

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2016DS032
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Name of Service:	ABA Preschool Academy
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Address of Service:	Brookfield Youth and Community Centre, Brookfield Road, Tallaght, Dublin 24, Co. Dublin
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Eircode:	A94 KP93
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Name of Registered Provider:	Jennifer James
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Service type:	Part Time
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Date of Inspection:	04/02/2026
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No of pre-school children:	AM	17	PM	13
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Suite 7, Vista Primary Care, Ballymore Eustace Rd, Naas, Co Kildare
Inspection undertaken by:	R. Brien
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	N/A
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Description of service

ABA Preschool Academy is one of two services operated by the registered provider and provides part time care to children aged 3 to 6 years on the autistic spectrum. The service is registered to operate from 08:25 to 12:25 and from 12:30 to 16:30, Monday to Friday.

The service is located in a purpose-built two storey building which is part of the Brookfield Youth and Community Centre in west Tallaght. The service operates over two floors, and both rooms are divided into two classes. T1 and T2 are located on the ground floor and T3 and T4 are located on the first floor. A sensory room is located on the ground floor, and a soft play area is located on the first floor. There is a fully enclosed outdoor play area at the side of the building.

Staffing

The service currently employs eighteen staff members including the manager. There were eleven staff working directly with the children on the day of inspection. The registered provider does not work directly in the service and was not present on 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 and premises and facilities. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under the following regulations:

9 (1)(a)(b),(2)(a)(b)(c)(d),(3),(4) – Management and recruitment,

11 (1),(2),(8)(a) – Staffing levels,

19 (1)(a)(b) – Health, welfare and development of child,

23 – Safeguarding, health, safety and welfare of child,

25 (1),(2) – First aid,

26 (1),(4) – Fire safety measures.

However, on inspection additional non-compliance was identified under regulation 29(c)(d) – Premises, These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 19 (1)(b) – Health, welfare and development of child. As a result, the scope of the inspection included T1 and T3.

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.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

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

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

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

(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.

Compliance Information

(1)(a)(b)

The service had a designated person in charge and a named person to deputise as required who were both on the premises throughout the inspection.

(2)

The inspection focused on the recruitment records for fourteen staff employed since the last inspection on 22 May 2023. Regulation 9(2)(c) was reviewed in respect of these fourteen adults and four other adults who are employed in the service and met regulatory requirements as follows.

(a)(b)

Of the 28 validated, written references that were required, 26 were available from a past employer and 2 were available from a reputable source.

(c)

Garda vetting disclosures had been obtained for eighteen adults. 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 for one adult. Please refer to the information outlined under regulation 23 of this report.

(d)

Police vetting was available for the required ten adults who had lived outside the State for a period exceeding six months as an adult.

(4)

Records were available evidencing that eleven staff members who were employed to work directly with the children held the required qualification or equivalent.

Non-Compliance Information

(3)

The registered provider did not take appropriate measures to ensure that all adults were suitable to work in an early years service prior to their commencement as follows.

- Four references in respect of three adults were not validated prior to the adults commencing employment. One adult commenced working in the service on 21 August 2023 and both references had been validated on 25 August 2023. One adult commenced employment on 25 August 2025 and their second reference had been validated on 03 September 2025. One adult commenced employment on 01 September 2025 and their second reference was validated on 02 September 2025.

(4)

On the day of inspection, there was no evidence available to show that two adults who were employed to work directly with the children in the service held a relevant major award in Early Childhood Care and Education on the National Framework of Qualifications or equivalent.

This non-compliance was present on previous inspections in 2023, 2022, 2021 and 2020. The corrective and preventive actions as stated by the registered provider did not prevent recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(3)

Upon identifying this timing issue, we have reviewed all staff files to ensure two validated references are in place for all staff. No staff member is currently employed without two validated references on file.

The service already has a recruitment and compliance checklist in place, requiring two validated references, we have slightly modified this to include “validated prior to commencement”. Following this inspection finding, the implementation of this procedure was reviewed with the administrator and management team to ensure strict adherence.

A meeting took place to reiterate, that all staff must have validated references prior to starting, even if not working directly with the children or in for training. A sample of files will continue to be audited by management monthly to ensure compliance.

(4)

One staff member has now submitted application for DCEDIY qualification recognition. The other staff member is awaiting a document before submission can proceed.

The service operates a specialist programme for children with additional needs and is also required to meet Department of Education funding criteria. We remain committed to ensuring compliance with Tusla requirements and have taken steps to ensure formal recognition under Regulation 9(4) is obtained and documented.

Management will verify recognition status prior to rostering staff to work directly with children and prior to inclusion in ratio calculations

The personnel file template has been updated to include a specific field confirming whether the qualification is recognised by DCEDIY for the purposes of Regulation 9(4), and evidence of recognition is held on file.

Management oversight has been strengthened through the introduction of a secondary verification check prior to rostering staff and prior to inclusion in ratio calculations.

Monthly audits of personnel files will continue to ensure ongoing compliance with Regulation 9(4).

Supporting documentation submitted

Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

(3)
The corrective and preventive actions as stated by the registered provider have been deemed to address this non-compliance. This action will be assessed on the next inspection.

(4)
Evidence of the required qualifications remains outstanding for two adults. The non-compliance has not been addressed. The registered provider must ensure that all staff employed to work directly with children hold the minimum required qualification. This regulation will be assessed on the next inspection.

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)
An adequate number of adults were working directly with the children at all times during the inspection.
- (2)
The minimum ratio of adults to children for part time services were adhered to at all times during the inspection. There were 11 staff present, 9 of whom had a recognised childcare qualification, supervising 17 children on the morning of inspection.
- (8)(a)
There were at least two adults on the premises at all times.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

- (1) *A registered provider shall, in providing a pre-school service, ensure that-*
- (b) *appropriate and suitable care practices are in place in the pre-school service, having regard to the number of children attending the service and the nature of their needs.*

Compliance Information

- (1)(b)
Staff reported that the children bring in their meals from home. Snack time took place at 10:00 and a second snack took place at 11:40. Drinking water was available to children throughout the inspection and children were given a drink with their meal. Children were given time to finish their meal and staff sat with the children during their meal.
- Children's independence was supported, staff were observed encouraging children to feed themselves, to put their lunchboxes away after their meal and to clean up after their play. Children were supported to use the toilet as needed. Staff provided an appropriate level of supervision whilst supporting the children's independence during play and lunch time.

Staff demonstrated a good awareness of the needs of each child in their care and responded to children's cues promptly. Staff displayed warmth and sensitivity during all interactions with the children and were observed to use gentle tones and praise.

Staff were observed to work well as a team, frequently communicating with each other in relation to the daily routine and children's needs.

An area with matting was provided within the rooms where the children could rest or take a break from activities.

Materials were accessible to the children on low level shelving, facilitating their choice of play.

All children accessed the outdoor play area on the morning of inspection and were dressed appropriate to the weather.

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 entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised.
- The toys and play equipment observed in use by the children on the day of inspection appeared in good working order.
- All blind cords were secured.

Infection Control:

- Waste was managed appropriately with the use of pedal bins.
- Liquid soap and warm water were available to facilitate hand washing.

Non-Compliance Information

General Safety:

1. Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.

2. In T1, several cracks at the children's level in the glass window were observed posing a potential risk of injury to the children.
3. In T2, the cupboard beneath the sink was not safely secured and hand soap, hand sanitisers, shower gels and plastic bags were accessible posing a safety risk if accessed by a child.

Infection Control:

The inspector observed a number of practices which posed a risk of transmission of infection within the service:

4. Three children in T3 did not wash their hands before their snack posing a risk of the transmission of infection.
5. Blue paper towel was not stored in dispensers in T1, T2 and T4. Staff were observed handling the rolls of paper posing a risk of cross contamination.
6. In the sanitary areas on the ground floor and the first floor, cloth hand towel dispensers were in use posing a risk of cross contamination.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Garda vetting for this employee had just lapsed, following 3 years since employment. Employee has now received a new garda vetting. At present, the service is using notes and spreadsheets. The Service has signed up to an online system and once we have it up and running correctly, we should receive automatic notifications of document expiry.
2. The glass has since been replaced. This was already an action in process prior to inspection.
3. The cupboard beneath the sink a child safety lock attached. We will continue to monitor the building maintenance and replace items when they become worn. Plastic bags and sanitisers will be kept out of reach of children in a child safety lock below the sink.

Infection Control:

4. The classroom supervisor has reiterated the importance of hand hygiene with staff and children. Importance of hand hygiene reiterated to staff and children.

5. We have ordered additional blue paper towel dispensers for each classroom – due to be delivered. Company on contract to repeat fill these dispensers.
6. We will remove the cloth hand towel dispenser and replace with hand paper towel dispenser, we have received a quote for the above, and a company will be fitting these. Company on contract to repeat fill these dispensers.

Supporting documentation submitted

General Safety:

Written and photographic evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Infection Control:

4. No supporting documentation submitted.
5. – 6 Written evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider.

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances.

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)

A person trained in first aid was immediately available to the children at all times on the day of inspection.

(2)

(a) First aid boxes were safely stored in an easily accessible and conspicuous location within the care rooms.

(b) A first aid box was available to the adults and children in the service at all times.

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.

(4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.

Compliance Information

(1)

(a)

A written record was available detailing monthly fire drills that had taken place in the service.

(b)

The number, type and maintenance record of firefighting equipment and smoke alarms on the premises was available. There was a record to show that the firefighting equipment had been serviced on 23 January 2026, and that quarterly maintenance of the smoke alarm system had taken place on 26 September 2025.

(4)

The procedures to be followed during a fire drill and in the event of a fire were displayed in conspicuous locations within 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*

Non-Compliance Information

- (c)
1. Parts of the premises were not adequately heated. During the inspection, the room temperature in T3 was 15.9°C at 11:26 which is below the required range of 18-22°C.
- (d)
- Areas of the service were not adequately cleaned, maintained and repaired as follows.
2. A build-up of dirt and dust was observed on areas of the flooring and shelving throughout the service and a deep clean was required.
 3. The paintwork was chipped in areas throughout the service with plasterboard exposed in places.
 4. An area of the flooring in T3 was damaged and the floor covering was missing.
 5. In the sanitary area on the ground floor, the wooden unit under one of the children's sinks was water damaged and the laminate had broken away in places exposing an unfinished wooden surface.
 6. The wooden frame of the mirror in the soft play area was missing on two sides, leaving a rough surface exposed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (c)
1. The heating system is fully operational, and staff have full access to temperature controls to adjust heating levels as required. The nature of the programme includes high levels of physical activity (e.g., sensory circuits, trampoline use and movement-based activities), and room temperature is often adjusted in response to children's activity levels. Following the inspection, heating levels were immediately

increased to ensure the room temperature was maintained within the required range. 3 room thermometers have been ordered so we are able to continuously measure room temperature.

- (d)
2. A full deep clean of the premises took place following inspection. Deep clean have been scheduled for every break, i.e. midterms, easter, Christmas, summer. Alongside our usual cleaning schedules/ Rotas.
 3. We are awaiting a quote from a painter and have planned to schedule works for the two-week break over Easter holidays. Painter is coming to quote on the 24th with works due end of March.
 4. The area of flooring had an extra layer of lino in T3, which was glued to original floor and acted as a tripping hazard was removed. The glue was removed from the floor, the floor remains discoloured, in comparison to the rest of the floor but is clean and there is no risk of tripping.
 5. The sink unit has been replaced.
 6. The mirror has been fixed.

The registered provider and management will complete a thorough check of the building before every school holiday break, so if anything needs to be repaired it can be done so with minimum disruption to the children. Anything identified with immediate concern will be rectified immediately.

Supporting documentation submitted

Written and photographic evidence was submitted to demonstrate the corrective and preventive actions submitted by the registered provider

Summary Comment

The corrective and preventive actions as stated by the registered provider have been deemed to address these non-compliances. These actions will be assessed on the next inspection.