

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015KE137
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Name of Service:	Happy Hands Creche
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Address of Service:	01 Old Chapel Court, Caragh, Naas, Co. Kildare
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Eircode:	W91 EE76
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Name of Registered Provider:	Elaine Moore
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Service type:	Full Day
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Date of Inspection:	02/03/2026
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No of pre-school children:	AM	23	PM	14
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Address of the Early Years Inspectorate:	Early Years Inspectorate Child & Family Agency Suite 7, Vista Primary Care Ballymore Eustace road Naas, Co. Kildare W91 X38W.
Inspection undertaken by:	F. Maher, T. Duignan
Title:	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).

Early Years Inspectorate Regulatory Report

Pre School

Conditions if applicable

Not applicable.

Description of service

Happy Hands Creche is located in a purpose-built facility in the village of Caragh, Co. Kildare. Full day care, part time and sessional care and education is offered to children aged 0-6 years; currently, children attending are aged from 2-6 years. Opening hours are from 08:00-17:30hrs, Monday-Friday. Two pre-school rooms, Sunshine and Rainbow rooms are currently operational, a kitchen, office and staff room are provided. The service is registered to provide school age care; a dedicated pre-school room is available to accommodate the children. A large play area is located to the rear of the premises.

Staffing

There are eleven adults employed in the service, this includes the registered provider who was not present on the day and does not work directly with the children. There were six adults present in the service on the day of the inspection; this included four staff members working directly with pre-school children, one staff member assigned to kitchen/household duties and the person in charge who arrived in the service at 10:30am.

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.

Early Years Inspectorate Regulatory Report

Pre School

The inspection focused on an examination of compliance under:

Regulation 9(2)(a)(b)(c)(d), (4), (7)(a) - Management and Recruitment

Regulation 11(1), (2), (8)(a) – Staffing levels

Regulation 19(1)(b) - Health Welfare and Development of Child

Regulation 23 - Safeguarding Health, Safety and Welfare of Child

Regulation 24 – Checking in and out and Record of Attendance

Regulation 26 – Fire Safety Measures

Regulation 28 – Insurance

however, on inspection additional non-compliances were identified under:

- Regulation 29(d) - Premises

These findings are outlined within the relevant regulation within this report.

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

1. A written immediate action notice under Regulation 23 – Safeguarding Health, Safety and Welfare of Child was issued to the person in charge on 2 March 2026.
2. An email response with video evidence was submitted by the person in charge on 3 March 2026 outlining the measures taken to address the immediate concern.

Please see body of the report for details.

Acknowledgments

Early Years Inspectorate Regulatory Report

Pre School

The inspectors wish to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

- (a) the service has a designated person in charge and a named person who is able to deputise as required,*
- (b) at all times during the period when the pre-school service is being carried on, the designated person in charge or the named person referred to in subparagraph (a) is on the premises, and*

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*
- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*

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

Compliance Information

(1)(a), (b)

There was a designated person in charge and a named person to deputise as required; the deputy person in charge was the named person in charge until the designated person in charge arrived in the service at 10:30am.

Following a review of previous inspection information, information available on inspection and discussion with the person in charge, it was determined that the records of two staff members who were not recorded at the last inspection on 25 November 2025 were reviewed.

Early Years Inspectorate Regulatory Report

Pre School

(2)(a), (b)

Two written and verified references from a past employer or a reputable source were available as required in respect of 2 staff members whose records were reviewed.

(c) Garda vetting disclosures had been obtained for all employed staff members. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(d) Police vetting was available for one employed adult who had lived in a state other than the State for a period of longer than 6 consecutive months.

(4)

Two adults recently employed and working directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 or higher or a recognised equivalent qualification on the National Framework of Qualifications.

Early Years Inspectorate Regulatory Report

Pre School

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)

There were 23 children attending the service being supervised directly by 4 adults.

(2)

The minimum ratio of adults to children was adhered to during the day.

(8)(a)

There were at least two adults on the premises at all times for the duration of the Inspection.

Early Years Inspectorate Regulatory Report

Pre School

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) Children were observed content and happy as they moved about their room environments. The staff members were observed to treat each child with care and respect. The children were spoken to in soft voice tones and first names were used. All children availed of outdoor play during the morning and were appropriately dressed in hats and coats and were assisted where needed. The staff sat with the children for snack time and children were not rushed and given plenty of time to eat. Hand washing was observed prior to the children eating, as needed and after using the toilet. Children's behaviour was managed well with an emphasis on positive praise and encouragement.

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

A Healthy eating policy was in place in the service and healthy eating was promoted regularly with the children through general daily conversations. Healthy eating also formed part of the curriculum, and a food display was observed on the wall in Rainbow room. Parents provided the morning snack for their child and was observed to include, fresh fruit, cheese, yoghurts and a selection of sandwiches, rolls and wraps with healthy fillings. Fresh drinking water was freely available to the children in both rooms. An outside catering company provided the main hot meal each day and a four-week menu was in place. A sample of the dinners provided included, creamy tomato pasta, cottage pie, fish cakes with potatoes and vegetables and other meat dishes with potatoes and vegetables. The service provided evening tea a sample of which included, beans on toast, berries and pancakes, bagels and wraps with various healthy fillings. The person in charge confirmed the kitchen was registered with the relevant health authority.

Non-Compliance Information

1. The perishable items in the children's lunch boxes were not being refrigerated and posed a risk should the food items deteriorate before they were consumed.

Early Years Inspectorate Regulatory Report

Pre School

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service has introduced the immediate use of a designated refrigerator in the kitchen for the storage of all children's lunch boxes containing perishable items.

Staff have been informed of this procedure and its immediate implementation.

Regular room checks and supervision will be carried out by management to ensure the procedure is consistently followed.

Supporting documentation submitted

Photograph x 1

Summary Comment

The requirement for Regulation 22 has been met.

Part VI - Safety

Regulation 23 - Safeguarding health, safety and welfare of child

A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.

Compliance Information

General Safety:

The main entrance gate to the service was electronically secure with keypad access which was controlled by staff to prevent children from exiting the service unsupervised and to restrict unauthorised persons from gaining access to the pre-school service. During conversations with staff members, they stated they were aware of the potential risks of choking and stated they immediately cut/halve any fruit/food items, for example grapes.

Infection Control:

Thermostatically controlled hot water, liquid hand soap and paper towels were readily available for hygienic hand washing and drying. The staff members supervised children's handwashing and handwashing routines were well established. Foot pedal operated bins were provided for the disposal of used tissues. Facilities were available for nappy changing.

Administration of Medication:

Medicine was not given at the time of the inspection; written parental consent was available should medication be required to be administered to a child. The staff members were familiar with required practices when administering medication in the service.

Early Years Inspectorate Regulatory Report

Pre School

Safe Sleep:

Staff advised no children were currently availing of a period of sleep; low-level sleep beds were available should a child over 2 years old require to rest/sleep.

Fire Safety:

All fire exits were clearly signed.

Outing:

Outings do not take place from the service.

Non-Compliance Information

General Safety:

1. One child, attending the Sunshine room, was observed wearing a silver neck chain which posed a potential choking risk; it is acknowledged the staff member immediately removed the chain when it was brought to their attention by the inspector.
2. A low-level electric wall socket, accessible to children in the Rainbow room, was observed to be partially detached from the wall leaving a gap that a child may place their fingers and come in contact with the electric wires. This hazard had been picked up on the daily room risk assessments completed during the weeks beginning 3 February 2026 to 23 February 2026 but had not been actioned within this timeframe.

The socket was also close to the water tray and water had spilled on the floor adjacent to the socket which was a further electrical hazard.

A written immediate action notice was issued to the registered provider 2 March 2026.

3. It is acknowledged a daily outdoor risk assessment was being completed; however, it failed to identify the following hazard observed in the outdoor play area:
 - Seven large metal screws were observed on the low-level bench seating in the outdoor area; these were accessible to the children and pose a risk of harm from a scrape/stab type injury.

The inspector took immediate corrective action and removed the screws and gave them to the person in charge for safe keeping.

4. The toilet seat on the toilet in the middle cubicle in the main sanitary area was noted very loose and therefore unstable; this had the potential for a child to fall off the toilet and sustain an injury.

Administration of Medication:

5. In conversation with one staff member, they did not know where the antifebrile medication was stored in the service.

Early Years Inspectorate Regulatory Report

Pre School

6. It is acknowledged antifebrile medication was safely stored in the service and not accessible to children, however, one bottle of medicine was noted to be out of date since 1 October 2024; this was brought to the attention of the person in charge.

Safe Sleep:

7. It is acknowledged no child was availing of a period of sleep currently in the service, however, in conversation with one staff member they were unsure how often a sleeping child should be checked and the observations to be recorded.

Fire Safety:

8. In conversation with the inspectors, two staff members were unaware of the evacuation route taken from their respective rooms or the assembly point location in the outdoor area.
9. It is acknowledged the main fire exit from Rainbow room was not impeded however, the secondary fire escape route was observed obstructed by the water and sand trays with water and sand spillages in the area; this had the potential to impede the safe and prompt evacuation from the room should this exit be required in an emergency.

Action submitted by the Registered Provider

General Safety:

Corrective Action

1. The chain was immediately removed by the staff member upon identification of the risk.
2. The area was made safe immediately upon identification, with children prevented from accessing the socket which was fully repaired and secured by the following day.
The water tray was relocated away from the electrical point to eliminate the risk of water exposure.
The hazard and actions taken were recorded appropriately. Staff have been reminded the importance of reporting recorded risks to management and updated risk assessments require a signature weekly from management.
3. The outdoor area was checked thoroughly by management to ensure no further hazardous items remained.
4. The toilet seat was repaired and securely fixed without delay.
The area was checked to ensure it was safe and fully functional before being returned to use.

Preventive Action

1. The service's Health & Safety / Dress Code Policy has been reinforced with all staff, clearly outlining that jewellery posing a risk (including necklaces) is not permitted. Staff will carry out daily visual checks on

Early Years Inspectorate Regulatory Report

Pre School

children upon arrival to identify and address any potential hazards.

Ongoing staff briefings and supervision will ensure consistent implementation of this requirement.

2. Responsibility has been assigned to management to review and sign off on all risk assessments daily, ensuring timely follow-up. Staff have been reminded of the importance of prompt reporting and escalation of hazards, particularly those involving electrical risks.

Room layouts will be reviewed regularly to ensure that water play areas are positioned safely away from electrical sources.

3. A post-maintenance safety check list has been introduced to ensure all areas are fully inspected after any work is completed by the handyman or external contractors and management to sign off on areas before children can access them following maintenance.

The daily outdoor risk assessment process has been reviewed and strengthened to ensure more thorough checks are carried out.

4. Bathrooms have now been included in the daily risk assessments completed by room staff.

Staff have been made aware of the importance of reporting any faults immediately to management who will carry out a weekly check of all bathroom facilities to ensure any issues are identified and addressed promptly. A maintenance reporting system has been reinforced to ensure all issues are tracked through to completion. Staff have been reminded to remove faulty equipment from use immediately to ensure children's safety.

Administration of Medication:

Corrective Action

5. The staff member was informed immediately of the correct storage location of antifebrile medication. All staff were reminded of the storage procedures and access arrangements for medication within the service.
6. The out-of-date medication was immediately removed and disposed of appropriately. All medication currently stored in the service was checked to ensure it is in date and safe for use.

Preventive Action

5. A staff meeting was held, and clear guidance has been provided to all staff regarding the safe storage, access, and administration of medication.
We have updated our staff training records to include training on medicine administration.

Early Years Inspectorate Regulatory Report

Pre School

6. A monthly routine check of all stored medication has been introduced to ensure items remain in date.
A medication log/checklist will be maintained in storage area to monitor expiry dates on an ongoing basis.
This matter was discussed in detail at a staff meeting, reinforcing the importance of medication safety.

Safe Sleep:

Corrective Action

7. The staff member was informed immediately of the correct sleep supervision procedures, including the required frequency of checks and recording of observations.
All staff have been reissued with the Sleep Policy.
Sleep monitoring requirements and observation recording were reviewed with staff to ensure clarity and understanding.

Preventive Action

7. A staff meeting was held, with clear guidance on sleep supervision procedures.
All staff have been reissued with the Sleep Policy.
Sleep supervision procedures will be included in staff induction and ongoing refresher training.
Management will monitor compliance through regular supervision and checks of sleep records, where applicable.

Fire Safety:

Corrective Action

8. The evacuation routes and assembly point locations were reviewed immediately with the staff members involved to ensure their understanding of the correct evacuation procedures and the designated assembly point location.
Fire evacuation routes were checked and confirmed to be clearly displayed in all rooms within the service.
9. The water and sand trays were removed immediately from the secondary fire escape route and the area was cleaned and cleared of all spillages to ensure safe and unobstructed access.
The room layout was reviewed and adjusted to ensure that all fire exits and escape routes remain clear at all times.

Preventive Action

8/9. These matters were discussed in detail during a staff meeting and fire safety procedures will be reviewed regularly during staff meetings. Fire drills will continue to be carried out regularly.
Fire safety awareness will be included in staff induction and ongoing refresher training. Fire escape routes have been included as a specific check in daily room risk assessments to ensure they remain unobstructed.

Early Years Inspectorate Regulatory Report

Pre School

Spillages to be immediately cleaned to prevent slip hazards and maintain clear access routes.

Management will carry out regular room checks and weekly monitoring to ensure escape routes remain clear.

Supporting documentation submitted

Photographs x 4

Documents x 7

Summary Comment

Following review of the written response and submitted evidence, the requirement for Regulation 23 has been met.

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 written record was available of all fire drills having taken place in the service, the last recorded fire drill took place 19 January 2026.

(b)

A record was kept of the number, type and maintenance of the firefighting equipment and fire detection system in the premises and were last serviced April 2025 and 20 October 2025 respectively.

(4)

Notices of the procedures to be followed in the event of a fire were conspicuously displayed in the service

Early Years Inspectorate Regulatory Report

Pre School

Part VI – Safety

Regulation 28 - Insurance

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

Compliance Information

There was evidence of current insurance cover valid until 27 March 2026. The insurance provided cover for 50 children.

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.

Non-Compliance Information

- (d)
1. There was no storage available for the art and craft supplies observed in the nappy change area located between Rainbow and Sunshine rooms.
 2. The floor in the nappy change area was not maintained in a clean and hygienic condition; there was a build up of dirt and debris noted in the corners and around the nappy change unit and a low-level locker unit.
 3. The top of the nappy change unit required cleaning as it was observed with a build-up of dirt and dust along the edges.
 4. The top on the wooden radiator covers in Rainbow room and Sunshine room had become detached from their fixings and required repair.
 5. There was no storage or coat hangers provided in Sunshine room; children's coats and belongings were observed strewn on the floor and on top of the covered (empty) water tray.
 6. One of the three toilets in the main sanitary area was not available for use as it was broken and required repair.

Corrective & Preventive Action submitted by the Registered Provider

Corrective Action

1. All art and craft materials were removed from the nappy changing area immediately and placed into the newly provided storage unit.

Early Years Inspectorate Regulatory Report

Pre School

2/3. The nappy changing area and unit were cleaned immediately and thoroughly, including corners and around all units. New cleaners have now been engaged to ensure a higher standard of cleanliness is maintained.

4. The detached radiator cover tops were repaired and securely reattached without delay.

Additional checks were carried out on all radiator covers within the service to ensure no further issues were present.

5. Children's coats and belongings were removed from the floor and water tray area immediately to ensure the area was safe and tidy.

Coat hangers and appropriate storage have been ordered to provide designated spaces for children's belongings and will be installed April 20th.

6. The broken toilet was repaired without delay and returned to full working order.

Preventive Action

1/2/3/4/5/6. These matters were discussed at a staff meeting and a cleaning rota has been introduced.

The nappy changing area, radiator covers, toilet facilities and storage areas have been included in daily room risk assessments and management will carry out weekly checks to ensure the area remains compliant and appropriately organised. Staff have been reminded to report any maintenance issues immediately to management. A maintenance log system will be used to track repairs from identification through to completion.

Supporting documentation submitted

Photographs x 11

Documents x 7

Summary Comment

Following review of the written response and submitted evidence, the requirement for Regulation 29 has been met at this time.