

# Early Years Inspectorate Regulatory Report

## Pre School

<b>TUSLA Identifier:</b>	TU2015MO121		
<b>Name of Service:</b>	Tigh na Leanaí Childcare Ltd		
<b>Address of Service:</b>	Swinford Road, Kiltimagh, Co. Mayo		
<b>Eircode:</b>	F12 ET82		
<b>Name of Registered Provider:</b>	Marita Shannon		
<b>Service type:</b>	Full Day, Part Time, Sessional		
<b>Date of Inspection:</b>	01/05/2025		
<b>No of pre-school children:</b>	AM	35	PM 40

<b>Address of the Early Years Inspectorate:</b>	Early Years Inspectorate, TUSLA, Child and Family Agency, 2nd Floor, St. Mary's HQ., Castlebar, Co. Mayo.
<b>Inspection undertaken by:</b>	M Farrell and L Costello
<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
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### Description of service

Tigh na Leanaí Crèche & Playschool is a full day care service located in Kiltimagh, Co. Mayo. The service is registered to cater for children aged between 0 and 6 years between 08:00 - 18:00 hours. Sessional services are provided from 09:00 to 12:00 hours. The premises consists of a detached two storey building adapted for the provision of early years services with two playrooms, three sleep rooms, a kitchen and ancillary facilities. There is a detached purpose-built single storey building with a large playroom, staff room, ancillary facilities and office. Large enclosed outdoor play areas are provided to the rear and side of the buildings.

### Staffing

There are 16 adults in the service including the registered provider who works directly with the children, childcare staff, relief staff, a cook/maintenance staff and an adult who provides regular music sessions for the children.

### 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/safety/premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under sections of regulations 9, 11, 15, 23, 25, 26 and 29. These findings are outlined within the relevant regulations 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.

### 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

*(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

- (2) It was confirmed with the deputy designated person in charge following review of service records that there were 16 adults in the service at the time of the inspection. The following vetting documents were available for the adults:
- (a) 2 written validated references from past employers, in particular the most recent employer for 8 adults. 1 written validated reference from a past employer for 4 of the adults.
  - (b) 2 written validated references from sources other than past employers for 3 adults. 1 written validated reference from sources other than past employers for 4 adults.
  - (c) Garda vetting disclosures had been obtained for all 16 adults. However, the service did not always 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) International police vetting documentation was available for one adult who had lived outside of the State for periods longer than six consecutive months as adults.
- (4) Evidence of the required qualification in Early Childhood Care and Education or equivalent was available for the staff who worked directly with the preschool children.

## Non-Compliance Information

The following vetting information was unavailable for inspection:

- (2)
- (a) & (b) There were no written validated references on file for one adult.
  - (d) There was no employment/experience history for one adult, and it was unable to be verified if international police vetting was required for this adult.

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

The registered provider advised in writing that:

(2)

#### Corrective and Preventive Action

- (a) & (b) There are now two references on file for the adult. The service will make sure that each staff member will have two references on file.
- (d) The registered provider has confirmed with the adult that international police vetting is not required and obtained an up-to-date curriculum vitae for the adult. The service will make sure that each staff member has an up-to-date curriculum vitae on file.

#### Supporting documentation submitted

Copies of vetting documents.

### Summary Comment

The Inspectorate has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9(2) has been adequately addressed.

## Part III – Management and Staff

### Regulation 11 - Staffing levels

- (1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.*
- (2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.*

### Compliance Information

- (1) There were 9 adults working directly with 35 children on the inspectors' unannounced arrival to the service. Sufficient staff were available during the inspection to work directly with the children and provide relief cover for breaks ensuring that adequate numbers of staff were always available.
- (2) The minimum adult to child ratios were maintained during the unannounced inspection as follows:  
Wobbler room: 2 staff cared for 6 children aged between one and two years and 2 children aged between two and three years old attending full day care services.

Senior Toddler room: 2 staff cared for 10 children aged two years and 2 children aged over three years of age attending full day care services.

ECCE room: 2 staff cared for 15 children aged three to five years attending the preschool service.

Additional staff were provided for break and relief cover.

(8)

The was always at least two adults on the premises during the inspection. Discussion with staff and review of records showed that two adults were present during service opening hours.

### 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.*

*(3) A record in writing referred to in paragraph (1) or (2) shall be open to inspection on the premises by-*  
*(c) an authorised person.*

#### Compliance Information

(1) (a) to (i)

The inspectors reviewed a random sample of ten children's records across children attending all three of the care-rooms. The records were found to be compliant containing the required details as laid out under the regulation.

(3) (c)

The required information was made readily available for inspection to the inspectors in the service by the deputy designated person in charge on request.

### 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 doors to both buildings were secured on the inspectors' unannounced arrival to the service. The staff controlled the access of people to and from the building ensuring that no children left the service unnoticed, and no people entered without authorisation. The outdoor areas were enclosed and gates secured when the children were playing outdoors to prevent children from leaving the areas unnoticed. The stairway was well lit and there was a handrail in place. Blind cords on windows had mechanisms in place to secure blind cords. Windows had been risk assessed by staff with restrictors in place for example in the upstairs care-rooms. Internal doors had securing mechanism in place to restrict access by children for example the highly positioned door handle leading to a store cupboard in the Wobbler care-room.

##### Infection Control:

Children's soothers were stored in individual plastic containers in the Wobbler care-room. Cleaning schedules were available, and the staff kept electronic records of the cleaning carried out in the service. Aprons and gloves were provided for nappy changing and worn by staff when changing children's nappies. foot pedal operated bins were provided for waste disposal in the service.

##### Administration of Medication:

There was a safe storage system for medication in the service. Medication was not observed to be administered to a child during the inspection.

##### Safe Sleep:

The inspectors were informed by staff that a staff member was always present in the sleep room where children slept on stackable beds. During the inspection there was at least one staff member present in the sleep room beside the kitchen where children slept on stackable beds. The staff observed resting/sleeping children at 10-minute intervals and made electronic records in relation to the children's colour, position and breathing patterns.

The service had two further designated sleep rooms on the ground floor. One sleep room contained eight standard cots with the required safety mattress and waterproof covers. A second sleep room catered for older children and contained ten stackable floor beds and one standard cot. Room temperatures on the day were recorded at 19.9°C which is within the recommended safe sleep temperature.

### Fire Safety:

The emergency exits and routes were found to be free from obstruction during the inspection.

### Non-Compliance Information

#### General Safety:

1. Garda vetting available for one staff member was not dated within the previous three years and not in adherence to the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'. It is acknowledged that a copy of the required garda vetting renewal was submitted to the Inspectorate by the service on the 27 May 2025.
2. Water temperatures in a sink in the ECCE room measured at 46°C, this was not used as a children's hand wash basin. This was brought to the attention of the person in charge on the day and the temperature was reduced.

#### Infection Control:

3. Powdered formula feeds for children in the Wobbler playroom were reconstituted in the service with cool boiled water provided by parents. This was contrary to the current food safety guidance and was a repeat non-compliance from the most recent inspection on the 19 September 2022.
4. There were tears in the covers of seating in rest areas in the Wobbler, ECCE and Senior Toddlers room with foam exposed posing potential difficulties with cleaning leading to infection control risks.

#### Administration of Medication:

5. A review of a sample of medication administration records found that they had not always been signed by two staff contrary to the service's policy on medication management. It was unable to be confirmed if two staff had been present and checked the medication prior to administration to the child.

### Action submitted by the Registered Provider

The registered provider advised in writing that:

#### Corrective & Preventive Action

#### General Safety:

1. The staff member's garda vetting has been updated. Files will be reviewed at the end of each month to ensure that garda vetting is in date.

- The temperature at the sink in the ECCE room has been adjusted to the correct temperature. The water temperature will be checked on a regular basis.

**Infection Control:**

- Information has been sent out to parents about sending in bottles pre-prepared for the children attending the service. Children's bottles of formula will only be accepted in the service if it has been prepared.
- The couch in the ECCE room has been replaced with a new couch and the couches in the other rooms have been repaired. The maintenance staff will check the couches weekly and repair them if needed.

**Administration of Medication:**

- The staff have been informed that there must be two staff present when medication is being administered and must be always signed by two staff in the medicine administration book. Management will check the medicine administration books on a more regular basis to make sure the staff in each room are following the medication guidelines. The staff have also been informed about the importance of two members witnessing the administration of any form of medicine.

**Supporting documentation submitted**

**General Safety:**

Copy of the garda vetting renewal, photographs.

**Infection Control:**

Photographic evidence.

**Administration of Medication:**

No evidence submitted.

**Summary Comment**

The actions taken and evidence submitted has been reviewed by the Early Years Inspectorate and been found to have addressed the non-compliance found on inspection under Regulation 23.

## Part VI - Safety

### Regulation 25 - First aid

*(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.*

*(2) A registered provider shall ensure that a suitably equipped first aid box for children-*

*(a) is safely stored in an easily accessible and conspicuous position on the premises, and*

*(b) is available to the children attending the pre-school service at all times.*

### Compliance Information

(1) There were First Aid Response (FAR) certificates with expiry dates ranging from 2 February 2026 to 11 November 2026 available on file for four staff members. A number of these staff were working in the service during the inspection providing adequate cover if first aid treatment was needed by a child.

### Non-Compliance Information

(2) (a) and (b)

Adequate and sufficient in date first aid equipment was not available for the number of children attending the preschool.

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

The registered provider advised in writing that:

#### Corrective and Preventive Action

(2) (a) and (b)

The first aid kits have all been reviewed and restocked with the required supplies by management. The room leaders will review the first aid boxes on a more regular basis.

#### Supporting documentation submitted

None submitted

### Summary Comment

The actions as submitted by the service to the Inspectorate have addressed the non-compliance found on inspection under the regulation.

## 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 fire fighting equipment and smoke alarms in the premises.
- (2) The record referred to in paragraph (1) shall be open to inspection by-
- (c) an authorised person.
- (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) Fire drills were conducted monthly in the service with electronic records of the fire drills kept by the staff. The most recent fire drill record showed that it was undertaken on the 23 April 2025.
  - (b) The service kept a record of the number, type and maintenance record of firefighting equipment and smoke alarm system. The records showed that the firefighting equipment was last maintained on the 11 March 2025 and the smoke alarm system on the 4 August 2024.
- (2)
- (c) The records were made available to the inspectors by the deputy designated person in charge on request.
- (4)
- Notice of the procedures to be followed in the event of a fire were conspicuously displayed in the service.

### Part VII - Premises and Space Requirements

#### Regulation 29 - Premises

*A registered provider shall ensure that the premises of the service are-*

- (c) kept adequately lit, heated and ventilated*
- (d) cleaned, maintained and repaired, as required, and*
- (e) equipped with adequate and suitable sanitary facilities.*

#### Compliance Information

- (c) A mechanical ventilation system had been installed in the downstairs nappy changing area to address a non-compliance outstanding from the most recent inspection of the 19 September 2022.

#### Non-Compliance Information

- (c) The mechanical ventilation system in a sanitary facility upstairs used by children from the Senior Toddler care-room appeared not to be functioning correctly with no audible sound from the system.
- (d) Two wash hand basins in a sanitary unit upstairs had heavy discoloration and scaling around the wastewater plughole posing difficulties to thoroughly clean the areas.
- (e) There was inadequate sanitary provision for children using the upstairs care-rooms during the inspection with 15 children using one nappy change area during the inspection. One nappy-changing unit is required for every 11 children in nappies.

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

The registered provider advised in writing that:

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

- (c) The ventilation system is now operational. The ventilation system is now checked on a daily basis by the staff members.
- (d) The two wash-hand basins have been descaled. The sinks will be descaled on a monthly basis and the process added to the cleaning schedules.
- (e) A nappy changing table has been reinstalled providing two nappy changing units for the numbers of children. The service will ensure in future that there are adequate nappy changing facilities for the numbers of children in the service.

##### **Supporting documentation submitted**

Photographic evidence.

# Early Years Inspectorate Regulatory Report Pre School

## Summary Comment

The actions and evidence submitted by the service has been reviewed by the Inspectorate and found to have addressed the regulatory non-compliance found on inspection.