

# Early Years Inspectorate Regulatory Report

## Pre School

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| <b>TUSLA Identifier:</b> | TU2015DR123 |
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| <b>Name of Service:</b> | Koala Childcare Ltd |
|-------------------------|---------------------|

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| <b>Address of Service:</b> | Granitefield Manor, Rochestown Avenue, Dun Laoghaire, Co. Dublin |
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|-----------------|----------|
| <b>Eircode:</b> | A96 X5C9 |
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|                                     |              |
|-------------------------------------|--------------|
| <b>Name of Registered Provider:</b> | Andrew Lynch |
|-------------------------------------|--------------|

|                      |                                |
|----------------------|--------------------------------|
| <b>Service type:</b> | Full Day, Part Time, Sessional |
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| <b>Date of Inspection:</b> | 23/03/2026 |
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|-----------------------------------|----|----|----|----|
| <b>No of pre-school children:</b> | AM | 35 | PM | 36 |
|-----------------------------------|----|----|----|----|

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|-------------------------------------------------|----------------------------------------------------------------------|
| <b>Address of the Early Years Inspectorate:</b> | Floor 7, Brunel Building, Heuston South Quarter, Kilmainham, Dublin8 |
| <b>Inspection undertaken by:</b>                | R Phillips E Mulhern                                                 |
| <b>Title:</b>                                   | 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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| <b>Conditions if applicable</b> | <p>16<sup>th</sup> June 2026</p> <p>Regulation 9 Child Care Act 1991 (Early Years Services) Regulations 2016</p> <p>The Registered Provider will be required to comply with the following conditions.</p> |
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# Early Years Inspectorate Regulatory Report

## Pre School

- The registered provider shall ensure and demonstrate a clear management structure that identifies the lines of authority and accountability in the service and the specific roles and responsibilities of each employee and unpaid worker.
- The registered provider shall ensure that all employees, unpaid workers and contractors are appropriately supervised and provided with appropriate information and where necessary training.

### Description of service

Koala Childcare is a privately operated service registered to provide full day care to children aged between one and six years. It operates from a purposely adapted ground floor premises in an apartment complex and comprises of four care rooms and a designated sleep room. There is a kitchen on site and an office/staff room. The children have access to an enclosed outdoor play area, to the rear of the premises. The service is located in an urban residential area of Dun Laoghaire Co. Dublin.

### Staffing

A total of ten adults were employed in the service. A designated person in charge, eight childcare practitioners, one of whom also works in the kitchen preparing the snacks and meals and a cleaner. There were eight adults working directly with the children on the day of inspection, with the person in charge working directly with the children as necessary. A student was also present and an adult employed via an agency. An additional adult visits the service weekly to facilitate exercise classes with the children and was not present on the day of inspection. The registered provider does not work in the service.

An early years compliance specialist was employed by the service since the last inspection and that person arrived during the inspection and remained throughout.

### 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

# Early Years Inspectorate Regulatory Report

## Pre School

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

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

9 (1)(a)(b)(c), (2)(a)(b)(c)(d), (3),(4),(7)(a)(c) – Management and recruitment,

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

16 (1)(h)(i)(j)(k) – Record in relation to pre-school service,

19 (1)(b) – Health, welfare and development of child,

20 (1)(b) – Facilities for rest and play,

23 Safeguarding, health, safety and welfare of child,

25 First Aid,

26 Fire safety

These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under the following regulations.

16 (1)(h)(j)(k) – Record in relation to a pre-school service,

19 (1)(b) – Health, welfare and development of child.

# Early Years Inspectorate Regulatory Report

## Pre School

As a result, the scope of the inspection included the Wobbler, Toddler and preschool 1 rooms for regulation 19(1)(b), 16(1) (j)(k) and wobbler and preschool 2 rooms for regulation 16(1)(h).

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

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

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

### Additional Information

The service was referred to the National Registration Enforcement Panel (NREP) on the 6 January 2026, following inspection findings on 04 November 2025. A Regulatory Enforcement Meeting (REM) was held with the registered provider on the 23 January 2026 to discuss non-compliance identified and overall governance of the service. Subsequently the service remained under the supervision of NREP. This inspection sought to verify changes to be made within the service following the REM and previous CAPA processes.

### 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,*

# Early Years Inspectorate Regulatory Report

## Pre School

*(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*  
*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;*
- (c) these Regulations.*

### Compliance Information

(1)

(a) There was a designated person in charge and a named person to deputise as required.

# Early Years Inspectorate Regulatory Report

## Pre School

(b) The named person in charge and deputy were present in the service when the inspectors arrived unannounced for the inspection and remained throughout.

(c) The managers and staff demonstrated an awareness of their roles and lines of authority within the service.

(2) Following discussion with the service manager it was confirmed that one new staff member commenced employment since the last inspection on 04 November 2025. Documentation was reviewed in respect of that adult, a student and an adult present and employed via an agency and met regulatory requirements as follows:

(a)(b) Three references had been sourced from past employers and one from a reputable source and had a record of verification as required.

(c) Garda vetting had been sourced for all adults. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years for all other adults employed.

(d) A record of Police vetting had been sourced for one adult and was made available during the inspection for another who had lived outside of Ireland for six months or longer as adults.

(4) Records were available evidencing that the adults working directly with the children held at least a major award in Early Childhood Care and Education at level 5 on the National Qualifications Framework or equivalent.

(7)(a)(c) The registered provider demonstrated that they had taken reasonable measures to ensure that all employees were provided with appropriate information and training to safeguard the health, safety and welfare of children attending the service and to comply with the regulations. Records were made available for inspection demonstrating that induction training and support had taken place for one new staff member who commenced work in the service since the last inspection.

A review of staff supervision records evidenced one to one supervision meetings had occurred and been recorded for nine staff since the last inspection, in line with the services supervision policy which stated that supervision will be scheduled every three months.

Records were maintained evidencing six staff members had updated their children first training since the last inspection.

### Non-Compliance Information

The registered provider did not take appropriate measures to ensure that all employees were suitable to work in an early years' service prior to their commencement as outlined below:

(2)(a)(b) One record contained inadequate detail to be verified as an acceptable reference.

(3) It was not evident that the procedures specified in regulation (2) (a)(b) and (2)(d) had been carried out for two adults prior to their commencement working with the children in the service. The police vetting provided by one

# Early Years Inspectorate Regulatory Report

## Pre School

adult on the day of inspection had not been sought by the registered provider prior to the adult commencing employment on 25 February 2026.

The registered provider had not successfully implemented the preventive actions to prevent recurrence of this noncompliance to ensure that all adults have been appropriately vetted which poses a risk to children attending the service.

### Corrective & Preventive Action submitted by the Registered Provider

#### **Corrective and Preventive Action**

Candidates will be required to provide details of two previous employers for reference- checking. Successful candidates will have their references checked before an offer of employment is made. References will be checked by telephone and in writing to validate and verify the candidate's identity and to check their employment history, qualifications, experience and suitability for the role. References should be recent, relevant to the post and should not be provided by family members. References will be held on the employee's personnel file.

To prevent this non-compliance from happening the service have added a police vetting check list to their staff files for all staff members now. Staff members will not commence work until they have obtained the appropriate Garda vetting and Police vetting and ensured that the correct administration and filing have occurred. The files will be double checked by our Compliance expert and the Registered Provider to ensure a two-step approach is taken. The service will maintain a full staff file for each employee and have requested that agency staff files are sent to them with 24 hours notice prior to a staff member being placed to work in the service.

#### **Supporting documentation submitted**

Correspondence to the agency was submitted.

An updated recruitment policy was submitted.

Police vetting was submitted.

### Summary Comment

The actions taken and evidence submitted have been reviewed by the Early Years Inspectorate and deemed to address the non-compliance.

## Part III – Management and Staff

### Regulation 11 – Staffing levels

# Early Years Inspectorate Regulatory Report

## Pre School

*(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) An adequate number of adults were working with the children in the toddler room, preschool 1 and preschool 2 rooms.

(2) On the inspector's initial overview of the service, the minimum ratio of adults to children was observed in each care room. There were seven adults caring for 35 children.

The minimum ratio requirement was maintained in the toddler room, preschool 1 and preschool 2 rooms throughout the inspection.

(8)(a) There were always more than two adults on the premises at all times during the inspection.

### Non-Compliance Information

(1) The registered provider did not ensure that there were an adequate number of adults working directly with the children at all times, as outlined under regulation 11(2) below.

(2) From 12:04 -12:44 one adult was caring for eight children who were all one year of age, in the wobbler room and cot room. The person in charge was included in the ratios in another care room, therefore not available to the staff member.

### Corrective & Preventive Action submitted by the Registered Provider

#### Corrective and Preventive Action

# Early Years Inspectorate Regulatory Report

## Pre School

The registered provider has employed two new staff members. The service has since spread out the break times and have started breaks at 11am to allow for a staff member to be free if needed somewhere else. The service has a floating member of staff to cover breaks. The registered provider is requesting that all new staff offer 8 weeks notice if they are resigning from their positions to give extra time to recruit and receive garda vetting which is currently taking longer than it has in previous years.

To prevent this non compliance in the future, the service has an additional staff member who can be free to also cover break times as well as the staff who are in ratio for each room to ensure we are compliant going forward. The manager of the service added in additional break times starting from 11am for our 7:30 shifts to stagger the break times.

### **Supporting documentation submitted**

An updated roster with a new staff member and additional earlier break time was submitted.

### **Summary Comment**

The actions taken and evidence submitted has been reviewed by the Early Years Inspectorate and deemed to address the non-compliance.

# Early Years Inspectorate Regulatory Report

## Pre School

### 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:*

- (h) details of attendance by each pre-school child on a daily basis;*
- (i) details of staff rosters on a daily basis;*
- (j) details of any medication administered to a pre-school child attending the service with signed parental consent;*
- (k) details of any accident, injury or incident involving a pre-school child attending the service.*

*(3) A record referred to in paragraph (1) shall be open to inspection on the premises, and the documents and records referred to in paragraph (2)(a) shall be open to inspection whether on the premises or elsewhere, by an authorised person.*

#### Compliance Information

(1)(h) A sample of the attendance records maintained by the service were reviewed and reflected the children in attendance on inspection in those rooms sampled.

(1)(i) The staff roster reflected the staff present on the day of inspection.

(3) The documents and records referred to in paragraph (1) (h)(i)(j)(k) were made available for inspection.

#### Non-Compliance Information

(j) A sample of ten medicine administration records were reviewed, six of which had not been co-signed by a second adult to evidence witnessing of administration of the medicine. This is contrary to the services medicine administration policy and poses a risk to the continuity of care of the children attending the service and increases potential risk of medicine administration error.

(k) A sample of ten accident and incident records were reviewed, three of those had not been signed by a parent or guardian, contrary to the services policy on recording accidents and incidents. This poses a risk to the continuity of care of the child.

This regulation was non-compliant on the two previous inspections on 15 May 2025 and 04 November 2025.

The registered provider has not successfully implemented the corrective and preventive actions to prevent the reoccurrence of the non-compliance.

#### Corrective & Preventive Action submitted by the Registered Provider

##### Corrective and Preventive Action

These records have since been looked over and corrected. These records were signed by the appropriate party

The service manager has also spoken with staff members individually about the importance of these records being

# Early Years Inspectorate Regulatory Report

## Pre School

filled in correctly. All medicine and accident records have since been corrected and have been compliant going forward. We have spoken about hand overs to other staff members if a shift has finished, the staff member must tell the next staff member about the Accident and Incident books and the Medicine Administration records as this is highly important for a child's wellbeing. Manager checks when exiting the building now includes "Check Accident and Medicine files, if an incident is overlooked the Manager will inform Parents via a call, and email to ensure the parent is fully aware. The Manager will include this information on the report and the email to the parents will be attached to the report.

A staff meeting was held to discuss the importance of completing the relevant documentation, and management oversight. These procedures were also discussed at each staff members 1:1 meeting also.

The plan to communicate to parents was also highlighted regarding accidents incidents and medicine administration.

### **Supporting documentation submitted**

Evidence of team meeting including agenda was submitted.

Evidence of staff 1:1 meeting records were submitted.

Evidence of correspondence regarding importance of completing relevant documentation was submitted.

### **Summary Comment**

The actions taken and documentation submitted were reviewed by the Early Years Inspectorate and deemed to address the non-compliance.

# Early Years Inspectorate Regulatory Report

## Pre School

### 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-

(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(b) Drinking water was available to the children throughout the inspection.

The children were offered regular meals and snacks. The staff engaged the children in conversation throughout mealtime, supervising and assisting them as necessary.

The adults spoke kindly to the children and met their care needs in a responsive manner.

Nappies were changed for younger children regularly and as required. Older children were supervised using the sanitary facilities and supported as required with toileting.

The children were supported to wear coats and outdoor clothes appropriate to the weather and given an opportunity to play outside.

There was a designated nap time in two of the rooms sampled. The staff made the children comfortable for sleep and gave soothers and comforters to those children who used them.

### Part V – Care of Child in Pre-school Service

#### Regulation 20 – Facilities for rest and play

(1) Subject to this regulation, a registered provider shall ensure that-

(b) there are adequate and suitable facilities for a pre-school child to rest during the day, and in the case of an overnight pre-school service, during the day and the night.

#### Compliance Information

1(b) The service provided suitable facilities for rest and sleep. Each care room had a rest area with soft mats and cushions. Children less than two years of age slept in cots. Floor beds were available and floor mats for those over two years of age.

There was seating in the outside area where the children could take a break from activities also.

## Part VI - Safety

### Regulation 23 - Safeguarding health, safety and welfare of child

*A registered provider shall ensure that all reasonable measures are taken to safeguard the health, safety and welfare of a pre-school child attending the service and that the environment of the service is safe.*

#### Compliance Information

The inspector found by observation of practice, review of documentation, discussion with staff and inspection of the premises that the registered provider had taken the following steps to safeguard children attending:

#### General Safety:

The entrance door to the service was adequately secured to ensure the safety of the children within and to avoid unauthorised persons accessing the service or children exiting unsupervised.

Cleaning products were stored in locked cupboards or out of reach on high shelving.

The kitchen and storage rooms were inaccessible to the children.

All toys examined were in good condition and equipment was suitable, age appropriate and in good working order.

The outdoor area at the rear of the premises was enclosed with artificial grass and soft fall covering on the ground.

#### Infection Control:

There was thermostatically controlled warm water, liquid soap and paper towels for handwashing in the sanitary areas and care rooms. Children's hands were washed after outdoor play, before meals and after nappy changing and using the toilet as required.

Staff were observed disinfecting their hands using hand gel after cleaning children's noses.

Waste was appropriately managed with the use of pedal operated bins throughout the service, ensuring hands free disposal.

Staff were observed wearing personal protective equipment and washing their hands in line with the services policy, when changing children's nappies.

Staff were observed cleaning the tables before and after meals and snacks.

Sheets and cellular blankets were stored separately for the children and staff stated they were cleaned weekly.

#### Administration of Medication:

The inspector observed medicine administration to one child, administered according to the service's policy.

Medicine was stored safely out of children's reach, in its original packaging and was noted to be in date.

# Early Years Inspectorate Regulatory Report

## Pre School

### Safe Sleep:

Staff were observed checking sleeping children individually and documenting their findings in relation to the child's position, colour and breathing, as well as the sleep room temperatures, at ten-minute intervals.

### Fire Safety:

Fire exits were signposted and unobstructed throughout the service.  
Staff identified the fire assembly point for the Inspector.

### Outing:

There was an outings policy in place however the person in charge stated that the service did not currently take the children on outings off the premises.

### Non-Compliance Information

#### General Safety:

A cable from an extension lead was trailing down within a child's reach in the cot room. This posed a risk of harm to a child in the service. The inspector brought it to a staff member's attention, who removed the lead at the time, addressing the risk.

#### Infection Control:

There was an inadequate system in place for sterilising mouthed toys:  
There was a container with some toys in it on a high shelf in the wobbler room, however the inspectors did not witness any toys being added to the box and taken out of circulation after children mouthed them, or mouthed toys being washed or sterilised as required, while the inspection was in progress. This was in contravention to the services infection control policy.  
The services infection control policy states that:  
Toys that are shared are cleaned between uses.  
This practice of allowing the children to mouth toys that have been in other children's mouths, without cleaning or sterilising them, increases the risk of spread of infection, which can negatively impact on children's health.

### Action submitted by the Registered Provider

#### Corrective & Preventive Action

#### General Safety:

The trailing cable was put up and has been tacked to the wall in many places to ensure it will not trail again. To prevent this non-compliance from re occurring, we completed a full risk assessment of each room and checked for all trailing wires or slip and trip and choking hazards to ensure the safety of the children. The management have

# Early Years Inspectorate Regulatory Report

## Pre School

also spoken in our staff meeting about the audits on the app and they must be completed thoroughly and not just checked off. A member of Management is also completing a walk around the creche to double check this each day. A Compliance expert will be conducting regular safety audits

### Infection Control:

The service has reviewed their Infection control system in terms of mouthed toys.

Staff have been retrained and a new system implemented to remove mouthed toys as and when they are mouthed, to be cleaned prior to re circulation. A second box is available in the room to ensure all mouthed toys are removed from circulation for cleaning. The policy was re issued to all staff regarding infection control and mouthed toys.

### Supporting documentation submitted

#### General Safety:

Photos of wiring safely secured were submitted.

Screen shots of the audit tool for safety risk assessments was submitted

#### Infection Control:

A team meeting agenda, 1:1 meeting records and infection control policy were submitted.

### Summary Comment

The actions taken and evidence submitted have been reviewed by the Early Years Inspectorate and deemed to address the non-compliances.

# Early Years Inspectorate Regulatory Report

## Pre School

### Part VI - Safety

#### Regulation 25 - First aid

*(1) A registered provider shall ensure that a person trained in first aid for children is, at all times, immediately available to the children attending the pre-school service.*

*(2) A registered provider shall ensure that a suitably equipped first aid box for children-*

*(a) is safely stored in an easily accessible and conspicuous position on the premises, and*

*(b) is available to the children attending the pre-school service at all times.*

#### Compliance Information

(1) It was confirmed by review of staff files, and discussion with the registered provider, that four staff present throughout the inspection held in date First Aid Responder (FAR) training certificates. The roster evidenced that one or more were available to the children at all times of opening.

(2)(a) Adequately equipped first aid boxes were stored in conspicuous locations that were easily accessible throughout the service.

(b) The first aid boxes were available to the children in the service at all times.

### 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) A record was available detailing fire drills that had taken place in the service. The record showed the last fire drill had taken place on 23 February 2026.

# Early Years Inspectorate Regulatory Report

## Pre School

- (b) There was a record to show that the firefighting equipment had been serviced on 24 June 2025, and that maintenance of the fire detection and alarm system was last carried out on 20 March 2026.
- (2) (c) The records were made available for inspection.
- (4) The procedures to be followed during a fire drill and in the event of a fire were displayed in conspicuous locations throughout the service.