

Early Years Inspectorate Regulatory Report

Pre School

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| TUSLA Identifier: | TU2025DY002 |
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| Name of Service: | Best Start Childcare Brickfield |
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| Address of Service: | Brickfield square, Drimnagh, Dublin 12, Co. Dublin |
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| Eircode: | D12 C1KW |
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| Name of Registered Provider: | Lina Ivanovaite |
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| Service type: | Full Day, Sessional |
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| Date(s) of Inspection: | 10/12/2025 |
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| No of pre-school children: | AM | 19 | PM | 17 |
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| Address of the Early Years Inspectorate: | 1st floor Trinity Building, IDA Business Park, Southern Cross Road, Bray, Co. Wicklow. |
| Inspection undertaken by: | S Quigley & H Sutherland |
| 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).

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| Conditions if applicable | Not applicable |
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Description of service

Best Start Childcare Brickfield is a privately owned service which was established in 2025. The service provides sessional and full day care and education to preschool children aged one to six years across three care rooms, two of which were in operation on the day of inspection, Room One and Room Three. The programme of care is facilitated through a play-based curriculum, and the service is registered to operate from 07:30 to 18:00 each weekday, with a sessional service included from 09:00 to 12:00.

Best Start Childcare Brickfield is located in a residential area of Clondalkin, South Co. Dublin. The service operates from part of the ground floor of a mixed-use, multi storey residential and commercial development. The service has a fully enclosed outdoor play area located to the rear of the premises.

Staffing

The service currently employs eight staff members including a designated person in charge and a cook. On the day of inspection, nine adults were present and working in the service including one of the service owners, and an adult engaged in a work placement programme.

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

The inspection focused on an examination of compliance under regulations 9 and 19; however, on inspection additional non-compliance which posed a risk was identified under Regulation 23. 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.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the service owner, 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.*

(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 designated person in charge and a named person to deputise was available in their absence.
- (b) The designated person in charge was on the premises at all times during the inspection.
- (c) There was a clear management structure in place in the service which staff members detailed during discussions with the inspectors.

(2)

Documentation required under regulation 9(2)(3)(4) was reviewed in respect of each of the nine adults working in the service, as detailed below.

- (a) (b) There were two references each available for six of the adults which had been appropriately verified, and one appropriately verified reference each available for two other staff members.
- (c) Garda vetting disclosures were available for all adults working in the service. The service demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every 3 years for each of the nine adults.
- (d) International police vetting was available for five of the six adults who required it.

(4)

Documentation reviewed evidence that five of the adults held at least a major award in Early Childhood Care and Education at Level 5 on the National Qualifications Framework. One adult who did not have a recognised

qualification held a letter of recognition confirming eligibility to practice from the department. Three adults did not require a qualification.

Non-Compliance Information

(2)

(a) (b)

- Although it is acknowledged that a second reference each was available for two of the adults, the references could not be accepted as they did not contain sufficient details of the adults, the referee, or the capacity in which the referees knew the adults.
- There were no references available for one adult working in the service.

(d) Although it is acknowledged that a document was available for one staff member which the person in charge stated was international police vetting, the document could not be appropriately assessed as it was not written in the English language.

(3)

Documentation reviewed evidenced that the procedures specified under Regulation 9(2) had not been carried out prior to some adults commencing employment in the service as follows ;

- There was only one appropriately verified reference on file for two of the adults.
- There were no references on file for one adult.
- The Garda vetting disclosures for two adults working in the service had not been obtained prior to the adults commencing employment in the service.
- International police vetting had not been obtained prior to one adult commencing employment.
- Two references available for one staff member had not been appropriately verified prior to them commencing employment in the service.

Corrective & Preventive Action submitted by the Registered Provider

The registered provider submitted the following response:

Corrective and Preventive Action

(2)(a)(b)

- Two different official references and with more detail were requested and checked.
- Translation was provided.

(3)

- All the references haven been appropriately verified (Re-check it)
- File complete for the adult working out of the rooms

- No corrective action may be taken, however, preventive measures may be identified as outlined below.
- No corrective action may be taken, however, preventive measures may be identified as outlined below.
- All the references have been appropriately verified (Re-check it)

All documents will be verified by two persons from now on: One from the ead Office (owners) and the other by the manager. The manager is required to complete a sheet listing with all necessary documents prior to commencement, as well as the training that must to be completed after starting.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the inspector.

Summary Comment

The regulatory requirement has 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) An adequate number of adults were working directly with the pre-school children attending the service during the inspection.
- (2) The minimum ratio of adults to children was adhered to at all times during the inspection. There were 19 pre-school children attending the service being supervised by 5 adults during the inspection. The person in charge provided relief cover when required.

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.

Compliance Information

The inspectors observed appropriate care practices in place during the inspection. The children moved freely, exploring their environments, playing and engaging with staff and each other. The service had a healthy eating policy in place. Regular meals and snacks were provided to the children throughout the inspection which were prepared onsite by a cook, including a hot lunch. Staff and children sat together during mealtimes. Drinks of water were always available within the care rooms and were offered to the children regularly and with meals.

A designated sleep time was in place in Room One, and rest areas were available in each room to enable the children to take time away from the group as desired. The room where children slept was calm and conducive to sleep. The children who had soothers were offered them when they were being placed to sleep. Staff provided the children with reassurance and comfort when settling them to sleep, sitting with them and speaking to them gently.

Staff supported children to be independent in their environment including cleaning up following mealtimes and play, preparing for meals, and washing hands before meals. Adults used respectful language during interactions observed with the children. Infants brought bottles of milk from home and were given these according to their individual routines.

Older children used the toilet independently with assistance provided from staff where needed, and children wearing nappies were changed regularly and when required. Staff used opportunities when assisting with personal care for warm individual engagement with the children.

An enclosed outdoor play area was available. The area was well resourced with a variety of play equipment and materials. The children were all provided with the opportunity to play outside and were appropriately dressed to the weather in coats and hats. The care rooms were well resourced with a variety of equipment and materials which were arranged on low level shelving units, facilitating the children's choices in play. Staff reported that information on children's routines, including nappies, sleep and food, were recorded on an interactive online application to be shared with the parents each day.

Non-Compliance Information

1. There was no chair available to a child aged one year which was appropriately sized to the child's age and stage of development in Room one. As a result, staff members were observed during mealtimes holding the child on their lap, trying to spoon feed them.
2. There was no opportunity for self-feeding for two children aged one year in Room One. Staff members were observed holding the bowl and spoons away from the children who were at a developmentally ready age to self-feed.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The service has two new wooden chairs that allow children feed themselves. The service will speak with the parents prior start and buy more chairs if it is necessary.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the inspector.

Summary Comment

The requirement has 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.

Non-Compliance Information

General Safety:

1. A foldable cot in use during the inspection for a child aged one year was broken and could not be adequately secured into place when erected, posing a risk of harm to the child.
2. Staff members detailed during discussions with the inspectors that a microwave was in use for heating children's bottles of milk, posing a potential risk of scalding to a child from hot spots formed in the milk.

Infection Control:

3. The nappy changing practices observed during the inspection were inappropriate for infection control purposes and at variance with the policy and associated procedures in place in the service as follows;

- A staff member was observed to change eight children's nappies with no handwashing between changing, wearing the same pair of disposable gloves for each of the eight changes.
- Four of the eight children changed did not have their hands appropriately washed after nappy changing, the staff member was observed wiping the children's hands with damp paper towels wearing the soiled gloves used during the nappy change. The other four children had their hands washed with soapy water; however, the staff member assisted this handwashing wearing the soiled gloves and dried the children's hands afterwards.
- A staff member was observed cleaning children's faces during nappy changes wearing the soiled gloves used during eight nappy changes.

Safe Sleep:

4. A child aged one year was observed sleeping on a stackable floor bed during the inspection where a cot or a floor bed fitted with a standard mattress is required.
5. There was no sleep plan and associated risk assessment in place for four children aged one year asleep on floor beds during the inspection. The person in charge stated during discussions with the inspectors that they were unaware of the requirement for sleep plans to be in place for children under two years in the service and that no child in the service that slept had a sleep plan in place. This is at variance with the policy in place in the service which detailed the requirement for sleep plans to be in place for all children who sleep in the service, in line with current TUSLA guidelines on safe sleep.

Action submitted by the Registered Provider

The registered provider submitted the following response:

Corrective & Preventive Action

General Safety:

1. The cot is fixed.
2. There is now a bottle warmer in the room

Infection Control:

3. All staff have training in the nappy change procedure, and they are reading the policies about infection control and nappy changing once again as a refresher.

Safe Sleep:

4. New beds have been purchased. All children in the room sleep in soft beds, 11/12/2025 one bed from the other branch operated by the registered provider was temporarily available, that solved the situation until the new beds arrived.
5. The sleep plan and risk assessment have been created together with the parents and the staff and now them in the children's files in the room.

Supporting documentation submitted

Supporting documentation was submitted and reviewed by the inspector.

Summary Comment

The regulatory requirement has been met.