

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015WD034
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Name of Service:	Kiddies Kingdom
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Address of Service:	Mathews Cross, Kilmeaden, Co. Waterford
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Eircode:	X91 WD63
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Name of Registered Provider:	John Whelan
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	04/02/2026
Day 2 of Inspection:	05/02/2026
Regulatory compliance meeting	16/04/2026

No of pre-school children:	AM	174	PM	131
Day 2	AM	171	PM	N/A

Address of the Early Years Inspectorate:	Community Care Office, Cork Road, Waterford X91 VX09.
Inspection undertaken by:	A. Bradshaw E. Cullen
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).

Conditions if applicable	Not applicable
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Description of service

Kiddies Kingdom is a privately run rural service in east county Waterford. The service operates from 2 buildings with 12 care rooms, 4 sleep rooms, a kitchen, and a kitchenette. The sanitary areas are adjacent to each of the care rooms. There are five play gardens located in the outdoor grounds of the premises.

The service offers daycare, part-time care, and sessional care for children aged 6 months to 6 years and operates from 07:30 to 18:00, Monday to Friday. It is registered for a total capacity of 206 preschool children at any one time. The service also offers school age care.

Staffing

The service employs 56 staff to care for the preschool children, of these 7 are not assigned rooms so are available to cover breaks and/or staff leave. There are an additional 10 auxiliary staff including 2 chefs, 2 transport operators, 2 office administrators, a maintenance person and 3 staff in the management role.

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;

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Regulation 11 – Staffing Levels;

Regulation 21 – Equipment and Materials;

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

Regulation 29- Premises.

A sampling process was used to assess compliance, as a result the scope of the inspection included the Messy Monkeys room, Rocky Racoons room, Jumping Jellyfish room, Dragonflies room, Starfish room, Penguins room, Ladybird room and the Cubs 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.

Additional Information

An immediate action notice was issued on 5 February 2026 under Regulation 9: Management and Recruitment for the absence of a Garda vetting disclosure. The registered provider submitted a written adequate response on the 6 February 2026.

The inspectorate requested that the registered provider attend a regulatory compliance meeting to address the outstanding findings of non-compliance.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, manager, 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)

The designated person in charge was on the premises at all times. The name of the person in charge and the deputy person in charge was displayed in the main hallway. The names and photographs of the staff team were displayed in the foyer of the service.

Non-Compliance Information

(2) Forty-four staff files were reviewed; this included a student's file who was present on work placement. In addition, Garda vetting for two staff members whose disclosures were identified as due for renewal was requested for review.

(a)(b) Validated references were not available for four staff members.

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(c) It is acknowledged that Garda vetting was available for 43 staff members, and the service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every 3 years. The registered provider had not considered the vetting of a student before the commencement of their placement. An IAN was issued on the 2nd day of inspection, and a copy of the disclosure was provided to the inspectorate in response on 6 February 2026.

(d) Police vetting was not available for four staff members who had lived outside the jurisdiction for a period for longer than six months.

(4)
Evidence was not available for one staff member to demonstrate that they had achieved a major award in Early Childhood Care and Education at Level 5 on the National Qualification Framework or a qualification deemed by the Minister to be equivalent.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)
(a)(b) The registered provider stated that one staff member was on leave and the required references would be sought once they return and a second staff would work off site until the references had been received.
(c) The required Garda vetting was submitted to the inspectorate the following day 6 February 2026. The registered provider stated that they are currently doing a complete review of all staff files to ensure all correct and relevant documents are present. A checklist has been developed to ensure that Garda vetting will be completed in a timely manner.

(d) The registered provider submitted evidence to demonstrate police vetting was sought for three staff members.

(4)
The registered provider submitted a copy of the required certificate for the major award in Early childhood Care and Education at Level 5 on the National Qualification Framework.
They stated that going forward all staff files would have a two person check and a staff profile checklist would be signed by both persons once complete. Staff files would be available on both hard and soft copies going forward.

Supporting documentation submitted

A copy of the Garda vetting was submitted.
A copy of the staff profile check list was submitted.
A copy of the completed modules received.

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Three receipts for the request for police vetting.
A document to evidence a staff members leave.
Three unvalidated references were submitted.

Summary Comment

(2)(c) The actions carried out were appropriate to address the non-compliance.

(2) (a)(b)(d) These aspects of the regulation remain non-compliant. On review of the corrective and preventative actions submitted by the registered provider, the inspectors cannot be assured that governance procedures are sufficient to mitigate risk. The actions provided will be assessed in practice on next inspection.

(a)(b) Insufficient evidence was provided to demonstrate corrective actions. The registered provider did not address the requirement for the outstanding validated references for four staff.

(d) The evidence submitted to the Inspectorate did not address the non-compliance as documentation submitted was evidence of police vetting application forms for three staff. This did not address the requirement for four staff who had lived outside the jurisdiction for six months or more to have police vetting.

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)(2)

On day 1 of the inspection, 49 staff members cared for 174 children. On day 2 of the inspection, 49 staff members cared for 171 children. On both days, members of the management team were available for support if required.

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Part V - Care of Child in Pre-school Service

Regulation 21 – Equipment and materials

A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.

Non-Compliance Information

The environment within the sampled care rooms did not cater for the age and stage of development of the children attending. While it is acknowledged that the service continues to work with Better Start National Early Years Quality Development the environments in the rooms inspected have not yet been developed sufficiently to provide adequate play and work equipment for children. The rooms had limited resources to promote varied types of play, and the room layouts did not encourage independent play for children with limited areas of interests in care rooms.

For example, the following was observed in the Jumping Jellyfish room, the Messy Monkey room and the Rocking Raccoon room:

- Open-ended and natural materials were not available to the children.
- The play kitchens and play shops had no supporting equipment.
- Empty shelving units with no material or equipment on them.
- Plastic toys which could not function as there were no batteries.
- The bookshelves had torn books.
- Toys were stored in large deep inaccessible plastic buckets.

Children's need for rest was not facilitated adequately, for example the following was observed:

1. The rest area in the Dragonfly room was not adequate for the 19 children in the room – there was only one small seat with no cosy furnishing or cushions.
2. There were no rest areas or cosy corners in the Rocky Raccoon room or the Messy Monkey room.

The service sleep policy stated that children would have a quiet space to enjoy unstructured, quiet activities of their choice or have a rest with soft seating and matting areas to sit or lie down.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered provider has stated that three Quality Liaison Persons (QLP), in conjunction with the staff have sourced open ended and natural materials particularly to accessorise the play kitchen and shops. This included empty food containers for imaginative play. A cosy corner had been developed for the Dragonfly room. The QLP's

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have redesigned the children's room to encourage independent play. The bookshelves have been reviewed. The QLP's will continue to do regular checks in the rooms to ensure the quality is maintained and will give feedback to management.

Supporting documentation submitted

Photographic evidence was submitted.

Summary Comment

The action and plan submitted by the registered provider have addressed the non-compliance identified on inspection.

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 to the building was secured to prevent unauthorised entry and exit from the building. Changing units had steps to allow children access the units with the support of the staff. There was an internal telephone communication system in place to allow staff contact each other easily. Staff's name and photographs were displayed in the hallway so parents can easily identify their children's carers.

Safe Sleep:

Children's sleep was to be child led; staff were observed to ask children in the Jumping Jellyfish room and the Rocky Racoons room if they wanted to sleep.

Fire Safety:

Fire exits were clear of equipment and accessible if required. Through discussion with staff the inspector determined that fire drills were carried out monthly.

Non-Compliance Information

General Safety:

1. In the Rocky Raccoon room, the large plastic tubs used to store toys were split causing a pinch risk for children.
2. The fixtures and fittings were not stable and sound, for example in the Dragonfly room a timber unit was not anchored securely and the shelf wobbled as the children leaned against it.

Infection Control:

3. The nappy changing practice in the Penguin room and the Rocky Raccoon room was not in line with the service infection control policy. The nappy changing procedure outlining each step was displayed in the nappy changing area. Staff did not wash their hands or the children's hands after each nappy change. Aprons were not changed after each use and changing mats were not sanitised after each use. Staff were observed to walk around the care room wearing a disposable apron which was worn changing nappies.
4. Staff did not use the foot pedal on the bin to dispose of soiled nappies, touching the lid repeatedly may lead to cross infection.
5. Surface areas were not clean or maintained, soft matting in the Penguin room was visibly dirty, children and adult chairs in the rocky Raccoon room were stained and crayon marks on the walls of the Starfish room.
6. Cots in the sleep room between the Ladybird room and the Cubs rooms were not placed 50cm apart and the low beds in the internal sleep room for children from the Rocky Raccoon room were not 50cm apart creating a risk of cross infection.
7. A table which a staff member confirmed is used for crafting and snacks was covered with a non-wipeable porous material, it was visibly stained and created a risk for cross infection.

Safe Sleep:

8. Through discussion with staff, it was identified that no record is kept of children's position, colour or breathing. This was not in line with the services sleep policy which stated that children would be supervised and their colour, position and breathing checked every 10 minutes and this would be recorded on the application the service uses.

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9. In the Penguin room at 13:20, 11 children under the age of 2 years were noted to sleep on low floor beds, these beds were not suitable for this age group as sleep facilities for this age group must be fitted with a firm mattress which is at least 6cm in depth.

Action submitted by the Registered Provider

Corrective & Preventive Action

The registered provider stated that:

General Safety:

1. The large containers have been removed and replaced with smaller suitable containers. All broken containers have been removed and replaced with wicker baskets for a more natural look and feel.
2. The unit in the Dragonfly room has been safely secured to the wall.
The QLP's will do regular checks to ensure there are no broken or unsuitable containers present, and these will be replaced as soon as possible. Any unstable structures will be replaced or secured, and all units will have regular maintenance checks.

Infection Control:

3. A meeting was held with the staff of the Penguins room regarding the importance of following the correct nappy changing procedures. In addition, the nappy changing policy was discussed at the training day regarding procedures to be followed for the health and safety of the children, staff and visitors. Management will complete spot checks to ensure procedures are followed correctly
4. The correct use of the nappy bin was discussed at the training day as part of the nappy changing procedures.
5. Washable removeable covers have been placed on adult chairs and management will ensure these are washed regularly.
6. Cots in the Ladybird & Cubs Sleep room have been removed to allow for adequate space between them and the children can avail of an additional sleep room in the Caterpillar room.
7. A wipeable tablecloth has replaced the old one with additional ones available to replace damaged ones.

Safe Sleep:

8. A sleeping log for each room has been developed which records each child's colour position and checks which are to be carried out every 10 minutes. Management will complete regular checks to ensure sleep checks are completed correctly.
9. New beds have been ordered for children under the age of two and management will ensure that all children under the age of two have either a low bed or cot to sleep.

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Supporting documentation submitted

General Safety:

Photographs of wicker baskets were submitted.

Infection Control:

A photograph of a washable tablecloth was submitted

A photograph of a covered adult chair was submitted.

A copy of the nappy changing policy was submitted.

A copy of the nappy changing audit was submitted.

Safe Sleep:

A copy of the invoice for low beds was submitted.

Summary Comment

While it is acknowledged that some of the actions carried out were appropriate to address the non-compliance, point 5 and 8 remain non-compliant. The inspectors cannot be assured that the procedures to ensure the health, safety and welfare of the children are sufficient to mitigate risk. For example:

5. The corrective and preventative actions submitted were not robust and did not evidence that the registered provider would ensure the surfaces will be clean and maintained in the children's care rooms.
8. There were no documents submitted to evidence the corrective actions to record children's sleep has been implemented.

The actions provided will be assessed in practice on next inspection.

Part VII - Premises and Space Requirements

Regulation 29 - Premises

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

(d) cleaned, maintained and repaired, as required, and

Non-Compliance Information

(d) The fixtures and fittings were not well maintained. For example:

- The surface of the couches and cushions in the Dragonfly room and the Starfish room were ripped.
- A wooden shelf in the Dragonfly room had rough exposed edges and screw holes.
- The timber surface area of the doors in the sanitary area for the Starfish room was not finished, painted or sealed and appeared to be absorbent when wet.

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- There were exposed cabling and unfinished electrical work in ceilings of the Starfish room and the Rocky Raccoon room.
- In the rooms sampled, paint was chipped and surfaces not maintained or repaired as required, for example, in the Penguin room and Cubs room furniture had untreated timber exposed and chipped paint on the edges and there was a large hole in the radiator cover in the Starfish room.
- A child's toilet in the Messy Monkeys room was not working; this was a non-compliance in April 2025.
At 15:09, two children were observed queuing to use the one toilet that was available to them

Corrective and Preventive Action

The registered provider stated that the couches have being removed from Dragonfly and Starfish rooms and replaced with new soft furnishings. A new enclosed cosy area has been created in the Dragonfly room, and this will be replicated in the following rooms: the Starfish room, the Rocking Raccoons room and the Messy Monkeys room. Management will ensure all soft furnishings are kept clean and of good standard by completing regular checks that coverings are washed regularly.

The timber around surface area of the doors in the sanitary area have been painted and the timber and exposed edges have been covered with wipeable edging. Timber areas around the sanitary areas will be maintained and repainted when required.

The toilet in Messy Monkey's was replaced and management will ensure it is regularly maintained.

Supporting documentation submitted

A photograph of a cosy area in the Dragonfly room was submitted.

A photograph of a radiator cover was submitted

Two photographs of secured electrical cables were submitted.

Summary Comment

The action and plan submitted by the registered provider have addressed the non-compliance identified on inspection.