

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2017KE505
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Name of Service:	Jo's Playschool
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Address of Service:	Ardclough Village Centre, Ardclough, Co. Kildare
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Eircode:	W23 HR68
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Name of Registered Provider:	Joanna Byrne
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Service type:	Sessional
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Date(s) of Inspection:	03/10/2025
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No of pre-school children:	AM	37	PM	N/A
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Tusla Child and Family Agency, Suite 7, Vista Primary Care, Ballymore Eustace Road, Naas, Co. Kildare, W91 X38W.
Inspection undertaken by:	E. Mulhern
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

Jo's Playschool was established in 2017 as a privately operated, early years service for children aged 2 - 6 years. The service provides sessional childcare and education to children from 09:00 to 12:00 and 09:15 to 12:15, Monday to Friday. The service is in two prefabricated buildings located in the grounds of the village centre Ardclough. Each building has a pre-school room and adjoining sanitary facilities. The rooms are named the 'Blue' room and the 'Red' room. An outdoor area is available adjacent to the 'Red' room.

Staffing

There are eight staff members employed to work directly with the children including the registered provider. Seven staff members were present during the inspection and an adult who the registered provider reported was working on a voluntary basis.

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 areas of governance, health, welfare and development of child and safety. The inspection may also focus on other areas as required.

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

Regulation 9 (1)(a) & (b), (2)(a), (b), (c) & (d), (3) & (4) - Management and recruitment

Regulation 11 (1), (2) & (8)(a) – Staffing levels

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

Regulation 23 - Safeguarding health, safety and welfare of child

Regulation 25 - First aid

Regulation 26 (1) - Fire safety measures

Regulation 27 - Supervision

However, on inspection additional non-compliance which posed a risk was identified under Regulation 29 (c) & (d). These findings are outlined within the relevant regulations within this report.

Inspection findings are documented in the inspection report which is first issued in draft format to the service with an opportunity to respond to any findings. Where statutory requirements are identified as not being met, the registered provider must demonstrate how they have rectified the non-compliance and will prevent any non-compliance from re occurring. The Corrective Action and Preventive Action plan (CAPA) will be used to inform decisions about compliance with regulatory requirements. Where the registered provider fails to meet the statutory requirements an escalation process may be commenced.

The inspectorate reserves the right to edit responses received for reasons including clarity, completeness and compliance with administrative and legal processes.

The contents of the report are compiled by the inspectorate body.

Additional Information

An Immediate Action Notice was issued on 3 October 2025 as a mandatory Garda vetting disclosure was not available for one adult who was working directly with children, contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. A response was received on 6 October 2025 which was deemed to adequately address the risk.

Acknowledgments

The inspector wishes to acknowledge the cooperation of the registered provider, 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) The service had a named person in charge and a person who could deputise in their absence.
 - (b) The person in charge was present when the inspector arrived and remained on the premises throughout the inspection. The staff roster provided for the person in charge or named deputy to be present at all times of opening.
- (2)(c) Garda vetting disclosures were available for eight of the nine 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 in relation to one adult. Please refer to the information outlined under regulation 23 of this report.

(4) The inspection focused on the qualifications of four adults employed to work directly with the children since the previous inspection dated 19 October 2022. All four staff members held at least a major award in Early Childhood Care and Education at Level 5 on the National Framework of Qualifications.

Non-Compliance Information

The registered provider did not take appropriate measures to ensure that all adults working directly with children were suitable and competent as outlined:

(2)

(a) & (b) Appropriate consideration had not been given to references. The inspection focused on references for five adults (four staff members and one volunteer) who commenced working in the service since the previous inspection dated 19 October 2022.

Adult A: There were no records to evidence any references had been considered.

Adults B & C: There were no written references available. The records provided as reference verifications consisted of only a signature and date. They did not include any information to determine the suitability or competence of the adults. It was not documented how Adult C was known to their referees.

Adult D: There was no address on one past employer reference. There was no record of verification for the second reference.

Adult E: There was no address on one past employer reference.

(c) A Garda vetting disclosure was not available for one adult (Adult A) who was working directly with the children contrary to the National Vetting Bureau (Children and Vulnerable Persons) Act 2012. An Immediate Action Notice was issued on 3 October 2025 due to the significant risk posed. A response was received on 6 October 2025 which was deemed to adequately address the risk.

(d) International police vetting was required for one of the five adults (Adult D). The international police vetting record was not available and there was no record to show that any attempt had been made to obtain the record.

(3) The procedures outlined under regulation (2)(a), (b), (c) and (d) above had not been appropriately followed prior to the registered provider allowing the adults have access to children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2)
- (a) & (b) All outstanding references have been obtained and verifications carried out. A new reference check template is now being used to prevent the above happening in future. All new staff have been re-verified using this.
- (c) Garda vetting for the staff member has now been obtained. The service will ensure no person is allowed commence working in the setting before Garda vetting is obtained.
- (d) Adult D has now started the process of obtaining international police vetting. The service will ensure any staff members from other countries have vetting from their country.
- (3) All Garda Vetting is now up to date and provided for all staff working in the setting. Using the reference check form all references have been verified and appropriate questions documented. No staff member will be allowed work in the setting before vetting is received. The service will ensure international vetting is obtained for any staff member who has lived in another country.

Supporting documentation submitted

Documents were submitted evidencing the actions had been carried out as stated.

Summary Comment

- 9 (2) (a), (b) & (c) & (3) The actions have been deemed to appropriately address the non-compliance.
- 9 (2) (d) The regulatory requirement remains outstanding.

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.

(3) Subject to paragraph (5), a registered provider of a sessional pre-school service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 2 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) therefore at that reference number is satisfied.

(8) Without prejudice to paragraphs (2) to (7)-

(c) a registered provider of a sessional pre-school service shall ensure that, where the person in charge operates the service single-handedly, a second person familiar with the operation of the service and in a position to provide assistance to the person in charge in operating the service is, at all times, within close distance of the service and available to attend the service to assist the person in charge in the event of an emergency.

Compliance Information

(1) An adequate number of adults were working with the children. There were 7 staff members and a volunteer working directly with 37 children.

(3) The minimum adult to child ratio requirement for the age of children and type of service provided was always maintained.

(8)(c) The registered provider does not operate the service single-handedly. There were at least two staff members on the premises throughout the inspection. The staff roster provided for a minimum of two staff to be on the premises at all times of opening.

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.

Compliance Information

Basic Needs

Staff supported the children to manage their personal care. They prompted the children to wash their hands at appropriate times. They supported the children to use the toilet with an appropriate balance of independence and supervision. The children brought drinks and food from home and sat together with the adults when eating. The children moved freely within the rooms engaging in play and activities. Transitions between activities were well managed with staff explaining to the children what was going to happen next. Areas with soft seating were provided where children could rest or take a break from activities.

Supporting Relationships around Children

The adults fostered positive relationships with children by offering support through attentive listening, responsive interactions and gentle guidance. The children appeared content in their play. Group activities, such as shared meals and cooperative play, were designed to develop communication skills and strengthen social bonds. Staff discussed maintaining connections with families by communicating at drop-off and collection and holding meetings when needed to support children's development.

Physical and Material Environment

A variety of materials, toys and books were available to support children to engage in various forms of play and learning. The indoor areas were laid out with interest areas to include a construction area and a home corner. These were resourced with equipment and props to support imaginative and creative play and learning. Blocks, puzzles and art supplies were available on low level shelves easily visible and accessible to the children. Children's artwork was displayed showing the children's efforts and creativity are valued. The outdoor area was not used on the day of inspection due to a storm. Staff reported that the children usually spend time outdoors every day.

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

The registered provider had taken the following measures to safeguard the health, safety and welfare of the children.

General Safety:

Cables and cords were secured out of reach of children. Heavy furniture was secured to prevent tipping.

The outdoor area had a high perimeter fence and secured gate to prevent unauthorised access or children leaving unsupervised.

Infection Control:

Staff were aware of when to wash their own and children's hands to prevent the spread of infection. The inspector observed children's hands being washed before eating and after using the toilet. Children's lunches containing perishable foods were stored in the fridge.

Administration of Medication:

The registered provider reported that none of the children in attendance had received medication while attending the service. Staff demonstrated an awareness of procedures to administer medication safely if required including obtaining written parent/guardian consent and keeping a record.

Outing:

The registered provider reported that the children are never brought on outings from the centre grounds.

Non-Compliance Information

General Safety:

The registered provider had not taken all reasonable measures to safeguard the children from harm as outlined below:

1. Garda vetting was available for eight of the nine adults. However, one of the vetting disclosures 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. The fire exit door at the rear of the Blue room could not be easily opened. The door which had a push bar for opening also had a secured latch which was stiff and difficult to unlatch. This posed a risk of delaying the evacuation of children in the event of a fire.
3. The front entrance/exit doors to the Blue room and Red room were not appropriately secured to prevent children leaving unsupervised. The doors were secured on the inside with low level, thumb turn locks which could be opened by a child. The doors led directly onto the centre car park which had an open gate leading directly to the road. This posed a risk of injury to a child if they were to leave the service unsupervised.
4. A bottle of bleach was stored in a low, unsecured cupboard in the Blue room, posing a risk of injury to children if they were to access it.

Infection Control:

5. Adequate cleaning procedures were not in place for the toys and equipment. A build up of dust and grime was observed on some of these, posing an increased risk of spreading infectious diseases among the children.
6. The plastic covering on the nappy changing mat was torn, exposing the foam padding underneath. This posed a risk of cross contamination as it could not be cleaned effectively.
7. Waste was not appropriately managed in the pre-school rooms. The pedal function on a bin in the Blue room was not working and there was no lid on one of the bins in the Red room. This posed a risk of compromising the safe disposal of waste.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Garda vetting renewal has been obtained for this staff member. The service will ensure all vetting is in date by keeping a list of all dates to be easily checked.

2. The registered provider contacted the village centre about the latch on the fire door in the Blue room. The caretaker put some penetrating oil on this lock, and it now opens easily. The service will ensure this additional safety lock is easily opened to allow for easy exit and will replace when necessary.
3. The top locks on both the Red and Blue room doors are to be locked every day as per the guidance given to staff since we moved into the premises in 2018. This is done every morning but unfortunately this was not done on the day of inspection. The registered provider checked the fire report which was carried out in 2022. In section 5 it states that the playschool premises is in compliance with the Fire Services Act 1981 and this shows that the system we have in place is compliant with fire legislation. The registered provider checks each morning to ensure the locks are locked and is erecting signs as reminders to ensure this is done.
4. This was an oversight by staff, and the bleach is now stored up away from the children. The registered provider will ensure staff understand that no toxic products can be left in the reach of children. It has been brought up at our staff meetings.

Infection Control:

5. Our cleaning schedules have been updated. I have asked the staff who stay on extra time to clean to ensure that toys and equipment are cleaned thoroughly. Each Friday a deep clean is done to ensure a dust free environment is obtained. We are complying with our cleaning policy and using the cleaning schedules as a check lists to ensure the rooms are kept clean.
6. The ripped nappy changing mat has been thrown out and two new mats have been purchased. The service will keep the changing mats clean and in good repair and replace them when necessary.
7. The bin in the Blue room has been thrown out and a new one purchased. The food bin in the Red room has been replaced with a new bin with a lid. The service will ensure all bins are in good working order and have lids.

Supporting documentation submitted

General Safety:

Documents and photographs were submitted in keeping with the actions stated.

Infection Control:

Documents and photographs were submitted in keeping with the actions stated.

Summary Comment

23. The actions have been deemed to appropriately address the non-compliance. The registered provider must ensure that any measures taken to secure fire escape exits are compliant with fire legislation.

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

(2) (a) & (b) An appropriately equipped first aid box was stored in a conspicuous position and was available at all times.

Non-Compliance Information

(1) There was no person with a recognised first aid training certificate rostered to work between 12:00 and 12:15.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) The person with a recognised first aid training certificate is rostered to work until 12.30 every day. On the day of the inspection, she had an important appointment at 12.15 as this was the only time she could get. The service will ensure that this staff member makes any appointments in future after 12.15.

Supporting documentation submitted

No supporting documents submitted.

Summary Comment

25 (1) The action has been deemed appropriate in addressing the non-compliance.

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.

Compliance Information

- (1)
- (a) A written record was available detailing monthly fire drills that had been carried out in the service. The most recent record was dated 22 September 2025.
 - (b) Records were available in relation to the smoke detection system. The most recent date of maintenance recorded was 18 December 2024.

Non-Compliance Information

- (1) (b) A record was not available of the number, type and maintenance of the firefighting equipment.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1) (b) The certificate for the firefighting equipment has now been received from the landlord who looks after this. The registered provider has asked the landlord in future to provide these certs when the equipment is serviced so they are on file.

Supporting documentation submitted

Maintenance certificate for firefighting equipment dated 3 October 2025

Summary Comment

26 (1) (b) The actions have been deemed to appropriately address the non-compliance.

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 children were observed to be appropriately supervised throughout the inspection. This included when they were playing freely, engaging in activities, eating and using the sanitary facilities.

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) There were black patches observed on the external wall of one of the two toilet cubicles used by the children from the Red room indicative of mould growth. This can be caused by issues with heating/insulation/ventilation and could pose a health risk to the children by triggering respiratory issues.

(d) The registered provider did not ensure the premises was adequately, cleaned, maintained and repaired as outlined below.

1. A build-up of dust and grime was observed at the edges of floors in the pre-school rooms and sanitary facilities indicating inadequate cleaning procedures and posing a risk to infection control.
2. One of the taps on a sink in the sanitary area used by children in the Blue room was loose and could not be turned on. This could compromise children's handwashing.
3. The surface of the cupboards under the sink in the sanitary area used by children from the Blue room was significantly rusted. The painted surface was also peeling and could not be adequately cleaned.

4. There were a number of holes on the wall outside the toilet cubicle used by children from the Blue room, making the surface difficult to clean.
5. The paper towel dispenser in the sanitary facility used by children in the Red room had been repaired with an extensive amount of sticky tape on the surface, making it difficult to clean.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (c) The toilet in the Red room has been painted and treated with mildew paint. This painting will be done each year or sooner if needed to prevent this mildew build up.
- (d)
1. All bathrooms have been thoroughly cleaned and any dust etc. has been removed. As part of the cleaning schedule the bathrooms will be cleaned thoroughly daily.
 2. The tap in the Blue room has been brought to the attention of the landlord. The service is waiting for a date for them to replace it. The service will ensure all taps are in working order.
 3. The surface under the sinks in the Blue room has been treated and covered to allow for a cleaner surface. If this new covering gets damaged it will be replaced.
 4. The holes in this wall have been filled and a covering has been put up to allow for a cleaner finish. The service will ensure this surface is kept clean and replace if necessary.
 5. A new paper towel dispenser has been erected to replace the old one. The service will replace the dispensers if they break as soon as possible.

Supporting documentation submitted

Photographs were submitted in keeping with the actions stated.

Summary Comment

29 (c) & (d) points 1, 3, 4 and 5. The actions have been deemed to appropriately address the non-compliance.
29 (d) point 2. The requirement remains outstanding.