

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2025CC002
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Name of Service:	Blue Nest
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Address of Service:	7 Millbrook Crescent, Mill Road, Midleton, Co Cork
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Eircode:	P25 TH29
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Name of Registered Provider:	Maria Jesus Quiros Pindado
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Service type:	Full-Day, Part Time, Sessional
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Date of Inspection:	09/10/2025
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No of pre-school children:	AM	19	PM	10
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Administration Building, St Mary's Health Campus, Gurrabraher, Cork T23 X440
Inspection undertaken by:	D Prendergast
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

Blue Nest was recently registered as a full day care service. Children aged 2 to 6 years are accommodated and can avail of the Early Childhood Care and Education (ECCE) Scheme from 9.00am to 12.00pm, each Monday to Friday, over 38 weeks of the year. Daily hours of operation are from 7.30am to 6.00pm and the setting is open 50 weeks of the year. A registered school age service is also available.

Situated in an urban area of Midleton in Co Cork, the service is provided from the ground floor of a two-storey premises. It consists of three care rooms, a sensory room, a kitchen, an office and a staff room. Children's sanitary facilities are located either adjoining or adjacent to the care rooms. The children have access to an enclosed outdoor play space, at the rear of the premises.

Staffing

A total of seven staff are employed at the setting, of whom six work directly with the early years children. This includes the registered provider. One of the adults works solely with school age children.

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 announced 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.

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 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*
- (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.

(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 registered provider was the named person in charge at the childcare setting. A deputy had also been assigned and was available to deputise in her absence. Written information to this effect was displayed in the entrance area.

(b) The registered provider was present throughout the duration of the inspection. Review of the staff roster indicated that the registered provider was on duty at all times, during operational hours.

(c) Information regarding the service's management structure was available and clearly set out the names of the manager, deputy manager, room leaders and early years educators. The roles and responsibilities of each employee were also detailed.

(2) Recruitment records in respect of the seven adults who worked at the service were assessed for compliance and the following was noted:

(a) All 14 of the required references had been provided by past employers and corresponding reference validations were also in place.

(b) None of the written and validated references had been obtained from sources other than previous employers.

(c) Garda vetting disclosures had been obtained for all seven staff. 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 deemed to be required for all seven of the adults and was maintained on file.

(4) The records demonstrated that each of the six adults who worked directly with the early years children, held a recognised award in Early Childhood Care and Education, with copies of the qualifications available.

Non-Compliance Information

(3) It was noted that the Garda vetting disclosures held in respect of two of the adults were dated after the staff members had commenced working at the service. The registered provider stated that until the vetting was received, the adults were undertaking paperwork, cleaning and other tasks that did not involve contact with the children. However, this was not accepted under part (3) of the regulation, as Garda vetting is required to be in place prior to any person being appointed, assigned, or allowed access to or contact with children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The written reply from the registered provider stated that all current staff files were reviewed to ensure that Garda vetting is in place for everyone and that a log regarding the vetting status of all staff and associated adults has been created and updated. A recruitment policy was already in place and management will make sure that it is strictly followed; no person may commence any work or duties in the service, until Garda vetting is received and verified. As a preventive measure, quarterly audits of staff files will be conducted to ensure ongoing compliance and staff involved in recruitment and induction have been retrained on Tusla vetting requirements.

Supporting documentation submitted

A copy of the Garda vetting log and an excerpt from the service's recruitment policy.

Summary Comment

The registered provider has demonstrated that the non-compliance identified under Regulation 9 has been resolved.

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) At the time of inspection, there was an adequate number of adults responsible for the direct care of the children.
- (2) The adult child ratios met the requirements of the regulation.
- During the morning, there were 6 adults, including the registered provider, working with the 19 children in attendance, who were aged 2 ½ to 4 ½ years.
 - There were 10 children, aged 2 ½ to 4 years present in the afternoon and these children were under the direct care and supervision of 4 adults, including the registered provider.

Part IV – Information and Records

Regulation 15 – Record of pre-school child

(1) A registered provider of a pre-school service other than a pre-school service in a drop-in centre or a temporary pre-school service shall ensure that a record in writing is kept in respect of each pre-school child attending the service containing the following particulars:

- (a) the name and date of birth of the child;*
- (b) the date on which the child first attended the service;*
- (c) the date on which the child ceased to attend the service;*
- (d) the name and address of a parent or guardian of the child and a telephone number where that parent or guardian or a relative or friend of the child can be contacted during the hours of operation of the service;*
- (e) authorisation for the collection of the child;*
- (f) details of any illness, disability, allergy or special need of the child, together with all the information relevant to the provision of special care or attention;*
- (g) the name and telephone number of the child's registered medical practitioner;*
- (h) record of immunisations, if any, received by the child;*
- (i) written parental consent for appropriate medical treatment of the child in the event of an emergency.*

Compliance Information

From the 24 child records available, a sample of 10 was reviewed.

- (1) The registration forms contained the required information under parts (a) (b) (c) and (e) of this regulation.

Non-Compliance Information

- (1)
- (d) Of the 10 forms sampled, 6 did not include the full addresses of the child's parent or guardian. Only "Cork" was stated.
- (f) Information regarding whether or not the child had any illness, disability, allergy or special need, was unavailable on four of the records.
- (g) The name and telephone number of the child's registered medical practitioner was not detailed on four of the forms.
- (h) Information in relation to the child's immunisation status was unavailable on 5 of the 10 records reviewed.
- (i) Written parental consent for appropriate medical treatment in the event of an emergency, was not provided on any of the 10 child records.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (1)
- (d) The full addresses of the children's parents/guardians were obtained and the child records were updated accordingly. The registered provider verified that all current enrolment forms have full and accurate parent/guardian contact details. As a preventive measure, an enrolment checklist has been implemented to ensure full parent/guardian addresses are provided before a child commences.
- (f) The missing information regarding illness, disability, allergy, or special needs has been obtained and the child records have been updated accordingly. It has been verified that all current child records now contain complete and accurate health details. A mandatory enrolment checklist has been implemented, which requires full health information to be available, before each child commences.
- (g) The missing medical practitioner details have been obtained and the child records have been updated. The registered provider verified that all current child records now contain complete and accurate medical practitioner information. As a preventive measure, an enrolment checklist has been implemented to ensure that the medical practitioner's name and contact details are in place, before each child begins attending.
- (h) The missing information regarding the children's immunisation status has been obtained and the forms have been updated. The registered provider verified that all current child records now contain full immunisation information and has implemented a mandatory enrolment checklist, requiring immunisation details for each child, before they commence.

(i) All parents/guardians were contacted to obtain written consent for emergency medical treatment and the child records were updated accordingly. The registered provider has implemented a mandatory enrolment checklist, requiring signed parental consent for emergency medical treatment to be in place before a child commences. Staff have been trained to ensure that all information on the child records is collected and recorded accurately and child records will be reviewed every three months, to ensure that all relevant information remains complete and up to date.

Supporting documentation submitted

Evidence was forwarded to demonstrate that all of the missing information on the sampled child records has been obtained. A copy of the enrolment checklist was also submitted.

Summary Comment

The response and evidence submitted by the registered provider are accepted in meeting the regulatory requirements.

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

Compliance Information

(1)(a)

Basic needs:

- The registered provider stated that breakfast was usually accommodated between 7.30am and 8.30am. This was followed by the mid-morning snack, from approximately 10.00am, which was observed in practice in the care rooms. Lunch took place at 12.30pm. The inspector was also advised that children remaining for full day care were offered an additional meal break at 3.30pm.
- Reusable water bottles, which belonged to the children, were maintained where they could be easily seen and retrieved by the children, as needed, throughout the day. This included during outdoor play.

- Developmentally appropriate assistance and verbal prompts were provided to the children, as they undertook tasks and self-care activities, such as putting on their outdoor clothing and washing their hands.
- Each care room included a cosy area, to accommodate any child who may need to take time to rest.
- Adequate space was available across the care rooms for the children to move freely, as they played, explored and participated in the daily routine. The children were also accommodated to engage in active play and movement, in the outdoor play environment.
- The children were dressed appropriately in coats, all-in-one waterproof suits and wellies, as they carried out play activities in the outdoor area.

Supporting relationships:

- At mealtimes, staff members chatted to the children and ensured appropriate assistance. This helped to create a calm and pleasant atmosphere. Plenty of time for eating and drinking was also afforded, as was noted when a child was reassured to take their time, when finishing their lunch.
- The children's efforts were positively acknowledged by the adults, who responded warmly, with words of encouragement. Staff members also demonstrated interest in the children's activities. For example, during a table top activity in the Yellow room, the adults supported and guided the children, as they worked with scissors.
- The registered provider outlined the various methods of communication used to exchange information with parents or guardians. These included informal discussion at arrival and collection times, a digital application, phone calls and meetings, as needed. Examples of the information shared via the digital application were shown to the inspector and included child development observations and photographs of activities undertaken, with accompanying written descriptions.
- During conversation with the registered provider, the inspector was informed that a staff meeting had taken place since the service began operating. Corresponding minutes for this meeting were available and presented for review. Daily informal check in's with staff members were also incorporated, as well as the use of email and a messaging application.

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

- Breakfast, lunch and an evening snack were supplied by the service and prepared on site, with corresponding menu plans available. The children’s parents, or caregivers provided food for the mid-morning snack.
- At the time of inspection, examples of the mid-morning snacks included rice cakes, sandwiches, yogurts and a variety of fruit, with water to drink.
- Fish fingers with mashed potato and vegetables was served for lunch and second helpings were available to the children.
- It was reported that some of the children had dietary requirements and one child had a food allergy. The inspector was advised that meal ingredients were adjusted accordingly, to reduce the risk of a child ingesting an allergen and in some cases, parents provided food for their children.
- The person in charge confirmed that additional snacks were available at the service, should a child become hungry outside of the routine mealtimes, or alternatively, children could choose one of their own snacks to eat.

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/exit door was adequately secured against the risk of unauthorised access and the risk of a child exiting unsupervised.
- High-level fencing and gates created a secure enclosure of the outdoor environment.
- Fire extinguishers were safely wall mounted.
- Supplies of cleaning agents were stored on high-level shelves, in clearly labelled containers.
- There were no cables from electrical equipment within the children’s reach.

Infection control:

- The practice of hygienic handwashing and drying was promoted through the availability of warm running water, liquid soap, paper towel dispensers and pedal bins, at the children's wash hand basins. It was noted that the children washed their hands before mealtimes.
- Within the nappy changing area, the children's toiletries were appropriately stored and labelled.
- The children's perishable snacks were refrigerated prior to consumption. This ensured that such foods were maintained within the safe temperature range of 0°C to 5°C.
- Individual storage, in the form of wall hooks and cubby shelves, was in place for the children's coats and personal belongings.

Administration of medication:

- Prescribed medication was clearly labelled, in-date and maintained well out of the children's reach.

Fire safety:

- Fire exit doors were free from any obstruction that may delay a timely exit in the event of a fire.

Non-Compliance Information

General safety:

Blind cords were not secured, as required to reduce the risk of injury to a child. In the Green room, the two blind cords had been wrapped around the top of the blinds and were not appropriately tethered.

Action submitted by the Registered Provider

Corrective & Preventive Action

The existing blinds with cords were immediately removed from the Green Room, to eliminate any risk to children. These were replaced with cordless blinds, that attach to the window using suction cups and can be safely removed and stored when not in use. A full review of all window coverings in the service was conducted, to ensure there were no blind cords present. Regular safety checks will be carried out every three months, to ensure ongoing compliance with safety standards.

Supporting documentation submitted

Photographic evidence in relation to the replacement blinds and a copy of the safety check template.

Summary Comment

The corrective action implemented by the registered provider has addressed the non-compliance identified under Regulation 23.