

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015CC324
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Name of Service:	Classes Childcare
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Address of Service:	Hillside, Boreenmanna Road, Cork, Co. Cork
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Eircode:	T12 N563
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Name of Registered Provider:	Frances Cunningham
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	18/08/2026
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No of pre-school children:	AM	30	PM	29
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Address of the Early Years Inspectorate:	Administration Building, St. Mary's Health Campus, Gurrana Braher, Cork, T23X440
Inspection undertaken by:	D Cotter and A Madden
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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Description of service

Classes Childcare is a private early years care and education service offering a choice of full day, part-time and sessional services. It is registered for children aged from 0 to 6 years of age and currently children attending are aged from 1 to 6 years old. Operating hours are from 8:00 am until 6:00 pm, Monday to Friday, 51 weeks of the year.

The facility is located in the urban area of Cork City. It comprises of three care rooms namely Pre-Toddlers, Toddlers and Pre-school. There is a small kitchen, three children's toilets, one adult toilet and a separate nappy changing room. An outdoor play area is located at the rear of the service.

Staffing

There are 12 staff attached to this service including the registered provider who is not service based. This includes 3 relief staff who provide break cover from a sister service. There were 8 staff present on the day of inspections, 7 of whom were working directly with 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 unannounced and focused on the area of governance/ health, welfare and development of child/ safety/ premises and facilities. The inspection may also focus on other areas as required.

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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.

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Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.

Non-Compliance Information

On the day of inspection, it was identified that the service was operating with a different person in charge other than registered. The inspector was informed that the person in charge had changed on 24 July 2026 and the registered provider had not notified Tusla of the change.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

In their written response, the registered provider stated that the relevant change in circumstance form had been submitted.

Supporting documentation submitted

The registered providers statement is accepted.

Summary Comment

The non compliance identified under this regulation remains outstanding as the submitted form is missing an outstanding garda vetting disclosure. This will be checked at next inspection.

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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.

(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;*

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Compliance Information

- (1)
- (a) The registered provider was not service based but had assigned a named person in charge and deputy person in charge to oversee the running of the service, daily.
- (b) On the day of the unannounced inspection the deputy person in charge was present and facilitated the inspectors with the inspection process. From examination of the service's weekly rosters, there was an assigned person in charge on the premises at all times.
- (c) The service had a clear management structure in place, which outlined a named manager and deputy person in charge. The roles and responsibilities of each staff member were clearly communicated to the inspectors.
- (2) Following a review of previous inspection information, information available on inspection and discussion with the deputy person in charge it was determined that eight new staff members had been employed since the previous inspection. All eight new staff members work directly with the children. A total of eight files were reviewed. In addition, Garda vetting for four staff member whose disclosure was identified as due for renewal were requested for review. The following information was obtained:
- (a) From the total 16 required written and validated references, 10 had been provided by past employers.
- (b) A further 6 of the required 16 written and validated references were from a source other than a past employer.
- (c) Garda vetting disclosures had been obtained for all staff. 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. Please refer to the information outlined under Regulation 23 of this report.
- (d) International Police clearance documentation was available for 6 staff members that had resided outside of the state for a period greater than six consecutive months. These documents, where necessary, also had a certified translation available.
- (4) Records demonstrated that all eight new staff had achieved at least a Major award in Early Childhood Care and Education at Level 5 or above, as listed on the National Framework of Qualifications or a qualification deemed by the Minister to be equivalent.
- (7)
- (a) Documentation on file confirmed that the eight new staff were provided with sufficient training, instruction and induction in the policies and procedures of the service.

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Non-Compliance Information

(9)

(3) Evidence was available to demonstrate that vetting procedures had not been fully carried out in relation to two staff members, whose Garda vetting was not returned prior to them having access to or contact with children. Failure to complete the vetting process in full prior to staff have access to children poses a safety risk to children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

In their written response, the registered provider stated that extra care would be taken to ensure that all vetting procedures are carried out in full prior to any new staff beginning employment.

Supporting documentation submitted

The registered providers statement is accepted.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 9 (3) has been adequately addressed.

Part III – Management and Staff

Regulation 10 - Policies, procedures etc. of pre-school service

A registered provider of a pre-school service shall ensure that the written policies, procedures and statements specified in Schedule 5 are in place for the service.

Compliance Information

The following policy was examined:

- Safe sleep policy.

This policy was found to contain the necessary elements to aid staff in the safe care of children

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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.

(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)

The person in charge ensured that there were an adequate number of staff working directly with the children.

(2)

On the day inspection, the ratio of staff to children was maintained as per the regulations.

The rooms were in operation as follows:

Morning:

- In the Pre-Toddler room, there were 5 children aged between 1-2 years being cared for by 1 adult.
- In the Toddler room there were 9 children aged between 19-36 months being cared for by 3 adults.
- In the Preschool room there were 16 children aged between 3-5 years being cared for by 2 adults.

Afternoon:

- In the Pre-Toddler room there were 5 children aged between 1-2 years being cared for by 1 adult.
- In the Toddler room there were 8 children aged between 19-36 months being cared for by 3 adults.
- In the Preschool room there were 16 children aged between 3-5 years being cared for by 2 adults.

(8)

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The registered provider has ensured that there was a minimum of two staff at all times on the premises. This was evidenced through the staff roster and discussion with staff on the day.

Part IV – Information and Records

Regulation 16 – Record in relation to pre-school service

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

(i) details of staff rosters on a daily basis;

Non-Compliance Information

(1)
(j) While it is acknowledged that a staff roster was available on the day of inspection, it was not reflective of the staffing on the day. The staff breaks were not in line with the information on the roster available and no additional staff were available to cover these breaks, until an additional staff member from a sister service arrived at 1pm. This additional staff member was not rostered to work in the service on that day. This practice was found to be non-compliant on previous inspection dated 24 September 2024. The corrective actions submitted following that inspection failed to prevent the recurrence of this non-compliance.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

In their written response, the registered provider stated that the roster will be updated weekly and if a member of staff is absent unexpectedly, the roster will be updated on the day to reflect which staff will be available for relief.

Supporting documentation submitted

The registered providers statement is accepted.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 16 (1) (j) has been adequately addressed.

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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

- (1)
- (a) Basic Needs:
- Children were observed to play in the outdoors on the day of inspection.
 - The children's water bottles were accessible to them at all times in each care room.
 - The food offered to children on the day of inspection was healthy and well balanced. The main meal of the day, prepared on site, was a chicken and vegetable curry with pasta. A vegetarian option was also available.
 - Children's individual dietary preferences and needs were accommodated. It was observed that alternatives were provided to children as needed.
 - Extra portions of the hot meal were available to the children.
 - The rooms were well laid out to accommodate freedom of movement and resources were stored at child height.
 - Staff spoke to children in a respectful manner. The adults were observed to show positive regard for the children in all the care rooms on the day of inspection. The children were encouraged and praised during tasks in a warm and caring manner, for example, in the preschool room while the children were creating a collage from open ended materials. The inspector observed nurturing and enthusiastic interactions in all the care rooms.
 - Children's toileting needs were attended to promptly with staff offering help, or support as needed.

Non-Compliance Information

(1)

(a) There were not enough meals and snacks available to the children attending full day care. Children in Full Day Care should have at least two meals and two snacks offered to them. On the day of inspection, the food available did not meet the needs of those attending full day care. The breakfast of the day was stated to have been served at 9am, the hot meal of the day was served at 12pm and the snack of the day was planned for 3pm. The inspector observed the last snack of the day stored in the kitchen to be houmous with vegetable sticks and yogurt. There was no further snack available for children who stayed until 6pm, as is required. The inspector was informed that the service no longer facilitates a second snack, as they used to, but fruit was available if needed. The services approach to food provision was not sufficient for children's needs which could lead to children feeling hungry and dysregulated.

(1)

(b) Care practices observed in the Pre-Toddler room during the main meal of the day were inadequate to meet the needs of the children in attendance. Children were observed to wait up to 26 minutes from the time they returned from outdoor play and were strapped into their feeding chairs until their hot meal was served to them. Expecting young children to sit in feeding chairs for prolonged periods without food or engagement may cause unnecessary distress. One child became upset, and another child placed their head on the table and fell asleep twice whilst waiting and was woken and fed their dinner instead of being put to bed. These practices were not responsive to the needs and cues of young children.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(1) (a)

In their written response, the registered provider stated that an additional snack would be provided for children who stay later in the day.

(1) (b)

In their written response, the registered provider stated that a staff meeting had been held and staff had been reminded of the importance of responding to children's needs. The meeting also addressed management of transitions. The registered provider stated that staff were informed that young children should not be sitting waiting for their food.

Supporting documentation submitted

(1) (a) and (b)

The registered providers statement is accepted.

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Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 19 (1) (a) and (b) have been adequately addressed. This will be reassessed at next inspection.

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 external doors were appropriately secured to prevent children from exiting unsupervised.
- The external doors were secured to restrict unauthorised access.
- The blind cords observed were secured.
- The children's bags and coats were stored safely off the floor.
- Windows in each care room had been made safe to prevent children from exiting or falling.
- Low level feeding chairs in the Pre-Toddler room were in a good condition and had been fitted with safety harnesses.
- The outdoor area was securely fenced to prevent unauthorised access.
- Flexes and cables were observed to be out of reach of children.
- Windows and low level doors were fitted with visibility strips.

Infection Control:

- Each bathroom and nappy changing area were fitted with liquid soap and paper towels.
- Nappy changing areas were supplied with disposable gloves and aprons.
- Each nappy changing area observed was equipped with clean and intact nappy changing mats with the surrounding areas maintained in a clean condition.
- Barrier creams were individually labelled for children who may require them.
- Perishable food was safely refrigerated.
- Windows were open in the care rooms to aid natural ventilation.

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- The linen used for the cots observed on inspection was noted to be clean. Staff stated the linens were laundered on site weekly, or more regularly as needed.
- Mattresses were fitted with waterproof mattress protectors.

Administration of Medication:

- Individually labelled fever reducing medication was available and stored out of reach of children.

Safe Sleep:

- The inspector observed that staff conducted physical sleep checks on sleeping children.
- Staff remained with the children who slept on sleep mats in the Toddler and Preschool rooms.
- Cots and sleep mats were spaced the required 50cm apart.
- Suitable sleep equipment was in use for all children in relation to their age and stage of development

Fire Safety:

- Wall tethered firefighting equipment was available throughout the service.
- Fire doors observed were illuminated and free from obstruction.

Non-Compliance Information

General Safety:

1. Garda vetting was available for one staff member. However, this vetting disclosure was not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. A rolled up piece of astroturf was placed in the outdoor area. While it is acknowledged that staff stated the children like to play on this, this posed a trip hazard to the children.
3. The door to the laundry room was unlocked and accessible to children on the day of inspection. Containers of laundry detergent were within reach of children. This posed a risk to the safety of children.
4. One of the support beams attached to a balancing beam in the outdoor area was in need of repair. The beam, at child's level was damaged and splintered and posed a risk of injury to a child.

Infection Control:

5. Handwashing practices were not in line. For example, on the day of inspection, it was observed that staff did not wash the hands of children after nappy changing or when they returned inside from outdoor play. This posed a risk of cross infection.
6. There was no hot water available within the service to adequately wash the hands of either children or staff. Throughout the service, the water was recorded to range between 21.3°C and 22°C. The lack of hot water would impede effective hand washing.

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7. A toilet brush was stored at child height in the sanitary accommodation outside the Toddler room. This posed a risk of cross infection.
8. The ventilation system in the nappy changing area was clogged with dust which could impede the flow of air to the area. This poses a risk of airborne illness.
9. The bin in the children's sanitary accommodation outside the Toddler room was not a foot operated pedal bin. This posed a risk of cross infection to the children.
10. The red topped chairs in the Toddler room were observed to have wood protruding through the covering. This would prevent the effective wiping and cleaning of the chairs and pose a risk of cross infection to the children.
11. The taps on both hand wash basins in the Preschool sanitary accommodations were rusted, flaking and in need of repair. The person in charge stated that tape had been placed around them to protect children's hands. This posed a risk of injury to children.

Action submitted by the Registered Provider

Corrective & Preventive Action

In their written response, the registered provider stated:

General Safety:

1. The required garda vetting has been applied for, and management will be more stringent in their checking of staff files going forward.
2. The astroturf has been removed from the outdoor area and a risk assessment of the outdoor area has been put in place to ensure any issues are addressed.
3. A bolt has been placed on the laundry room door and staff have been instructed to ensure it remains closed.
4. The support beam on the outdoor play equipment has been repaired, and a risk assessment of the outdoor area has been put in place.

Infection Control:

5. A staff meeting was held to discuss and remind staff of the importance of hand washing.
6. Staff have been reminded to ensure management are aware of any malfunctioning equipment such as having no hot water available. Management will repair issues as soon as they are highlighted by staff.
7. The toilet brush has been removed from the toilets, and the cleaners were contacted to ensure they understood that these items are not to be stored in children's bathrooms going forward.
8. The ventilation ducts have been cleaned, and the cleaners were contacted to ensure that they will be cleaned more regularly in future.
9. The bins have been replaced with foot operated pedal bins.

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10. The red chairs have been removed from the Toddler room. Staff have been reminded to report any items in need of repair to management who will address the issues as they are reported.

11. The taps have been replaced on the wash hand basins and staff have been reminded to report any maintenance issues to management as they arise.

Supporting documentation submitted

General Safety:

1. The registered provider statement is accepted.
2. The registered provider statement is accepted.
3. The registered provider statement is accepted.
4. Photographic evidence of the repaired support beam.

Infection Control:

5. The registered provider statement is accepted.
6. The registered provider statement is accepted.
7. The registered provider statement is accepted.
8. Photographic evidence of the cleaned ventilation ducts.
9. Photographic evidence of the foot operated bins.
10. The registered provider statement is accepted.
11. Photographic evidence of the new taps on the wash hand basins.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 23 from points 2 to 11 have been adequately addressed. The noncompliance under point 1 remains noncompliant as the processed garda vetting has not been received. The registered provider is required to furnish the processed garda vetting to the Inspectorate upon receipt. These will be reassessed at next inspection.

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Part VII - Premises and Space Requirements

Regulation 29 - Premises

A registered provider shall ensure that the premises of the service are-

(d) cleaned, maintained and repaired, as required, and

Compliance Information

(d)

- The service and equipment available were observed to be clean.
- A cleaning schedule was in place within the service.