

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DR143
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Name of Service:	Willow House Childcare Woodbine
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Address of Service:	3 Woodbine Road, Blackrock, Co. Dublin
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Eircode:	A94 HX22
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Name of Registered Provider:	Yvonne Tierney
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Service type:	Full Day
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Date of Inspection:	07/08/2026
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No of pre-school children:	AM	24	PM	25
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Floor 7 Brunel Building, Heuston South Quarter, St. John's Road West, Kilmainham, Dublin 8
Inspection undertaken by:	H Sutherland
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).

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Description of service

Willow House Childcare Woodbine is one of three early years services operated by the registered provider. The service is located in a residential area of Blackrock, South County Dublin. Opening hours are 7.30am to 6pm, Monday to Friday and full day care and education is provided to children aged 1 to 6 years. The premises comprises of a single storey, purposely adapted building with four childcare rooms, a sleep room, sanitary facilities, a kitchen, and a fully enclosed outdoor area.

Staffing

There are currently nine adults employed to work in the service including the person in charge, seven early years educators and a cook. On the day of the inspection there was nine adults present including the general manager, the person in charge, six early years educators and a cook. The registered provider does not work in the service.

Methodology

Tusla's Early Years Inspectorate is the independent statutory regulator of early years services in Ireland. The Child Care Act 1991 (Early Years Services) Regulations 2016 define the duty of a registered provider to ensure the safety and well-being of children and to comply with these regulations. This Act also gives Tusla the authority to assess compliance with the regulations. The purpose of regulation in relation to early years services is to ensure that the care, safety, and well-being of children attending such services is upheld. Inspections of early years services are planned based on the following:

- Previous inspection history
- Any information received in relation to the service

The findings on inspection are based on:

- Information obtained through examination of documentation
- Direct observation
- Discussion with relevant staff

This inspection was unannounced and focused on the area of governance, health, welfare and development of child, safety and records. The inspection may also focus on other areas as required.

The inspection focused on an examination of compliance under Regulations 9 (1) (2) (3) (4), 11 (1) (2) (8a), 16 (h) (i) (j) (k) and 23; however, on inspection additional non-compliance which posed a risk was identified under

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Regulation 24 Checking in and out and record of attendance. These findings are outlined within the relevant regulation within this report.

A sampling process was used to assess compliance under Regulation 16 (j), (k) Record in relation to pre-school service and Regulation 19 Health, welfare and development of child. As a result, the scope of the inspection included the Little Steps and the Little Giggles room.

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 general manager, person in charge, staff and children who were present on the day of the inspection.

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Statutory Notices

Notice	Date Served	Detail
IN3863	07/08/2026	Evidence of Garda Vetting was not available for one staff member who had access to children. The Vetting disclosure must be submitted to the Early Years Inspectorate prior to the person having access or contact with children.
Status	Action was taken by the registered provider following service of the notice. The service submitted a written response which detailed corrective and preventive actions undertaken which were accepted by the inspectorate.	

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.*

(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

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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 as required.
 - (b) The designated person in charge was present when the inspector arrived unannounced at the service.
 - (c) The service had a clear management structure and staff were aware of their roles and responsibilities.
- (2) Following a discussion with the person in charge, it was confirmed that six adults commenced employment in the service since Regulation 9 was last inspected on 26 November 2025. Documentation required under Regulation 9 (2), (3) and (4) was reviewed in respect of the six adults as detailed below.
- (a) Nine written and verified references were available from past employers.
 - (b) Three written and verified references were available from sources other than past employers.
 - (c) Garda Vetting disclosures were available for five of the adults. Garda Vetting for the additional staff members working within the service was in date and as such was not subject to review on this inspection.
 - (d) Police Vetting was available in respect of six adults who had lived outside of the State for a period longer than six months as adults.
- (4) Documentation was available to show that four adults who worked directly with children attending the service held a qualification deemed suitable by the Department of Children, Disability and Equality (DCDE). One adult did not require a qualification.

Non-Compliance Information

- (2)
- (c) See Statutory Notice section in relation to Improvement Notice 3863 served.
- (3) The registered provider did not ensure the following checks were carried out prior to an adult working in the service.
- Documentary evidence indicated that one adult commenced employment within the service prior to receipt of Garda Vetting.
 - Documentary evidence indicated that one adult commenced employment within the service prior to receipt of Police Vetting.
 - Documentary evidence indicated that one adult did not have both of their references validated before they commenced employment in the service.

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(4) It could not be ascertained whether one adult held 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, as the document provided to the inspector for review was not translated.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered provider stated that all staff files were reviewed, and any outstanding documentation has been requested. A staff meeting was held to review staff recruitment procedures and staff file requirements. A recruitment checklist will be completed for all new staff and no staff member will be permitted to work in the service until all required documentation has been obtained. Management will carry out monthly audits of staff files to ensure that all documentation is in place.

Supporting documentation submitted

Garda Vetting disclosure

Translation of qualification

Staff meeting minutes

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 9 (3) and (4) have been adequately addressed.

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,

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Compliance Information

- (1) On the day of inspection, there were an adequate number of adults working directly with the children to meet their needs.
- (2) The minimum adult-to-child ratio was maintained for the duration of the inspection. There were 5 adults working directly with 24 children in the morning, and 5 adults working directly with 25 children in the afternoon.
- (8) (a) The roster provided to the inspector by the person in charge showed that a minimum of two staff members were on the premises at all times during the operational hours of the service.

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.*

Compliance Information

- (i) An accurate staffing roster was available in the service, detailing the hours of work for each staff member on the day of inspection. Previous rosters and corresponding sign in sheets were available for review also.
- (j) Documentation of medication administered within the service was made available for review. A sample of nine records were reviewed and were found to have all required information documented.

Non-Compliance Information

- (h) The service did not maintain an accurate record of the children in attendance on the day of the inspection. At 11.34am it was identified that five children were present in the Little Giggles room, however the attendance record documented only four children as being in attendance. Failure to

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maintain accurate and up to date attendance record may result in the service being unable to accurately account for all children in the event of an emergency or evacuation.

- (k) The service uses a triplicate accident and incident book to record incidents involving the children, the inspector reviewed 10 records and found that 2 forms were not signed by the parents, and both still contained the parents copy. Failure to provide parents with information regarding incidents involving their child could potentially impact follow up care at home and may pose risk to the children's safety. This practice was at variance with the services accident and incident policy.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (h) The registered provider stated that the service has reviewed its procedures for maintaining attendance records and all staff have been reminded to ensure an accurate record is maintained for all children. Regular headcounts will be carried out throughout the day to ensure that the number of children present corresponds with the attendance records. Attendance records will be checked daily by management or the designated person in charge to ensure that every child's arrival and departure times and movements between rooms are accurately recorded.
- (i) Staff have been reminded that all accident and incident records must be completed fully. Management will review accident and incident records on a weekly basis to ensure that all documentation has been completed fully and accurately. Accident and incident procedures will also be reviewed with staff during regular staff meetings to reinforce correct practice, ensure continued compliance and prevent recurrence.

Supporting documentation submitted

No evidence submitted

Summary Comment

The actions stated by the registered provider have been deemed appropriate in addressing the non-compliances. The effectiveness of the actions will be assessed on the next inspection.

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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-

(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 service had a healthy eating policy and staff reported that the service provides breakfast, a morning snack and a hot lunch, which is prepared off site and delivered by an external catering company. Parents/guardians provide their children's evening snack each day. Children sat in a family style setting for their meals and self-feeding was encouraged. Additional portions were provided for children requesting more. Drinking water was readily available and offered to children with their meals and during outdoor play. Bibs were provided for younger children to protect their clothing.

Children were encouraged to develop independence during care routines for example, washing their hands after their meal, following nappy changing and using the toilet. Nappies were changed on a schedule and staff stated that children were changed outside of the scheduled times if required. Staff alerted children when it was approaching time for their nappy to be changed and engaged warmly with them throughout the care routine. Children were observed to move freely around the care rooms without obstruction. All of the children were observed to engage in outdoor play and were appropriately dressed for the weather.

Areas with soft matting and cushions were available within the care rooms, offering children the opportunity to take a break or rest from activities. Children slept at a designated time after lunch. The sleep room was darkened, with soft music playing, creating a suitable environment for sleep. Staff remained next to some of the children during their transition to sleep and provided support and reassurance as required. Staff reported that an online application was used to communicate key aspects of the children's day with their parents/guardians including meals, sleep and nappy changing.

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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:

- Cleaning agents were stored safely out of children's reach.
- Internal blinds were safe and fitted correctly, with blind cords secured and out of reach of children.
- The storage facilities were inaccessible to children.
- All toys and equipment observed on the day of inspection were in good condition and free from pinch or crush points.

Infection Control:

- Pedal operated bins were in use throughout the service to support the safe disposal of waste.
- Liquid soap, warm water and single use paper towels were available at wash hand basins.
- The perishable items contained in the snacks provided by parents/guardians were stored in the fridge upon arrival and kept refrigerated until snack time, preventing them from spoiling.

Safe Sleep:

- Staff were observed to carry out physical checks on sleeping children every ten minutes.
- Standard cots and low-level beds were available for sleep and were used in accordance with children's ages.
- The temperature of the room where children slept was maintained at the required temperature range.

Fire Safety:

- Staff adequately detailed the procedure to safely evacuate children from the service in the event of a fire.
- The designated fire escape routes were free from obstruction on the day of inspection.

Non-Compliance Information

General Safety:

1. The children's kitchen in the Little Steps room was not safely attached to the wall. This posed a potential tipping hazard, which could result in injury to a child.

Infection Control:

2. Handwashing practices following nappy changing posed a risk of cross contamination and were at variance with the services nappy changing policy. A staff member was observed to change children's

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nappies, spray down the soiled changing mat and did not wash their hands until the next child was taken into the changing room by the hand and lifted to the changing mat.

3. Areas of the Little Steps room and Little Giggles room required a deep clean as follows:
 - Areas of the kitchen, skirting boards and shelving in the Little Steps room had a visible accumulation of dirt and dust.
 - The nappy changing mat in the Little Giggles room had a visible build-up of dirt.
 - There was no individual storage available for children soothers in the Little Steps room. A soother tree in the fridge in the Little Steps room contained 13 soothers, none of which were labelled. A staff member confirmed that soothers were sterilised daily and stored together in the sterilising unit.

The above practices pose a risk of cross contamination and illness to a child.

Administration of Medication:

4. During the inspection, it was identified that not all staff were fully aware of the procedures to follow for the safe administration of medication. One adult was unaware of the requirement of parents to complete and sign an administration of medication form and to have a second staff member present to witness administration of medication. This practice was at variance with the services administration of medication policy and compromises the safety and wellbeing of children.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The children's play kitchen has been securely fixed to the wall. Furniture and equipment have been added to the daily safety checks and management will monitor the checks.

Infection Control:

2. The services nappy changing policy has been reviewed and staff have been provided with nappy changing training. Management will carry out daily observation of nappy changing practices to ensure procedures are followed.
3. A deep clean of all areas identified during the inspection was completed. Individual, labelled boxes have been provided for each child and staff have been reminded of the correct procedures for the cleaning and storage of soothers. Daily cleaning checklists have been reviewed to ensure that all required areas are included and management will monitor cleaning checklists.

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Administration of Medication:

4. The administration of medication policy has been reviewed with all staff and will be included regularly for review during staff meetings. Management will carry out checks on administration of medication records to ensure procedures are followed.

Supporting documentation submitted

General Safety:

No evidence submitted

Infection Control:

Photograph of soother storage
Nappy changing training certificates
Photographs of sink and microwave
Staff training card

Administration of Medication:

No evidence submitted

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliances identified under Regulation 23 have been adequately addressed.

Part VI - Safety

Regulation 24 - Checking in and out and record of attendance

(3) A registered provider shall ensure that-

(a) no person other than-

(i) pre-school child attending the service,

(ii) a person dropping or collecting such a child,

(iii) an employee, or

(iv) an unpaid worker, can enter the premises without his or her entry being approved by an employee, and

Non-Compliance Information

- (3) (a) The registered provider failed to ensure that entry to the service was appropriately approved by an employee. The inspector was granted access to the service at 9.45am via a ring doorbell system on the side gate. Although access was granted, no staff member verified the inspector's identity or purpose of the visit prior to releasing the gate. Upon entering the premises, it was observed that two doors to the

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service were wide open. The inspector entered the service and remained at the doorway until 9.52 am, when a staff member passing noticed their presence. This compromises the children's safety as unauthorised persons may gain access to the service.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Staff have been reminded that all visitors must be identified and the purpose of their visit verified before they are permitted access to the service and that all entrance doors and gates must remain closed and secured at all times. Reminder notices have been placed on entrance doors and gates throughout the service. Management will monitor entrance doors and gates throughout the day to ensure that they remain closed and secured. Visitor and access procedures will be reviewed with staff during regular staff meetings.

Supporting documentation submitted

Evidence of signage on doors

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 24 has been adequately addressed.