

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2017DL500		
Name of Service:	Hilltop Academy		
Address of Service:	Hilltown, Ballymacarry Upper, Buncrana, Co. Donegal		
Eircode:	F93 FC91		
Name of Registered Provider:	Rachel Donaghey		
Service type:	Part Time, Sessional		
Date(s) of Inspection:	21/11/2025		
No of pre-school children:	AM	32	PM 6
Address of the Early Years Inspectorate:	Early Years Inspectorate 180-189 Lakeshore Drive, Airside Business Park, Swords, Co Dublin.		
Inspection undertaken by:	N McEndoo and S McKenna		
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		

Description of service

Hilltop Academy is a privately owned early years' service situated in a rural townland approximately one kilometre outside the town of Buncrana in county Donegal. The service is registered to provide sessional and part-time day care and operates weekdays from 09:00 to 13.45hrs. The premises consists of a single story, detached, former domestic dwelling which has been extensively upgraded and extended. There are three playrooms with adjacent sanitary facilities for each. The spacious grounds around the building have been subdivided to provide several outdoor play areas for the children.

Staffing

At the time of inspection there were eight adults employed in the service to work directly with children. This included the registered provider. The service also provides three students with work experience as part of their placement for college and school. The students were not present on the day of 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.

A sampling process was used to assess compliance under regulation 16 – Records.

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 to the registered provider on 21 November 2025 in relation to risks identified under regulation 23.

1. The door to the kitchen was not appropriately secured to prevent children from accessing unsupervised.
2. The hot water for handwashing in the junior room was recorded on the day at 67.5°C.

The registered provider responded by return on 24 November 2025 with information on corrective actions that had been taken to address the risks.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the registered provider, person in charge, staff and children who were present on the day of the inspection.

Part III – Management and Staff

Regulation 9 – Management and recruitment

(1) A registered provider shall ensure that-

(a) the service has a designated person in charge and a named person who is able to deputise as required,

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

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

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

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

(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)
- The registered provider ensured that.
- (a) There was a designated person in charge and a named adult to deputise in their absence.
 - (b) The designated person in charge and named adult to deputise were available on the premises on the day of inspection.
 - (c) There was 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.
- (2)
- On the day of inspection, seven adults were in attendance, the registered provider, the service manager, and five adults who worked directly with the children. The registered provider arrived at the service during the inspection process. The school student was under 16 and did not require vetting.

The following vetting information was available for 10 adults.

- (a) Five written validated references from past employers for five of the adults.
- (b) Five written validated references from reputable sources for five of the adults.
- (c) Garda vetting disclosures had been obtained for all 10 adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.

(4)
Seven of the adult files reviewed, evidenced they held a major award at level 5 or above in early childhood care and education on the national qualification framework, or qualifications deemed by the Department of Children, Disability and Equality (DCDE) to meet the regulatory requirement.

Non-Compliance Information

(2)(a)(b)

On the day of inspection, it could not be determined if ten written references on file for five of the adults, from either a previous employer or a reputable source were validated, as no documented evidence was available.

(2)(d)

A fully completed employment history was not available for 3 adults, on the day of inspection. In these instances, it could not be determined if police vetting from another state was required.

(4)

There was no evidence available for one adult to demonstrate that the minimum requirement of a major award at level 5 or above was held.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a)(b) Updated staff Recruitment Policy and Recruitment Policy – Preventative Actions, Oversight and Governance Statement document was added to Policies and Procedures Appendix.

The policy has been updated and put into practice; all current employee records will be further revised as well as ensuring to follow this policies protocols for future recruitment.

(2)(d)

Ensure that in a case of an employee taking a break from employment, that it is identified, and is evidenced on the persons curriculum vitae.

(4)

All staff qualifications have been attached.

Supporting documentation submitted

(2)(a)(b) Policy submitted.

(2)(d) History of employment submitted.

(4) Copy of qualification submitted.

Summary Comment

The corrective and preventive actions submitted have been reviewed. The requirements under Regulation 9 have been met.

Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

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

Compliance Information

(1)
On the day of inspection, there was an adequate number of adults working directly with the preschool children attending the service.

(2)
The minimum ratio of adults to children was maintained at all times throughout the inspection. There were 32 children present in the service being supervised directly by 5 adults.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

(1) A registered provider shall ensure that a record in writing is kept of the following information in relation to the service:

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.

Compliance Information

- (1)
- (h) Details of the attendance of each preschool child was recorded in each care room on the day of inspection.
 - (i) The staff roster was available on inspection and reflected the staff present in the service on the day.
 - (j) It was confirmed to the inspectors that no medication is administered in the service, as a result no records of administered medication were available on the day of inspection.
- (3)
- Records referred to in paragraph (1) above, were available to review by an authorised person on the day of inspection.

Non-Compliance Information

(k) The accident and incident reports from September 2025 were reviewed. A total of two records were available and were found to contain the required information; however, one record was not signed by a parent, and another record was not signed by the service manager. The omission of these signatures could result in a lack of continuity of care for the child and acknowledgment of the incident.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The Accident and Incident Policy have been updated to strengthen how preventative actions are identified, measured and reviewed, and this updated policy will be discussed with all staff and implemented immediately in practice.

Supporting documentation submitted

Updated policy submitted.

Summary Comment

The corrective and preventive actions submitted have been reviewed. The requirements under Regulation 16(k) have been met.

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 found to be secured on arrival preventing unauthorised access or exit from the premises.
- A visitor's register was maintained to ensure the proper monitoring of all entrants.
- The perimeter of the outdoor area was enclosed with secure fencing, and gates kept locked to ensure children always remain safely within the premises. No hazards were identified.
- Materials were observed to be in a good state of repair.

Infection Control:

- The materials and resources throughout the service were observed to be visually clean.
- There was adequate handwashing facilities provided throughout the service with liquid soap and paper towels.
- Child friendly handwashing posters were placed beside the sinks. Handwashing was supervised by the adults to ensure all hands were cleaned effectively.
- Children were observed to wash their hands with support, before snacks, and after toileting, and on return from the outdoor area.
- Sanitary facilities were observed to be kept clean.
- Tables were observed to be cleaned prior to and after mealtimes.
- Foot pedal bins were observed throughout the care rooms of the premises.

Fire Safety:

- Fire doors were observed to be unobstructed throughout the service.
- Fire evacuation procedures were clearly displayed in the care rooms.

- Fire extinguishers were on the premises and easily accessible.

Non-Compliance Information

General Safety:

1. An immediate action notice was issued on the day of inspection due to the door of the kitchen, located in the senior room being open because of a broken lock. This resulted in a risk of children accessing the area where cleaning products and a kettle were located. When brought to the attention of staff the door was immediately blocked off as an interim measure. A new lock was fitted to the kitchen door, and evidence submitted to the inspector on the 24 November 2025.
2. An immediate action was issued on the day of inspection, the hot water for handwashing in the junior room was found to be more than 60°C presenting a risk of scalding. When brought to the attention of staff, handwashing was strictly supervised by using the colder option of the mixer tap present. It is acknowledged that maintenance was subsequently completed to reduce the temperature to 42°C and confirmation of this was sent to the inspector on the 24 November 2025.
3. The door to an unused care room located off the senior room sanitary facilities was found unlocked with decorators' paint accessible inside. This presented as a risk as there was potential for a child to gain unsupervised access to the room. It is acknowledged a divider was present and placed across the doorway as a barrier, however this did not reduce the risk fully.
4. A blind cord was observed to be unsecured in the senior room presenting as a potential hazard. When brought to the attention of staff the cord was immediately made safe.
5. In the junior room, Popcorn was observed to be present in a child's lunch. Popcorn is classified as a high-risk choking food and is not suitable for consumption by young children.
6. On the day of inspection, no evidence of a documented risk assessment was available for a disclosure that had been recorded on an adults Garda Vetting. It is acknowledged the registered provider was aware of the disclosure; however documentary evidence to demonstrate that an evaluation took place and that the individual does not pose a risk to children is required.

Infection Control:

7. It was confirmed in conversation with staff that the high-level bin present in the bathroom was used to dispose used nappies in. This practice presented a risk of cross contamination.
8. Worn paint on the back of the sink in the senior room sanitary facilities requires refreshing to ensure effective cleaning of the area can occur.

Outing:

No risk assessments had been carried out for two recent outings to a local park and a local play centre. As a result, it was not possible for the service to identify and minimise any potential hazards during these outings. It was also not possible to demonstrate any safety procedures that were implemented to ensure safety of the children whilst located off the premises.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

The registered provider has stated.

1. A new lock was fitted to the kitchen door, and evidence submitted to the inspector on the 24 November 2025.
2. A new thermostat has been added to the service. A service is conducted each year by the plumber and regular temperature checks are conducted.
3. A barrier was available on the day of inspection to ensure children could not access the unused care room; however this room will now be fully locked at all times by staff members. Staff were updated during the staff meeting to ensure the door is always locked and unavailable to all children.
4. Blinds cords have been reattached. All blind cords have been checked.
5. A text message has been sent to parents to ensure popcorn does not enter the service and the healthy eating policy has been updated.
6. Risk assessment of Garda vetting has been completed. All risk assessments to be carried out where areas are flagged up from staffs garda vetting disclosures.

Following receipt of the inspector's feedback, a staff meeting was held to address the findings in full. All corrective actions identified were implemented immediately. During this meeting, staff were also updated on the newly revised and updated policies, including changes introduced to strengthen preventative measures.

The purpose of the meeting was to ensure that all staff clearly understood the issues raised, the actions taken, and their individual and collective responsibility to maintain these standards at all times. Staff were reminded of the requirement to ensure doors are locked and restricted areas remain inaccessible to children at all times, that environmental hazards such as blind cords, bins, walls and surfaces are maintained to a high standard, and that all safety, hygiene and supervision requirements are consistently met.

Procedures relating to water temperature checks, annual servicing, healthy eating practices, completion of risk assessments (including for outings and where Garda vetting disclosures arise), and accident and incident prevention were reviewed in detail. Staff were informed that compliance with policies and procedures is an

ongoing requirement and that daily checks, documentation, and safe practice must be followed at all times. Management will continue to provide oversight through regular monitoring, review of documentation, and follow-up discussions to ensure preventative measures remain effective and that the risk of reoccurrence is minimised.

Infection Control:

The registered provider has stated.

7. A new bin was purchased. All bins meet regulation standards.
8. Worn paint area is disinfected on a daily basis and a painter has been arranged to touch it up for after the Christmas Holidays. All walls and surfaces are of high clean standards.

Outing:

The registered provider has stated.

9. Risk assessments for outings have been completed. All risk assessments are completed ahead of outings.

Supporting documentation submitted

General Safety:

Staff meeting minutes, staff policy sign-off sheet, and updated policies submitted.

1. Photo of new lock submitted.
2. Copy of plumber's invoice submitted.
4. Photo evidence submitted.
5. Copy of text message to parents submitted.
6. Copy of risk assessment for outing submitted.

Infection Control:

7. Photo of bin submitted.

Outing:

9. Copy of risk assessments submitted.

Summary Comment

The corrective and preventive actions submitted have been reviewed. The requirements under Regulation 23 have been met.

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)
- The registered provider ensured that there was a person trained in First Aid Response (FAR) for children, available to the children at all times while attending the preschool service. There were five adults employed who held in date FAR certificates, with expiry dates ranging from February 2026 to October 2028.
- (2) (a)(b)
- Suitably equipped first aid boxes were securely stored, and clearly identifiable, in the hallway of the premises with supplementary boxes in each care room. The first aid supplies were sufficient to meet the needs of the number of children in attendance. The equipment was readily accessible for use in the event of a medical incident involving a child.

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-
- (a) a parent or guardian of a pre-school child attending or proposing to attend the pre-school service,
 - (b) an employee, and
 - (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) A procedure was in place to practice and record monthly fire drills. The last documented fire drill was dated the 17th of November 2025.
- (b) A record of the number, type, and maintenance of firefighting equipment in the service was on file. Records indicated that the last annual maintenance for the firefighting equipment occurred on the 26th of June 2025 and the fire detection system was dated the 4th of September 2025.
- (2)
Records in relation to paragraph (1) were available to inspection by an authorised person on the day of inspection.
- (4)
Fire evacuation notices and procedures were present in a noticeable position within the premises.

Part VI - Safety

Regulation 27 – Supervision

A registered provider shall ensure that pre-school children attending the service are supervised at all times.

Compliance Information

The required adult: child ratios were adhered to during the inspection. Staff strategically positioned themselves throughout both the indoor and outdoor environments to ensure continuous visual and auditory supervision. This enabled meaningful engagement with the children while remaining responsive to their individual needs. During mealtimes, staff were seated near the children, providing appropriate support when required and creating an inclusive, and socially engaging atmosphere. Consistent and clear communication between staff, staff and the manager, and staff and the registered provider was observed throughout the inspection process ensuring continuity of care for the children in attendance.