

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2024FL009
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Name of Service:	First Steps Academy Creche & Montessori Limited
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Address of Service:	50 Royal Canal Crescent, Rathborne Park, Rathborne, Dublin 15.
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Eircode:	D15 CHX5
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Name of Registered Provider:	Shirley Flannery
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Service type:	Full Day
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Date of Inspection:	15/05/2025
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No of pre-school children:	AM	40	PM	31
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	C. Kerrigan and L. Jameson
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

First Steps Academy Creche & Montessori Ltd is a privately owned service located in a purposely adapted building in a residential area in Dublin 15. The service is registered to provide care and education to a maximum of 63 children, 57 of whom can attend on a full day care basis.

The service operates from 8am- 6pm, Monday to Friday and offers the Early Childhood Care and Education (ECCE) scheme from 9am- 12pm daily for 38 weeks of the year.

Staffing

The registered provider employs twelve staff to work in the service, to include a general manager, the service manager and assistant manager, and nine early years staff, eight of whom were present on the day of inspection. The general manager works in a supervisor capacity and was not present on the day of inspection. The registered provider does not work in the service.

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. The inspection may also focus on other areas as required.

A sampling process was used to assess compliance under regulation 19 Health, Welfare and Development of the Child, Regulation 23 Safeguarding the Health, Safety and Welfare of the Child. As a result, the scope of the inspection included the Boo Boo Bear and Snuggle Bear rooms.

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 inspectors wish 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.

(7) A registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information, and where necessary training, including in relation to the following:

- (a) the policies, procedures and statements of the service specified in Schedule 5;*
- (b) Part VIIA (inserted by section 92 of the Child and Family Agency Act 2013 (No. 40 of 2013)) of the Act, and*

Compliance Information

(1)

- (a) The service had a designated person in charge and a named person to deputise if required.
- (b) A review of the roster and through conversation with management showed that the named person in charge or the deputy is rostered to be on the premises at all times during the operational hours of the service.

(2)

A review of paperwork and conversation with the registered provider showed that two new staff have commenced employment in the service since the last inspection held on the 4 December 2024. The files of these two staff members were reviewed in full. The files of ten staff were reviewed in relation to section (7)(a).

- (a) The registered provider ensured that there was three written and validated references were available from a previous employer for the adults working within the service.
- (b) The registered provider ensured that there was one written and validated reference available from a source other than a previous employer for the adults working within the service.
- (c) The registered provider ensured that garda vetting disclosures had been obtained for the two adults who in their role have access to the children. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
- (d) Police vetting was available for one adult who had resided in a country other than Ireland for a period longer than six consecutive months.

(3)

All references and Garda vetting procedures were completed prior to the two adults being allowed access or contact with a child attending the pre-school service.

(4)

The two adults who work directly with the children whose records were reviewed, held a major award at Level 5 or higher in Early Childhood Care and Education on the National Qualifications Framework.

(7)(a)

A review of ten staff files working within the service showed that the registered provider ensured all adults in the service completed an initial Induction process which was in line with service policy on Recruitment Procedures and Staff Training policy.

- Records reviewed in each staff file included details of the induction topics covered with the dates of completion and signatures of management and staff.
- Documentary evidence dated January 2025, was available to show that ten adults had reviewed Safe Sleep Policy, Healthy Eating Outdoor Play Policy, Infection Control and Fire Safety Policies.

Non-Compliance Information

(7) (a)

The registered provider did not ensure the following was in place within the service, for example:

1. There was no documentary evidence to show that the registered provider had ensured that all ten adults working directly with children were provided with regular supervision on policies or training. This was not in line with the service Staff Supervision Policy which states that support and supervision meetings will be held bi-monthly with the manager and three monthly with the area manager. This is necessary to ensure safe standards of care and wellbeing of children within the service.
2. The review of all ten staff files and conversation with management showed that there was no review of probationary periods for staff, issues identified were not reviewed again in a timely manner. This was not in line with the service policy on staff supervision. Staff require support and training to safeguard the wellbeing of children within the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(7)(a)

1. The service will hold supervision meetings with all staff and add them to their files; a calendar has been created to schedule meetings with all staff.
2. The service has reviewed the probation period for all new staff and followed up on any issues, a checklist has been set up to ensure probation periods happen on time.

Supporting documentation submitted

1. Documentation of calendar provided.
2. Documentation provided.

Summary Comment

The corrective and preventative actions submitted have been sufficient to address the non-compliances under Regulation 9 (7)(a).

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.

(4) Subject to paragraph (5), where a registered provider contemporaneously provides-

(b) a full day care service or a part-time day care service, or both, the minimum ratio of adults to children applicable for the duration of the sessional pre-school service in respect of the children attending that service shall be the ratio specified in paragraph (3).

(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) On the day of inspection there was an adequate number of adults working directly with the children. There were 10 adults available to the 40 children in attendance when the inspectors arrived unannounced to the service.

(4) The adult to child ratios were correct when the inspectors arrived unannounced to the service and throughout the inspection. There were eight adults were allocated to work directly with the forty children who were present on the day of inspection. Two further adults were available to provide support and relief cover in the care rooms as needed.

(8)(a) A review of the roster showed that there are at least two adults on the premises at all times during the operational hours of the service.

Part V - Care of Child in Pre-school Service

Regulation 19 - Health, welfare and development of child

(1) A registered provider shall, in providing a pre-school service, ensure that-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

(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.

(3) A registered provider shall ensure that no practices that are disrespectful, degrading, exploitive, intimidating, emotionally or physically harmful or neglectful are carried out in respect of a pre-school child whilst attending the service.

Compliance Information

(1)(a) The registered provider ensured the child's learning, development and well being was facilitated in the service, for example:

Basic Needs

- Water was available to the children as they needed in each care room sampled.
- Nappy changing observed on the day was completed as scheduled and as needed. Nappy changing was undertaken in a dignified manner with warm respectful interactions observed.
- There was a rest area in each care room if children needed to engage in more restful activities.
- Children were provided with appropriate protection for outdoor play, independence with selfcare skills were promoted with children being encouraged to assist with suncream application and hat and sunglass placement when going outdoors. This facilitates comfort in the play experience and promotes independence.

Supporting Relationships.

- A key worker system was in use in the service and key groups were displayed within classrooms. A key worker system allows staff to develop in depth knowledge about the children in their group and fosters nurturing relationships helping children to feel confident.

- Staff were observed to speak to each other in respectful and warm manner.
- Staff completed a daily log for each child, outlining meals, toileting and activities, this log is made available to parents, with daily conversations between families and staff occurring at pick up and drop off times. Ensuring families are connected to the service and their child's day.

Physical and Material Environment

- The furniture in the care rooms sample was low level and appropriate for children attending, with toys and play materials placed on low level shelving, nurturing independent choice.
- Nappy changing equipment was at a height suitable for staff use, with nappy changing supplies in easy reach to ensure children's safety.
- Rooms were bright and inviting play spaces, with images of the children and their families were on display throughout the room which promoted a sense of identity and belonging.
- Gross motor and sensory play areas were present in the Boo Boo Bear room, providing a safe space to develop these skills.
- The children had access to the outdoor play environment throughout the day. This was scheduled but also available to children if and when they needed. This area had absorbent flooring, a small slide, a bigger slide, balance beams, chalk boards with props, crawl through hoops and climbing frame. Providing an array of options to develop gross motor skills.

- (3)
- On the day of inspection, the adults in the service were observed to interact with the children in a responsive, warm and respectful manner. For example, children in the Boo Boo Bear rooms and Snuggle Bear rooms were observed to spoken to in calm low tones, emotions were named in an empathetic manner, with physical comfort given when needed. A behaviour management policy was in use within the service which outlined neglectful and prohibited practices.

Non-Compliance Information

1. The transitions in the service were observed to be disorganised and unplanned and did not support the children to move between activities. The following was observed:
 - In the Snuggle Bear room the transition to sleep was not appropriately managed and timely. The transition to sleep commenced at 11:48am. At 11:50am two children are placed into cots, and one was observed lying on a floor mat while the others continued to eat. The transition continued until 12:14pm when the room was finally dimmed and the children ready for sleep.

- In the Boo Boo Bear room, the transition to mealtime and sleep times were not appropriately managed and timely. Children were observed to be placed one by one into highchairs for mealtime at 11:29, three children were served food at 11:40, the last child was served food at 11:45. During this time one staff member facilitated mealtime while another cleaned up and prepared cots. The transition to sleep commenced at 12:01pm with one child being placed into a cot within the brightly lit care room, at this time three children remained in highchairs nearby finishing their meals. At 12:12 two children were placed in cots within a brightly lit care room.

Co-ordinated transitions foster children's sense of familiarity, set expectation and prepares them for change.

2. On the day of inspection, the sleep needs of two children in the Boo Boo room, aged between 16-21 months were not met in a timely manner. The following was observed:

- At 10:45 a child aged between 16-17 months was observed to place their head on the table and close their eyes. At 11:56 this child was observed to fall asleep whilst chewing food, in their highchair during mealtime. Staff were observed to note them sleeping but did not pick up on their cues for sleep in a timely manner. There is also a potential risk to aspiration whilst eating when not fully awake.
- Between 11:48 and 12:12 a child was observed to show signs of tiredness by crying, rubbing their eyes and stare vacantly and refuse food. During this time this child was placed into a highchair to eat lunch, which was refused, they were placed last to sleep. Staff did not pick up their signs of tiredness and need for rest.

Staff should be aware of children's sleep cues and ensure their sleep needs are met in a timely manner. This was a non-compliance noted in December 2024. The corrective and preventative actions submitted by the registered provider have been insufficient to prevent this non-compliance from reoccurring.

3. The schedule of activities planned for both the Boo Boo bear room and Snuggle Bear rooms were not appropriate for the age and development of the children within these care rooms, for example.

- In the Boo Boo bear room children were aged between 16-21 months were observed to be given magnetic tiles and cars with finger pinch points and books to play or read from 10:35 to 11:25. During this time children were observed to be disengaged and despondent. Three children

showed an interest in water play with books but were redirected back to tabletop reading. It is acknowledged that the children had access to a ball pit and low-level toys, however there was no guidance or development of play by staff.

- In the Snuggle Bear Room children were aged between 20 to 31 months were observed to be given small buttons and sponges to play with. This is a choking hazard for this age group.
4. Children were not provided with props to extend their play experiences for example: props were not available in the kitchen area of the Outdoor environment; props allow children to develop the play experience and extends their learning. This was a non-compliance in December 2024. The corrective and preventative actions submitted by the registered provider have been insufficient to prevent this non-compliance from reoccurring.
 5. Positive mealtime experiences were not observed on the day of inspection, for example;
 - Children who were developmentally able to navigate low level chairs were placed in highchairs for mealtimes. Children were observed show a preference for low level chairs by gesturing and rocking them prior to being placed in highchairs.
 - During mealtime highchairs were positioned in a semi-circle with children facing away from each other. Staff were not observed to sit with children during this time. There was no opportunity for peer-to-peer learning and little socialisation when eating. This is not in line with the service Health and Nutrition Policy which states that meal and snack times are treated as social occasions, where tables are set up for children.
 6. Staff were not consistent in their approach to children during mealtimes for example staff did not adequately encourage children to eat the hot meal provided for example a child who refused the meal was given a brioche roll. Other children then refused their meals showing a preference for the brioche roll provided to the other child. A third child who was showing signs of hunger and wanting a brioche roll was repeatedly moved away from the children before being given the roll. Children should be encouraged to eat the meal provided before alternatives are offered and a consistent approach should be employed to ensure fairness.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The service has created a Transition SOP, staff were coached on leading smooth, predictable transitions with the daily room leader checklist which includes monitoring of transition practices. Monthly audits will be undertaken along with ongoing mentoring for new staff; transitions will be reviewed at staff meetings.
2. Staff have received a refresher training on recognising and responding to sleep cues, children's tiredness are now discussed during handovers and logged. Children are immediately put to sleep as soon as the signs of

tiredness are observed. All staff will complete sleep policy training every term. Spot checks on room routines will be carried out weekly. A sleep room checklist has been created and implemented already.

3. All materials were reviewed and unsafe items removed. Weekly activity plans were updated with the support of an external support agency. Weekly plans are signed off weekly by the manager, room leaders to review materials and adjust them accordingly. Regular meetings with an external support agency to support developmental appropriateness of materials.
4. New props were added to the indoor and outdoor areas with storage being reorganised to make props more accessible for staff and children. Staff were reminded of the importance of enhancing play through open-ended resources. Weekly review of the rooms with a monthly budget allocated for replenishing and updating props. Ongoing training in play-based learning with an external support agency.
5. Children are now seated according to developmental stage in low chairs where possible, staff are to sit with children during meals to encourage conversation, room layout has been changed to support better mealtime interactions. Monthly observation of mealtimes by the manager. Policy reminders are discussed during team meetings. Daily mealtime set-up included in the room leader checklist.
6. Staff retrained to follow a consistent policy, children are encouraged to eat a hot meal before any alternative is offered. Nutritious balanced alternatives (not brioche or crackers) are now prepared in advance. Random mealtime spot checks by management and room leaders with food choices recorded daily and reviewed weekly.

Supporting documentation submitted

1. Evidence submitted.
2. Documentation submitted.
3. None.
4. Picture of outdoor kitchen attached.
5. None.
6. None

Summary Comment

The preventative and corrective actions submitted have been adequate to address the non-compliances under Regulation 19 (1)(a).

Part V - Care of Child in Pre-school Service

Regulation 22 – Food and drink

A registered provider shall ensure that adequate and suitable, nutritious and varied food and drink is available for each pre-school child attending the pre-school service.

Compliance Information

- A weekly service menu was available, this was observed to provide a varied food.
- Children were given a snack at 10am of fruit or yogurt and raisins, a hot meal of sausage hotpot was provided at 11:30am, and afternoon tea served at 3pm of wraps with cheese, all food was supplied by the service, with the exception of the hot lunches which were supplied by an external catering company and reheated onsite.
- Meals were prepared to suit the stages of development of the children in each classroom. Appropriate equipment was made available to the children according to their age and stage of development.
- Water or milk was given to the children throughout the day.
- Cultural food preferences were supported within the service.

Non-Compliance Information

1. The provision of alternative meals was not in line with the national guidelines on food and nutrition which state that a healthy alternative should be offered. Children attending the service for full day care who refused the hot meals offered were observed to be given brioches or dry crackers as alternative food offering. Dry crackers or brioche are highly processed food options and alone are not an adequate nutritious food offering. A child's hot meal serving should include ½ to 1 serving of vegetables, 1 serving of bread, pasta, rice or potatoes and one serving of either meat, poultry, eggs, beans or cheese.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

1. The service immediately stopped offering dry crackers or brioches as alternative meals. Healthy nutritious alternatives now include vegetable, proteins, like beans, cheese or eggs and carbohydrates like bread, pasta or potatoes. Staff will be trained on health and nutrition policy and appropriate healthy alternatives. Staff will be reminded about offering healthy alternatives only. Parents will be informed of the healthy food alternatives and to support these choices. The manager will review the meal practices monthly.

Supporting documentation submitted

1. Documentation submitted.

Summary Comment

The corrective and preventive actions submitted by the registered provider has been adequate to address the non- compliance under Regulation 22.

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 service was secured upon the inspectors unannounced arrival at the service. Access was granted via a doorbell system in which a staff member allowed access, therefore preventing access to the children from unauthorised persons, this also prevented children from exiting the service unsupervised.
- Hazardous cleaning agents were placed on high shelving away from children's reach.
- The outdoor area was fully secured and enclosed with a high wall, which was accessed via the care rooms.
- Fire exits were observed to be clear of obstruction throughout the inspection.

Infection Control:

- The premises was clean and well maintained throughout the areas sampled. Documented up to date cleaning records were available and displayed.
- Toilet roll was hygienically stored and in easy reach for children reducing the risk of cross contamination.
- Pedal bins were in use throughout the service ensuring appropriate disposal of waste.

Administration of Medication:

- Medication is not routinely given within the service, but staff demonstrated knowledge on the procedure for medication administration if required.

Safe Sleep:

- Staff maintained physical checks of sleeping children every 10 minutes, records outlined position, colour and breathing.
- There were a sufficient number of cots and low-level beds to meet the sleep needs of the children within the service.

- An ambient temperature between 18-22°C was recorded and maintained in rooms where children over 1 year were sleeping.

Non-Compliance Information

General Safety:

1. In both the Boo Boo Bear room and Snuggle Bear rooms chairs were noted to be stacked at a height. Children were observed to shake and rock stacked chairs, until the inspector intervened. The stacked highchairs were removed from the Boo Boo Bear room by the manager on the day of inspection. Stacked chairs are a potential crushing risk if toppled.
2. The registered provider failed to ensure that an individual risk assessment was carried out after parents disclosed a suspected nut allergy in a child who did not require medication. This poses a potential risk to the child's safety.
3. Children in the Snuggle Bear room had access to a container with small buttons, posing a risk of choking.
4. A chalkboard in the outdoor area was broken with sharp edges exposed. Posing a risk of injury.

Infection Control:

5. Handwashing practices were inconsistent across the service and not in line with the service policy on handwashing. For example:
 - In Boo Boo Bear room staff were observed to use the same set of gloves while picking up children, cleaning faces and equipment. Handwashing was not performed between these activities. This is a risk to cross contamination.
 - Handwashing was not observed to have been completed prior to mealtime for staff or children in the Boo Boo Bear room. There is a risk of cross contamination.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Stacked chairs were removed immediately and room leader daily safety checks will include monitoring of stacked chairs and removal of hazards.
2. An individual risk assessment was completed for the child with a suspected nut allergy and a care plan put in place. Allergy disclosures will trigger a standard process for risk assessment and care planning.
3. Choking hazards such as small buttons were removed from all rooms, play materials will be regularly audited for safety and suitability and included in the room leader checklist.

4. The broken chalkboard was removed from the outdoor area. With materials audited for safety and suitability which is included in the room leader checklist.

Infection Control:

5. Staff received immediate training and reminders on proper handwashing and glove use. A SOP has been created and reinforced during regular training sessions.

Supporting documentation submitted

General Safety:

1. Evidence of checklist attached.
2. Evidence of care plan SOP attached.
3. Evidence of room leader checklist.
4. Photographic evidence and documentation of the room leader checklist.

Infection Control:

5. Evidence of handwashing SOP attached

Summary Comment

The corrective and preventive actions submitted by the registered provider has been adequate to address the non- compliance under Regulation 23.

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-*
- (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) The registered provider ensured that a record was kept in writing of fire drills within the service. The last recorded fire drill was dated 30 April 2025.

- (b) A record was available indicating the number, type and maintenance of firefighting equipment with records demonstrating it was last serviced in August 2024, and the number type and maintenance of the mains powered smoke alarms throughout the service, these were last serviced in April 2025.
- (2)
- (c) The registered provider ensured that the fire drill and maintenance records were available for review by the inspector.
- (4) A notice of procedures was displayed throughout the service indicating the procedure to be followed in the event of a fire.