimes.

Staff demonstrated warmth during their interactions with the children throughout the inspection. Children were comforted promptly when they became upset. Staff were observed to use distraction, gentle tones and praise when promoting positive behaviour in line with the service's behaviour policy.

Staff described how they record information about each child's day using an online application detailing information on food, sleep, nappy changes and activities. Parents were observed in the service during arrival and collection times.

### Non-Compliance Information

(19)(1)(b)

Two children in the Cubs room did not eat any of the dinner of pasta and tomato sauce with cheese. Staff stated that they didn't like pasta. No alternative was offered to the children before they were put to bed at 12.00pm. It was noted that the children last ate at 10.00am. No further food was offered to them until the afternoon snack at 3.00pm.

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

#### Corrective and Preventive Action

We have revised our healthy eating policy, mealtimes practices section. This has been circulated to and explained to all staff members.

We have updated the food dislikes/preferences list in the kitchen for all rooms.

#### Supporting documentation submitted

Healthy Eating – Mealtime Practices and List of food dislikes

### Summary Comment

The corrective and preventive actions together with the supporting documents were submitted and reviewed by the inspector and are deemed to meet the requirements of Regulation 19.

## 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 entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised.
- The toys and play equipment observed in use by the children on the day of inspection appeared in good working order.
- Cleaning agents and medicines were stored safely out of reach of children.
- All storage facilities were inaccessible to children.

#### Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing.

- Individual bed linen was provided for children and was stored separately when not in use. Staff stated that bed linen is laundered weekly or as required.
- All cot mattresses in use had waterproof covers.

### Administration of Medication:

- There were documented care plans available for children attending the service who required emergency medication. Staff working in the rooms with the children were aware of the treatment plans and demonstrated knowledge of the procedures to follow if the medication was required.
- Staff demonstrated, through discussion, that they were familiar with the procedures and practices in place for the administration of medication in line with the services policy on medication administration

### Safe Sleep:

- Children were physically monitored while sleeping and sleep checks were documented every ten minutes. Discussion with staff demonstrated that staff were familiar with safe sleep guidelines.
- An adult remained in the room at all times where children were sleeping on low beds.

### Fire Safety:

- All fire exits were clear of obstruction.

### Non-Compliance Information

#### Infection Control:

1. There was no handwashing before dinner in the Little Giraffes room.
2. Some nappy changing practices observed on the day of inspection were not in line with the service policy or to prevent cross contamination as follows:
  - Staff did not wash their hands prior to the nappy change.
  - The staff member re-dressed with soiled gloves.
  - The staff member did not wash her hands or the child's hands following the nappy change.
3. The pedal bins in the Little Giraffe room were stored on a windowsill. Staff were observed handling the bin lid when disposing waste. This poses a risk of cross contamination.

#### Administration of Medication:

4. A child in the service required emergency medication, this medication was not stored in its original packaging with the details of the administration shown. This could prevent the correct dosage being administered and the continuity of care of the child in the event the medication had to be administered.

## Action submitted by the Registered Provider

### Corrective & Preventive Action

#### **Infection Control:**

1. We went through a re training process with the staff member involved highlighting the need for her and the children in her to wash their hands before eating.
2. We have reviewed and redone the nappy changing procedure to make it easier to understand ensuring the points raised in the inspection have been covered. We have issued the new procedure to all staff and have monitored nappy changes to ensure that the procedure is understood and being followed.
3. We have relocated the pedal bins to a floor level location that is safe and accessible to the relevant staff member and not accessible by the children.

#### **Administration of Medication:**

4. We have reissued the medication management procedure to all staff members and went through it at our staff meeting. We emailed the procedure to all parents highlighting the need for the original packaging and dosage instructions. We reminded the parents that we cannot accept medication unless we have the packaging and dosage instructions.

### Supporting documentation submitted

#### **Infection Control:**

Revised nappy changing procedure, photos and revised hand-washing procedure.

#### **Administration of Medication:**

Revised Medication Administration Policy

## Summary Comment

The corrective and preventive actions together with the supporting documents were submitted and reviewed by the inspector and are deemed to meet the requirements of Regulation 23.