

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015KE103
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Name of Service:	Circle of Friends
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Address of Service:	Hartwell Upper, Kill, Co. Kildare
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Eircode:	W91 DX82
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Name of Registered Provider:	Frances Mair
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Service type:	Full Day
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Date(s) of Inspection:	21/10/2025
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No of pre-school children:	AM	36	PM	31
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Address of the Early Years Inspectorate:	Tusla, Child and Family Agency, Suite 7, Vista Primary Care, Ballymore Eustace Road, Naas, Co Kildare W91 CP28
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Inspection undertaken by:	F Carty and S Quigley
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Title:	Early Years Inspectors
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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

Circle of Friends is one of two privately owned services operated by the registered provider. The service provides full day, part time and sessional care for children aged 1 to 6 years. The service is registered to operate from 7:30am to 6pm, Monday to Friday.

The service operates from a purposely adapted premises located just outside Kill, Co Kildare. There are five care rooms in the service.

The service also has a separate cot room, staff room, office and associated sanitary accommodation. There is a fully enclosed outdoor play area to the rear of the building.

Staffing

The service currently employs twelve adults, including a manager and the registered provider who works directly in the service. On the day of inspection, nine adults were present.

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 (2)(a)(b)(c)(d),(3) and (4) – Management and recruitment,
11 (1),(2) – Staffing levels
15 (1) – Record in relation to a preschool child
16 (1)(h)(i)(j)(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.

However, on inspection additional non-compliance was identified under regulation 29, premises and facilities. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under the following regulations;

15 (1) – Record of a preschool child
16 (1)(h)(j)(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.

As a result, the scope of the inspection included wobbler, toddler, preschool 1, preschool 2 care rooms and the outdoor area.

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 six staff employed since the last inspection on 16th August 2023. Regulation 9(2)(c) was reviewed in respect of these adults and six other adults who were employed in the service. Documentation was reviewed in respect of these adults and met regulatory requirements as follows.

(a)(b)

Of the twelve validated, written references that were required, eleven were available from a past employer and one was available from a reputable source.

(c)
Garda vetting disclosures from the National Vetting Bureau of An Garda Síochána were available for the adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d)
International Police vetting was not required as no person employed had lived outside the State for a period exceeding 6 months as an adult.

(4)
Records were available evidencing that the six staff members who were employed to work directly with the children held the required qualification or equivalent.

Non-Compliance Information

(3)
The registered providers 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:

- Garda vetting disclosures for three adults were received after they commenced working in the service.
- Two references for two adults were not validated prior to their commencement in the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The register provider will ensure that all new staff members are garda vetted and their references validated prior to their commencement.

Supporting documentation submitted

No supporting documents submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider 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 36 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 eighteen records were reviewed by the inspectors.

The registered provider ensured that a record in writing was kept of the details relating to (a), (b), (c), (d), (e), (f), (h) of the above regulation for all of the records reviewed.

Non-Compliance Information

(1)(g)

There was no record of the child's medical practitioner on any of the documents reviewed as is required.

(i)

One record did not have written parental consent for the appropriate medical treatment of a child in the event of an emergency.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(g)(i)

The child registration forms are now updated to include the child's medical practitioner and parental permissions for new children attending the service. For previous children in the service parents have filled in their child's medical practitioner and permissions details which we have attached to the child's registration form. All child record forms have been reviewed to ensure all required fields are now fully completed in accordance with regulatory requirements.

All child registration forms will be checked regularly by management. To ensure this does not reoccur, all forms will be reviewed with parents to verify that all child record forms are fully completed prior to commencement in the service.

Supporting documentation submitted

1. Updated child record form.
2. Completed missing information on existing forms.

Summary Comment

The corrective and preventive actions together with the supporting documents have been reviewed and are deemed to meet the regulatory 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 in the Wobbler, Toddler, Preschool 1 and Preschool 2 rooms 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 ten 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 the afternoon snack was prepared onsite, a hot meal provided by an outside catering company and regenerated on site was provided to all children who were present on a part time or full time basis. Children attending Preschool 1, 2 and 3 bring in a morning snack from home. Meals were provided at regular intervals. Dinner was served from 12:00. 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.

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 Toddler room however, children in the Wobbler room were provided with the opportunity to sleep when they displayed signs of tiredness. All children were made comfortable for sleep, staff provided the children with blankets, and they offered soothers to those who used them.

Children who were toilet trained were supported by the staff to use the toilet by themselves when they needed to with help provided by staff as needed.

All of the children spent time playing outdoors in the enclosed outdoor area on the day enjoying play with ride on toys, climbing, and balancing equipment. All children were dressed appropriately for the weather. The children were allowed to move freely around the playrooms when playing indoors.

The staff were observed to be warm and friendly in their interactions with the children on the day using soft tones of voice when speaking with them. Children were comforted by the staff when they were upset or tired. The staff listened to the children and responded to their cues.

A communication book is used daily to record the child's day in creche. Staff and parents use this method to communicate any important information and verbally at handover times in the morning and evening.

The staff had created family walls in the playrooms with photographs of the children and their families creating links between the service and home.

Non-Compliance Information

Not all children in the Wobbler room had an opportunity to self-feed during dinner time. A staff member was observed to feed two children at the same time whilst they were sitting in highchairs with the bowls out of reach. At times the children appeared to be frustrated that the food was not coming quick enough. Four other children in the room were given an opportunity to self-feed with help from a staff member. All children were between one and two years of age. The independence of all children was not supported.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

All staff in the wobbler room were spoken to the importance of promoting the children's independence during mealtimes was reiterated, with an emphasis on offering all children opportunities for age and developmentally appropriate self-feeding. Expectations regarding responsive and individual feeding have been clarified with the team and ongoing monitoring will take place to support consistent implementation.

To prevent this issue from reoccurring, ongoing monitoring of mealtime practices will be embedded into the room's daily routine. I will have regular discussions with the team to ensure consistent practice. The importance of supporting independence will be reinforced during team meetings.

Supporting documentation submitted

No supporting documentation submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider 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 main door was secured on the inspector's unannounced arrival to the service with a bell system in place to gain entry. The external doors to the premises were secured throughout the inspection. The outdoor area was secured to prevent children from leaving and people from entering the space without authorisation by staff members. Cleaning products were stored out of reach of the children. The kitchen area was inaccessible to the children. The toys and play equipment in use appeared to be in good working order and safe.

Infection Control:

The staff were observed to supervise the children washing their hands at key times including before eating, after playing outdoors and using the toilet in the Preschool 1 and 2 rooms and the Toddler Room. Paper towel and liquid soap was used for hand washing and drying with foot pedal operated bins provided in all areas for disposal of waste. The children's snacks that included perishable items such as yoghurts and ham were stored in refrigerators.

Administration of Medication:

There was a procedure in place to administer medication to children and medication administration forms were available for inspection. Temperature lowering medicines were available for use if needed.

Safe Sleep:

Staff were familiar with safe sleep guidance and placed babies on their backs to sleep. Sleep logs were maintained in the dedicated sleep room and the younger care rooms, and individual children's observations recorded room temperature, breathing, colour, and position every ten minutes. Standard cots and low-level beds were available for sleep and were used in accordance with children's ages and developmental needs. The temperature of the rooms where children slept were maintained at the required temperature ranges.

Fire Safety:

The designated fire escape routes were clearly indicated and free from obstruction on the day of inspection. Staff members adequately outlined the evacuation procedures in place in the event of a fire and stated that fire drills are practiced regularly on a monthly basis.

Non-Compliance Information

Infection Control:

1. Some handwashing practices observed were inconsistent and at variance with the policy in place in the service posing a risk of the transmission of infection as follows:
 - Staff did not wash their hands before they changed a nappy.
 - Children's hands were not washed following nappy changes.
 - Children's hands were not washed when they returned from the garden in the Wobbler room.
2. The nappy changing procedure in place in the service was not in line with the recommended nappy changing guidelines. For example, there was no step included to remove soiled gloves before redressing a child or the requirement for a child to wash their hands following the change. This poses a risk of cross contamination.

Administration of Medication:

3. Staff stated the section of the medication administration book that should be completed by a parent is completed by them and they take the information from the medication bottle. The medication administration policy states that parents must complete this section. Failure of a parent to do this can result in the incorrect dosage being administered which can affect the continuity of care of a child and poses a risk of harm to the child.
4. A child attending the service requires an auto adrenaline injector to be administered in the event of an allergic reaction or emergency. There was no pre-consent in place to administer this medication which is required.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

1. and 2. The nappy changing, personal care and toileting policy have been reviewed to ensure full alignment with the recommended nappy changing guidelines. This includes the requirements for staff to wash and dry their hands before and after each nappy change, the removal of gloves before redressing a child, and the requirement that children's hands are washed or supported to wash their hands after nappy changing. Staff have been made aware of these updated procedures and the importance of consistent handwashing practices to prevent cross-contamination. Staff have been reminded that children's hands must be washed when returning indoors from the garden and that these practices form part of our infection control measures. The nappy changing routine and hand washing practices have been reviewed within the room to ensure they can be carried out safely, consistently, and in line with the updated policy. To prevent recurrence, ongoing monitoring of infection control practices will be implemented. The person in charge will complete regular

informal observations of nappy changing and handwashing routines to ensure consistent adherence to the updated policy. Infection control procedures, including hand hygiene and nappy changing steps, will be revisited at staff meetings and during supervision to reinforce expectations. The updated policy will be reviewed with any new or relief staff before they begin working in the room.

Periodic reviews of the nappy changing area and handwashing facilities will also be carried out to ensure the environment continues to support safe and compliant practice.

Administration of Medication:

3. The medication administration procedure has been discussed with staff to ensure that the section of the medication record designated for parents is only completed by the parent or legal guardian. Staff have been reminded that they must not transfer information from medication bottle into this section under any circumstance. Parents will now be asked to complete the required information in person before any medication is accepted or administered. Staff have been informed that medication cannot be given unless the appropriate parental section is fully completed, in line with the service's policy and national guidance. The medication administration book has been reviewed to ensure all fields are clear and easy for parents to complete.

4. A care plan has been developed for the child requiring an auto-adrenaline injector, in consultation with the parent/guardian. Written parental consent for the administration of the injector in the event of an allergic reaction or emergency is now in place. Staff have been made aware of the child's care plan, the location of the injector, and the procedures to follow in an emergency. All staff working in the room have been reminded of their responsibility to ensure that written consent is in place before any emergency medication is administered and to follow the service's medication and allergy management policies at all times.

Supporting documentation submitted

Infection Control:

1 and 2. Copy of updated nappy changing policy and a wall poster.

Administration of Medication:

3. Copy of medication administration book.

4. A copy of a care plan for a child requiring emergency medication.

Summary Comment

The corrective and preventive actions together with the supporting documents have been reviewed and are deemed to meet the regulatory requirements of Regulation 23.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-
(d) cleaned, maintained and repaired, as required, and

Non-Compliance Information

1. The children's sanitary accommodation located in the hallway of the service was not cleaned or repaired as follows:
- The linoleum covering on the floor was lifting in parts and could not be cleaned effectively.
 - There was evidence of damp and mould growth behind all three toilets.
 - The lacquer surface at the sinks was missing exposing porous damp wood which had expanded. This cannot be cleaned effectively.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The linoleum covering on the floor in the children's sanitary accommodation has now been replaced.

The wall behind the three toilets has been treated and painted.

The wood under the sink has been replaced and painted.

The children's sanitary accommodation will be checked as part of our daily checks to ensure that any needed repairs are identified and addressed promptly.

Supporting documentation submitted

Photos of refurbishment to sanitary accommodation.

Summary Comment

The corrective and preventive actions together with the supporting documents have been reviewed and are deemed to meet the regulatory requirements of Regulation 29.