

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015KY103				
Name of Service:	Oakview Village Childcare				
Address of Service:	Orchard Way, Oakview Village, Tralee, Co. Kerry				
Eircode:	V92 X516				
Name of Registered Provider:	Timothy Crean				
Service type:	Full Day				
Date(s) of Inspection:	07/07/2025				
No of pre-school children:	<table border="1"> <tr> <td>AM</td> <td>63</td> <td>PM</td> <td>50</td> </tr> </table>	AM	63	PM	50
AM	63	PM	50		
Address of the Early Years Inspectorate:	Áras an Phobail, Deans Lane, Tralee, Co Kerry.				
Inspection undertaken by:	J. Dennehy, N. Reidy				
Title:	Inspection & Registration Manager, Early Years Inspector				

Authority to Inspect

The Tusla Early Years Inspectorate carries out inspections of Early Years Services under Section 58(J) of the Child Care Act 1991 (as inserted by Section 92 of the Child and Family Agency Act 2013).

Conditions if applicable	N/A
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Description of service

Oakview Village Childcare is a privately owned early years service that provides full day care, part-time and sessional care, catering for children between the age of 0 to 6 years. The service operates between the hours of 07:30 am and 6:30 pm Monday to Friday inclusive, incorporating the Early Childhood Care and Education (ECCE) Scheme. The premise is a purpose-built facility; there are seven playrooms allocated to early years children. The service provides school aged care. There are designated enclosed outdoor play areas situated to the rear and to the side of the buildings available and accessible to the children each day.

Staffing

Currently, there are 36 adults attached to the service that includes, the operations manager, administrative staff, a maintenance person, a cleaner and an allocated person for kitchen duties. The registered provider is not service based.

Each of the adults who are employed to work directly with the children have attained a relevant award in Early Childhood Care and Education.

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 announced/unannounced and focused on the area of governance/ health, welfare and development of child/ safety. The inspection may also focus on other areas as required.

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

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

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

Additional Information

The inspection was a triggered inspection following information received by the Early Years Inspectorate.

Acknowledgments

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*
- (c) there is a clear management structure in the service that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.*

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

- (a) consideration of references from the person's past employers, if any, and in particular the most recent employer, if any,*
- (b) consideration of references from reputable sources in the case of a person who has no past employers,*

- (c) consideration of the vetting disclosure received from the National Vetting Bureau of the Garda Síochána in accordance with the Act of 2012 in respect of the person, and*
- (d) ensuring, insofar as is practicable, that where a person has lived in a state other than the State for a period of longer than 6 consecutive months, he or she provides police vetting from the police authorities in that state.*
- (3) The procedures specified in paragraph (2) shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the pre-school service.*
- (4) A registered provider shall ensure that, without prejudice to the generality of paragraph (2) and subject to paragraphs (5) and (6), each employee working directly with children attending the service holds at least a major award in Early childhood Care and Education at Level 5 on the National Qualifications Framework or a qualification deemed by the Minister to be equivalent.*
- (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 had ensured that both a designated person in charge and a deputy person in charge was assigned to the setting.
- (b) When the unannounced inspection commenced, the deputy in charge was working in the pre-school 3 room and the operations manager arrived on the premise soon after the inspectors arrived and remained available to assist with the inspection process over the day. The staff roster indicated that either the person in charge or deputy were available at the service during the hours of operation.
- (c) There was a clear management structure in place in the service demonstrating the person in charge and the deputy in charge. The name and photograph of the person in charge on the day of the inspection was displayed on the reception desk.
- (2) Since the previous inspection on 13 & 14 May 2024, it was established that seven adults had commenced working in the service. The recruitment records in respect of these seven adults were assessed.
- (a) Of the 14 required references, 10 references were from previous employers with records of validation on file.
- (b) Of the 14 required references, 3 references were from another source other than a previous employer with records of validation on file.

(c) Garda vetting disclosures had been obtained for each of the seven adults. The service renewed Garda vetting disclosures that had expired since the previous inspection in respect of eight staff members.

However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under Regulation 23 of this report.

(d) Police vetting was on file for one adult, who had resided in another jurisdiction for a period of longer than six consecutive months, while over the age of 18 years.

(3) The records demonstrated that vetting procedures were carried out prior to the seven adults commenced working in the service.

(4) Copies of certificates in Early Childhood Care and Education, as listed on the National Framework of Qualifications (NFQ), or as recognised by the Department of Children, Disability and Equality (DCDE) were available on file in respect of the seven staff members. A qualification was not required for the registered provider.

(7) A sample of 7 staff records reviewed demonstrated that the service had completed check lists of induction meetings with the staff, completed induction training records and information sharing in relation to the policies and procedures of the service.

Non-Compliance Information

(7) The service did not have records to demonstrate that support and supervision with staff took place on a regular basis. The service policy outlined that staff would receive regular support and supervision that would be documented. On review of records available only seven staff members had received support and supervision since January 2025. This poses a possible risk to children as staff members may not have the required information or ongoing training to carry out their role effectively.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service acknowledges a shortfall in the documentation of support and supervision meetings. While regular and periodic informal meetings between management and staff take place and prompt actions are taken when pressure points or issues arise, the recording of these interactions has not been adequate. The service has since reviewed and updated the Support and Supervision Policy to include defined timeframes for support meetings with both new and existing staff. The revised policy was developed collaboratively with managements, staff, the head office team and the consideration of feedback from the inspectors.

Supporting documentation submitted

The Support and Supervision Policy outlining the scheduling of staff support and supervision meetings, termly whole staff meetings, every 2 months for room leader meetings, staff appraisals annually and performance improvement plans as required and annual staff questionnaires.

Summary Comment

The requirement has been met.

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

The following policies were reviewed on inspection:

- Complaints Policy
- Staff training policy
- The policies contained the information required to guide the staff in their care practices for children.

Non-Compliance Information

The policies listed below did not meet the necessary requirements:

1. The policy on managing behaviour did not specify that the procedures for the protection and welfare of the children are managed in line with the service's safeguarding statement.
2. The recruitment policy did not set out the probationary periods of the posts held within the service of the requirements for students.
3. The risk management policy did not outline how risk assessments are completed in the service, how they are documented, who is involved in the risk assessment
4. The supervision of staff policy did not outline the duration and the specific frequency of the support and supervision.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service confirms that all necessary amendments have been made to the policies to ensure full compliance with regulatory requirements.

1. The behaviour management policy has been updated to specify all procedures relating to the protection and welfare of children are implemented in accordance with the service Safeguarding Statement.
2. The recruitment policy was revised to include the probationary periods applicable to all posts within the service and to set out the specific requirements for students.
3. The risk management policy was amended to outline the process for completing risk assessments, the method of documentation and the roles and responsibilities of those involved in the assessment process.
4. The staff supervision policy was updated to clearly define both the duration and the specific frequency of support and supervision sessions for staff.

The service remains fully committed to an ongoing process of review and improvement through updating the policies as any gaps or areas for enhancement become evident through internal reflection, feedback from parents, feedback from staff, external agencies or evolving regulatory requirements. This collaborative and responsive approach ensures that the service policies remain robust, relevant and aligned with best practice to safeguard the welfare and protection of all the children in the care of the service. To ensure continued compliance and improvement, the service will incorporate the findings from the annual policy review into the safeguarding and operational practices. Any amended policies resulting from the review will be recorded on the policy modification log within the policy manual detailing the date, the nature of the change and the person responsible for making the change. The updated policies will be clearly communicated to all staff, students and parents/guardians through their notification process.

Supporting documentation submitted

1. The revised behaviour management policy.
2. The revised recruitment policy.
3. The revised risk management policy.
4. The revised staff supervision policy.

Summary Comment

All documentation received was reviewed. The requirement for this regulation has been met.

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 was an adequate number of adults responsible for the direct care and supervision of the children in attendance on the day of inspection.

(2) The adult child ratio was observed in all care rooms which were operational as follows:

Morning:

Room Name and Age range of children	Number of Children present	Number of Adults present
Nursery (0 to 2years)	9	4
Junior pre-school (2 years to 3 years)	7	3
Pre-school 1 (3 years to 5 years)	10	3
Pre-school 2 (3 years to 5 years)	11	2
Pre-school 3 (2 years to 3 years)	9	2
Naíonra (4 years to 5 years)	10	2
Cabin (1 year 10 months to 3 years)	7	2

Afternoon:

Room Name and Age range of children	Number of Children present	Number of Adults present
Nursery (0 to 2years)	8	3
Junior pre-school (2 years to 3 years)	6	3
Pre-school 1 (3 years to 5 years)	8	1
Pre-school 2 (3 years to 5 years)	11	2
Pre-school 3 (2 years to 3 years)	7	2
Naíonra (4 years to 5 years)	10	2

Cabin (1 year 10 months to 3 years)	0	0
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Non-Compliance Information

(8)(a) As evidenced on the staff rosters provided to the inspector two adults were not on the premise at all times.

On June 18th, 2025, one adult was rostered to work at 7:30 am, the second adult rostered for 7:45 am and one adult rostered until 6:30 pm.

On June 19th one adult was rostered for 7:30 am and the second adult rostered at 7:45 am.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service operates a software-based system for recording staff attendance.

The service acknowledges that the documentation provided on the day of the inspection evidenced a non-compliance. The roster did not accurately reflect the actual staffing levels for the specified dates. The discrepancy was the result of an administrative oversight and did not represent a breach of the required staffing ratios.

In order to mitigate the risk of recurrence, the service has introduced strengthened verification procedures. All the rosters are now reviewed by a second person in charge or a designated senior staff member to ensure that all gaps for non-compliances are closed. The staff have been advised to notify management if they observe a shortfall in the roster that may have gone unknown to management. Personnel responsible for roster preparation have undergone refresher training in the use of the attendance software to ensure the records remain accurate, consistent and fully representative of the actual staffing levels at all times.

Supporting documentation submitted

The statement is accepted as evidence.

Summary Comment

The documentation was reviewed. The requirement for the regulation has been met.

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

(2) A registered provider shall ensure that no corporal punishment is inflicted on a pre-school child whilst attending the service.

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

(1)(a)

Basic needs:

- The service offers the daily main meal that is supplied to the service by an outside catering company and supply some of the food served for snack times and breakfast.
- There is a designated adult employed in the kitchen to re-heat the main meal and to prepare the food for snack times.
- The food is taken to the care rooms where the staff working in the rooms serve it.
- The inspector observed the main meal served on the day was sausage hotpot served with carrots and grated cheese.
- The food observed at snack time included porridge oats with fruit, rice cakes and fruit.
- The children had water to drink from their individually labelled drinks bottles and water was available to top up at the sinks in the care rooms.
- The drinks bottles observed in the care rooms were available and accessible to them throughout the session and taken to the outdoor area when used. The inspector observed children helping themselves to the water during the session, some sitting on the benches provided in the outdoor area serving the Junior pre-school room whilst taking a drink.

- The inspector was informed that additional food portions are available as needed as well as alternative food options for the children attending.
- The staff sang “please and thank you” with the children whilst waiting for the main meal to be served
- The children had ample time to eat their food.
- The children were observed to have free floor space to explore their surroundings and access the toys in the care rooms.
- The children had access to spacious outdoor play areas during the course of the inspection and were observed to spend significant time outside.
- The layout of the outdoor play areas observed facilitated visual supervision of all children by the staff who were present in the designated areas.
- The toilets were easily accessible to the children within the care rooms with nappy changing facilities provided for the children who required nappy changing.
- The children who could use the toilet independently did so with the staff nearby to assist if required.
- Rest and relaxation areas were provided in the care rooms, for example there was soft seating and rugs on the floor in the book area and in the cabin and in Pre-school 3.

Supporting relationships:

- Staff informed the inspector that information is shared with parents at drop-off and collection times with updates on sleep, food intake and photographs of activities the children participate in whilst attending the service through an app.
- Family photographs were displayed in the care rooms to nurture a sense of connection and belonging.
- A sample of children’s artwork and a variety of posters promoting learning decorated the care room walls.
- Staff were observed to nurture and comfort the children when required, coming down to their level, sitting them on their laps and speaking kindly and calmly to them.
- Staff were observed to listen to the children as they communicated their needs, for example removing a layer of clothing for some children in pre-school 3 on returning from playing outdoors and in the nursery one child wanted to go to the outdoor play instead of their usual sleep time and this was facilitated.
- Children were supported in transitioning between the care rooms as observed in pre-school 3, children had moved from the junior playroom.
- The staff caring for the children were observed to be kind and caring towards the children in their care speaking to them in low soft tones of voice.

Physical and material environment:

- The care rooms were bright, comfortable and aired by means of openable windows and air-cooling systems.
- The toys and play materials provided were accessible on the floor, on low level open shelving and on racks to allow choice and to encourage the children to independently access them.
- An adequate number of low-level tables and chairs were provided for the children.
- The outdoor play areas had a variety of fixed play equipment for example play units and swings, wall mounted chalk boards, ride on toys, sand tables with buckets and spades and large building blocks.

(2) The registered provider ensured that no corporal punishment was inflicted on a child whilst attending the service. The staff spoke gently to the children, coming down to their level and comforting them as was needed. The staff spoke of promoting children's positive behaviour, sitting with the children, talking about their feelings, use of kind words and assisting them in resolving conflicts suitable for their age and stage of development.

(3) The inspectors did not observe any practices that were disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful towards the children in the service. The staff spoke of practices in the service that were prohibited and positive behaviour management strategies that they used in practice.

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 internal doors were appropriately secured to prevent children accessing unsafe areas.
- The emergency exits observed were unobstructed.
- On arrival to the service all visitor's report to the receptionist area.
- The stairways were adequately lit.
- Suitable handrails for the children were in place.

- No cables were observed within the reach of the children.
- Medicines observed on inspection were stored in high level cupboards. The medicines were clearly labelled with the child's name and other details.

Infection control:

- Children were observed to wash their hands on returning from the outdoor play area.
- Perishable food items were stored in the fridges provided.

Non-Compliance Information

General safety:

1. The temperature of the warm water at the wash hand basin in the nappy changing room in the nursery was recorded at 44.1 degrees Celsius posing a risk of scalding to children.
2. There were plastic packets of nappies and packets of baby wipes stored in open boxes within the low-level open shelving unit in the cabin playroom posing a risk of injury to children.
3. There was a timber gate located in the outdoor area serving the cabin not secured to restrict unauthorised access in posing a risk of injury to children.
4. There was a steel gate with wide vertical bars located between the two cabins where air to water units were stored posing a risk of injury to children.
5. Garda vetting disclosures had been obtained for thirty-six adults attached to the service. However, one vetting disclosure were not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EY-RN12.3 Renewal of Garda Vetting'. It was acknowledged that the renewal Garda vetting in respect of this adult was received electronically in the office of the early years inspectorate on 24.07.'25.

Infection control:

6. The nappy changing practices observed on inspection were inconsistent and at variance with the nappy changing policy and posed a risk of cross contamination as follows;
 - The staff returned children to the playroom via the swing door whilst wearing the used gloves and plastic apron.
 - The plastic aprons were not changed for each individual nappy change.
 - The nappy changing mat and its surrounds was not sanitized down after each nappy change.
7. There was no means of ventilation in the nappy changing unit put in place in the sanitary accommodation serving the cabin care room posing a risk of cross infection.

Action submitted by the Registered Provider

Corrective & Preventive Action

General safety:

1. The elevated water temperature of 44.1 degrees Celsius at the wash hand basin in the nappy changing room was identified by the service on the day prior to the inspection. Immediate action was taken to replace the faulty thermostat to mitigate the scalding risk. The final repair involving the mixer on the boiler was pending by the attendance of the plumber. The service confirms that the mixer had since been fully repaired, and the water temperature had been adjusted to a safe level. The service will continue to carry out regular water safety checks to avoid this reoccurrence.
2. These were removed immediately. The staff were reminded regarding the dangers of leaving plastic bags in children's reach and advised to avoid this practice urgently.
3. The two locks on either side of the gate have been aligned and the area is now secure. The management were advised on the importance of following up with external personnel on repair works waiting.
4. The gate has been reinforced with fencing slats and thus the risk of injury removed. The gate has a shooting bolt at a high level that is not accessible.
5. The renewed vetting is now in place. Added to monthly checklist for vetting renewals to avoid recurrence of this issue.

Infection control:

6. The staff have been reminded of the nappy changing procedure.
7. The nappy changing unit was moved to the disabled bathroom where ventilation is available through the window.

Supporting documentation submitted

General safety:

1. A record of the water temperature recorded at 38.1 degrees Celsius at the sink in question.
2. A photograph of the low-level shelving units without plastic packets of nappies and baby wipes. A record of the message issued to staff regarding children not to have access to nappy packing and plastic bags etc.
3. A photograph of the timber gate with a closure device on both sides in place.
4. A photograph of the reinforced gate with no vertical bars seen.
5. A copy of the renewed Garda vetting for the one adult in question was received.

Infection control:

6. The statement has been accepted as evidence.
7. A photograph demonstrating the nappy unit in the disabled bathroom with the openable window.

Summary Comment

The requirement for this regulation has been met.

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

(1) A registered provider shall ensure that the complaints policy of the service specifies-

- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
- (b) the manner in which such a complaint shall be dealt with, and
- (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.

(2) A registered provider shall ensure that-

- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
- (b) the complaint is duly dealt with in accordance with the provider's complaints policy.

Compliance Information

(1) The registered provider had a complaints policy for the service:

- (a) The policy outlined the procedures to be followed by someone wanting to make a complaint to the service.
- (b) The policy outlined how such a complaint would be dealt with.
- (c) The policy outlined how and when the complainant would be kept updated.

(2)

- (a) The registered provider maintained a file of a complaint received to the service.

Non-Compliance Information

(2)(b) The notes retained on file did not indicate how a complaint was closed out and did not indicate the resolution reached with the complainant. Not following the services policy on the management of complaints may lead to a complaint not being fully addressed by the service. It is acknowledged that the registered provider partially followed their complaints policy.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The complaints policy has been revised to reinforce the importance of thorough documentation throughout the complaints process. Additionally, a standardised complaints record template has been developed and implemented to capture all stages of complaint management from receipt of the complaint to resolution. This ensures transparency, accountability and adherence for regulatory requirements. In order to ensure that all complaints are recorded in line with the service complaints policy, the service has developed a comments and complaints policy.

Supporting documentation submitted

The updated complaints policy.

Summary Comment

All documentation received was reviewed. The requirement has been met.