

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015WD018			
Name of Service:	Cappoquin Childcare Facility			
Address of Service:	Mill Street, Cappoquin, Co. Waterford			
Eircode:	P51 E2NV			
Name of Registered Provider:	Denis McCarthy			
Service type:	Full Day, Part Time, Sessional			
Date(s) of Inspection:	23/02/2026			
Date 2 of Inspection:	24/02/2026			
No of pre-school children:	AM	65	PM	47
Day 2	AM	73	PM	N/A
Address of the Early Years Inspectorate:	Community Care Office, Cork Rd., Waterford X91 VX09.			
Inspection undertaken by:	A. Bradshaw			
Title:	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	Not applicable			

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Description of service

Cappoquin Childcare Facility is a community based early years service in the town of Cappoquin, Co Waterford. It is based in the local community building. The service has five care rooms, the Buttercup room (6 months to 1 year), the Daisy room (1-2 years), the Sunflower room (2-3 years) and two preschool rooms (3-5 years) – the Snowdrop room and the Poppy room. There is a kitchen, sanitary areas, and an enclosed outdoor area. The service is registered for full-day, part-time and sessional care for up to 86 children aged 0 to 6 years. It operates from 08:00 to 18:00, Monday to Friday.

Staffing

The service employs a total of 25 staff members, including relief and auxiliary staff. On both days 3 students were also in the service but not included in the adult child ratio. The registered provider does not work with the children but was available to the inspector on the first day of the inspection.

Methodology

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

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

The findings on inspection are based on:

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

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

The inspection focused on an examination of compliance under regulations:

Regulation 9 – Management and Recruitment;

Regulation 11 – Staffing Levels;

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Regulation 19 – Health, Welfare and Development of Child;

Regulation 22- Food and Drink;

Regulation 23 – Safeguarding Health, Safety and Welfare of Child;

Regulation 24 – Checking In and Out and Record of Attendance.

A sampling process was used to assess compliance as a result, the scope of the inspection included rooms the Daisy room, the Sunflower room, Buttercup room and the Snowdrop room.

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 inspector wishes to acknowledge the cooperation of the person in charge, staff and children who were present on the day of the inspection.

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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.

(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)(c)

On the first day of the inspection the person in charge remained on the premises and was available to the inspector and on the second day the deputy person in charge remained on the premises and was available to the inspector if required.

The registered provider does not work directly with the children but arrived in the service on both days and was available to the inspector if required. The names and photographs of the person in charge and the deputy person in charge were on display in the hallway of the service.

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(2)

Through discussion with the person in charge and a review of the service roster it was determined that one new staff member had joined the service since the last inspection in February 2025. This staff file and the three student's files were reviewed.

(c) Garda vetting was available in the four files reviewed. However, the requirement to re-vet staff every 3 years was not fully complied with. Please refer to the information outlined under regulation 23 of this report.

(d) Evidence was available to demonstrate that police vetting was not required.

(4)

Evidence was available on the day to demonstrate that all staff members who work directly with children held a qualification at the minimum level 5 or above on the National Qualification Framework or qualification deemed by the minister to be equivalent.

Non-Compliance Information

(2)

(a)(b) The required validated references were not available in three files of the four reviewed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)

(a)(b) A copy of the required validated references was submitted to the inspectorate.

The registered provider stated that to prevent further non-compliance they have developed a spreadsheet to record Garda vetting, training requirements and expiry dates as required.

Supporting documentation submitted

A completed reference checklist was submitted.

A copy of the student placement information form was submitted.

Summary Comment

The actions submitted by the registered provider are suitable to address the non-compliance identified on inspection.

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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

On day 1 of the inspection, 15 staff cared for 65 children and on the second day, 17 staff cared for 73 children. On both days, members of the management team were available for support if required. Three students were on work placement during the inspection.

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

(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)(a)

The inspection was carried out over a period of two days. The service has five rooms in operation, the Buttercup room with children aged 6 to 12 months, the Daisy room with children aged 12 to 24 months, the Sunflower room with children ages 2 to 3 years and the Poppy room and Snowdrop room with children aged 3 to 5 years.

The room layouts for children aged from 2 years upwards demonstrated that children were encouraged to choose their activities and play. Equipment and materials were at the children's level and accessible with low tables and chairs, floor mats and spaces to allow children to play in large or small group or as individuals. These rooms used furniture and floor coverings to create definite areas of interests. For example, there were home corners with play

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kitchens and accessories, construction corners with blocks and bricks. Jigsaws, sorting exercises and threading were stored near tables for easy access with cosy areas in the rooms with books available for children to take time away from their play to read or rest.

The Buttercup room was resourced with age and stage appropriate toys and equipment for the babies, for example, there was a large toy train for climbing and crawling through, interactive toys, and a ball pool. The inspector observed a staff member sitting by the train to make themselves available if a baby required help or support while climbing.

The staff in the Sunflower room were observed to engage positively with children particularly when they had just woken from a sleep. The children were held and cuddled until they were ready to join in activities. Staff were noted to invite children to join them on the floor and build towers with blocks 'so high that they fall down'. Children have the use of the large hall in the building for physical activity on days the weather was too wet to go outdoors. On the second day of the inspection children were observed to use the outdoor area. Three groups were outdoors and this gave the children the opportunity to play with siblings or friends they don't see in their rooms.

Non-Compliance Information

(1)(a)

The lack of a designed environment and considered staff engagement impacted on the experiences and care of the children attending the Daisy room. On both days of the inspection this room accommodated up to 12 children between 1 and 2 years. This room did not facilitate individual's children's development or learning through the provision of activities materials and equipment. The room layout did not enable the children to independently engage with activities or experiences. The following observations were made:

1. The children had no free access to play materials and toys. There were no shelving units or furniture in the area of the room where the children occupied. The children's toys were stored on shelving in the area which was inaccessible to them.
2. There was a limited amount of play materials in the children's space, for example there was only soft matting and with soft shapes for climbing and crawling and two climbing apparatus.
3. Staff were not observed to offer planned activities or experiences for children. On day two when the children returned from the garden, a box of magnetic squares were placed on the floor for the 12 children. These did not engage the children in meaningful play as only two children played with the shapes while the other children walked around the room. No additional toys were introduced into the play area.

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4. Children's artwork and pictures displayed on the wall were placed high and out of the children's eyeline.
5. Staff described how the partitioned part of the room is only used for art activities or if the children are eating as this is the space with tables and chairs. This reduced the space the children had free access to.

(1)(b)

A number of interactions between the staff and children were observed in the Daisy room which were at variances with the service's ethos, statement of intent and policies. Staff members in the Daisy room were observed not picking up on children's cues. For example, the following was observed:

6. At 11:50 a staff member was observed to sit and read a book with the children, one child lay on the mat with their soother and teddy and two staff acknowledged that they were probably tired but there was no action taken to support the child's needs. The service guidance policy stated that soft quiet spaces are provided for children to withdraw comfortable when they are feeling tired or overwhelmed or just want to be alone.
7. The staff in this room did not display awareness of the services behaviour guidance policy which stated that staff member need to know the service's approach to supporting children in their social, emotional and behavioural development. Staff were overheard commenting negatively about a child who had hit a second child with a book. Staff did not intervene only to say, 'ah ah, stop that', no alternatives were offered to the child to distract them and engage them in positive behaviour.
8. There was limited engagement by staff with the children during transition periods. Children were upset and crying as the dinner was brought into the room. Two staff members left the play area to prepare the serve the food. One staff was left with 12 children, and 5 children stood at the divider with 2 of these children visibly upset.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1)(a)(b)

The registered provider stated that a new floor plan for the room has been agreed and a board meeting was held with funding allocated to purchase the necessary furniture and toys for the rooms. The divider will be removed from the room to give the children full access to clear floor space.

A meeting was held with the room leaders and a follow up meeting with the team in this room. Management discussed activities, and curriculum planning with the team in this room. A follow up meeting is planned for the end of the month.

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Management have been in touch with the Better Start the Quality Development service, and a date has been agreed for a site visit.

Supporting documentation submitted

A copy of the minutes of the meeting was submitted.

Evidence of two-way communication with Better Start.

A copy of an invoice for new equipment and furniture.

Summary Comment

While it is acknowledged that the registered provider has engaged with the Better Start Quality Development Service, the corrective actions are ongoing and will be reviewed on the next inspection.

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

The service offered a hot meal which was prepared on site, in the middle of the day for all children attending. Parents are asked to provide healthy snacks for during the day. The weekly menu was displayed in the hallway. The children were served spaghetti bolognaise and garlic bread on day one and chicken casserole and mashed potato on day two. Staff described how they could request additional portions if a child was still hungry after their dinner. The children sat at low tables and had their dinner in an unhurried environment that promoted social interaction with their peers. In the Snowdrop room, the adults sat with the children and ate their snack too. The children were observed to have healthy nutritious snacks at 10:50, there was a selection for fruit, sandwiches, pancakes, rice cakes cheese and yoghurt. All children had bottles of water which were accessible throughout the day.

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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 was managed through an intercom system and was secured to prevent unauthorised entrance or exit from the building.

Each of the changing units had steps to allow children access to the units with the help of the staff members.

Each room had an internal telephone to allow communication between each area.

The parents notice board displayed local emergency contact numbers.

Staff names and qualification were displayed in the main hallway.

Infection Control:

Children were observed to wash their hands before eating and after playing outdoor.

Nappy changing procedures were followed as per the services policy.

Pedal bins were in use throughout the service.

Cots and low beds were placed 50cm apart in both sleep rooms.

Safe Sleep:

Records of children sleeping were maintained every 10 minutes.

The sleeping environment was conducive to sleep with dimmed lighting with soft white noise playing in the background.

Non-Compliance Information

Safety:

1. Garda vetting for 10 staff members whose disclosures were identified as due for renewal were requested for review and of these 3 these were not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.

Infection Control:

2. Children's soothers were not stored in clean labelled containers as per the service's infection control policy. Staff in the Daisy room left the children's soothers in their individual cubbies or on open shelving during the day.

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3. A child's bottle of milk was stored on the child's shelf in the Daisy room during the day. This is not in line with the service Infection Control policy which stated that perishable food will be stored in the fridge and not in room temperature for longer than two hours.
4. Staff were observed to prepare powdered infant formula (PIF) in the baby room. It is not recommended that early year's settings prepare PIF for children in their care.

Safe Sleep:

5. There was inadequate supervision of some children while they slept. At 13:51, 3 children over the age of 2 were observed to sleep on low beds with 5 children under two sleeping in cots. Staff completed 10-minute checks however, children sleeping on low beds require constant supervision while sleeping.

Action submitted by the Registered Provider

Corrective & Preventive Action

Safety:

1. The registered provider stated that Garda vetting has been applied for. They stated that to prevent further non-compliance they have developed a spreadsheet to record Garda vetting and expiry dates as required.

Infection Control:

2. Containers have been supplied for individual children's soothers.
3. Staff have informed parent that all children's bottles must be stored in the fridge.
4. Parents have been informed that baby's bottle must be prepared at home

Safe Sleep:

5. The registered provider stated that a staff member will stay in the room while children are sleeping. The staff rota has been revised to accommodate extra staff to be available at sleep time.

Supporting documentation submitted

Safety:

A copy of the spreadsheet was submitted.

Infection Control:

A copy of the minutes of the staff meeting was submitted

Safe Sleep:

A copy of the minutes of the staff meeting was submitted

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Summary Comment

The actions submitted by the registered provider are suitable to address the non-compliance identified on inspection.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(1) A registered provider shall ensure that each pre-school child attending the service is checked in and out of the service by an employee or an unpaid worker.

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

(b) a daily record in writing is kept of the entry on the premises of any such person.

Compliance Information

(1) Children's attendance was promptly recorded on the application the service uses.

(3) (a) Both entrances to the service were monitored by staff and can only be accessed with a code on a keypad or through the intercom system. Each staff member was observed to sign in and out on the tablet during the day.

Non-Compliance Information

(3) (b) On the inspector's arrival there was no requirement to sign in or out of the service. Through discussion with staff, it was determined that there was a visitors' sign in book however it was not used on the day of inspection.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(3)(b) The registered provider stated that a visitor sign in book has been acquired, and all visitors will be required to sign in and on arrival and exit. The book will be placed at the front entrance of the building.

Supporting documentation submitted

No evidence was submitted.

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Summary Comment

The action submitted by the registered provider is suitable to address the non-compliance identified on inspection.