

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DS029
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Name of Service:	Rathfarnham Daycare
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Address of Service:	19-20 Main Street, Rathfarnham, Dublin 14.
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Eircode:	D14 V3H9
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Name of Registered Provider:	Claire Doyle, Tracy Sheridan
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	09/06/2026
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No of pre-school children:	AM	208	PM	207
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Address of the Early Years Inspectorate:	Early Years Inspectorate 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	C. Harte, T. Nelson and LA Webster
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

Rathfarnham Day care provides full day care to children aged 0-6 years old, Monday to Friday from 7:30am to 6:00pm. The service is operated by two registered providers. The service participates in the Early Childhood Care Education (ECCE) programme for 38 weeks of the year. There is a registered school age service in operation on the premises.

Rathfarnham Day care has three separate buildings each with their own sanitary facilities for staff and children. There are shared amenities across the three buildings with a main reception in Building 1, a kitchen in Building 2 and outdoor areas attached to each building.

The service is provided across each building as follows.

- Building 1 - There are five ground floor care rooms in this building. These rooms accommodate children aged 2.5 - 6 years old. The room on the first floor is currently providing ECCE class in the morning and a school age service in the afternoon.
- Building 2 - There are six care rooms all on the ground floor. These accommodate children aged 7 months - 2 years 3 months.
- Building 3 - There are five care rooms accommodating to children aged 1 - 3 years old.

Staffing

The registered providers employ 56 staff to work within the service including the person in charge, deputy person in charge, three administrators, two kitchen staff, a domestic staff member, a caretaker and 47 early years professionals. A total of 52 staff were present on the morning of the inspection. The registered providers do not work directly with the children attending 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

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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.

A sampling process was used to assess compliance under Regulation 19 Health, welfare and development of child and Regulation 21 Equipment and Materials.

As a result, the scope of the inspection included:

Building 1 - Room 1 and Room 2

Building 2 - Toddler 1 and Toddler 3

Building 3 - Junior preschool rooms 1,2,4, and 5.

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.

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) The registered provider ensured that;

- (a) The service had a designated person in charge and named person to deputise as required.**
- (b) Documentary evidence showed either the person in charge or the deputy person in charge were rostered to be present during the operational hours of the service.**
- (c) There was a clear management structure in place and staff were aware of their roles and responsibilities.**
There was a designated team lead present in each building to support day to operations.

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- (2) A review of paperwork and discussion with management showed that 23 new staff have been employed since the last inspection. All of which work directly with the children. The full files of all new staff were reviewed. In addition, Garda vetting for nine staff members whose disclosure was identified as due for renewal was requested for review. The registered provider had completed the following checks:
- (a) Thirty-three written and validated references were available from past employers.
 - (b) Thirteen written and validated references were available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for all 32 staff members. The service also demonstrated compliance with the Early Years Inspectorate Regulatory Notice requiring services to renew Garda vetting every three years.
 - (d) Police vetting was available for 23 adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (3) Evidence was available to show that the procedures required under (2) has been completed prior to the start date of all staff members.
- (4) Evidence was available to show that twenty-two staff members who worked 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 a qualification deemed by the Minister to be equivalent.

Non-Compliance Information

- (4) There was no evidence available to show that one staff member who worked 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 a qualification deemed by the Minister to be equivalent.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The staff member in question completed their Level 5 course on the 1st June 2026. We have received a letter from the college confirming that she has successfully completed and passed the course. The college has advised that the official certificate will be issued at the end of July. In future, we will wait until we have received a copy of the staff member's transcripts and/or qualification before they commence their role with us.

Supporting documentation submitted

Copy of communication.

Staff file checklist.

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Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 9 has been 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.

Compliance Information

- (1) On the day of inspection there were an adequate number of adults available to the children attending the service to meet their care needs.
- There were 48 staff available to children present on the morning of the inspection when the inspector arrived unannounced.
 - The person in charge was available to provide support across the buildings.
- (2) The adult to child ratios were maintained correctly throughout the inspection. A review of the room attendance sheets showed there were sufficient staff allocated to the care rooms for the numbers of children in attendance.

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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

(1) (b) The following observations are examples of suitable and appropriate care practices of the children:

- The staff were observed to interact with the children in a respectful, warm and sensitive manner using appropriate strategies such as low tones, song, using children's names and asking questions.
- Staff invited children to participate in activities suitable to the age and stage of development within the care rooms.
- Toileting and nappy changing practices were observed to be regular. Staff engaged with the children throughout the care practice. Toileting children were given assistance as necessary.
- Staff explained how children attending sessional hours brought their snack from home and that all other food and meals were supplied by the service. Staff described how they provided for regular meals and snacks each day. This was further evidenced by a review of the three-week menu plan and observation of snack and dinner time. The menu was reflective of the food served on the day.
- Staff were aware of the dietary requirements of the children within their care. There was consideration during mealtimes for dietary requirements including gluten free and vegetarian meals available as well as drink alternatives such as oat milk.
- Signage was displayed reminding parents of the need for suncream on the premises. Staff were observed to ensure the children were appropriately prepared for the play outdoors on the day of inspection. There was a daily schedule for accessing the outdoor areas.

Non-Compliance Information

1. Routine transitions in junior preschool 2 and junior preschool 4 were not carried out in a timely manner which led to children becoming unsettled and upset. The following was observed.
 - The beds were not prepared for children to sleep after their meal in junior preschool 2. It is acknowledged staff made efforts to engage the children however they were observed tired and unsettled. It was confirmed the staff waited twenty minutes for the sleep equipment to arrive.

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- Dinner was delayed in junior preschool 4 as it arrived in the room without a serving spoon to portion out the meals. It is acknowledged the staff member called for it to be brought to the room however during the wait children became frustrated and upset.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- Management will ensure beds are made up in timely manner, and the room practitioners will contact the Team Lead as dinner is finishing to ensure the beds are brought into the room in a timely manner. To ensure there are no delays during the transition to mealtimes, we have purchased additional serving spoons. Management have updated the cover checklist to ensure that beds are dressed each morning and are ready to be brought to the rooms when required. A staff memo has been issued reminding staff to contact the Team Lead just before dinner has finished so that the beds can be brought to the rooms in a timely manner.

Supporting documentation submitted

Staff memo.

Photographic evidence.

Template cover checklist.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance identified under Regulation 19 has been addressed.

Part V - Care of Child in Pre-school Service

Regulation 21 – Equipment and materials

A registered provider shall ensure that there is adequate and suitable furniture, play and work equipment and materials available on the premises of the pre-school service.

Compliance Information

The registered providers ensured there was adequate and suitable furniture and play equipment available, for example:

- The furniture in the rooms was observed to be adequate for the number of children attending, it was appropriate for the age range and stage of development of the children in the rooms, and was well maintained, durable and easy to clean.
- The toys and equipment were laid out on low level shelving, visible to the children, and were grouped in themed areas. There was a variety of play materials and equipment which facilitated a range of play experiences including mark making, small world play, imaginative play and constructing.

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- Each of the themed interest areas were resourced with a range of props and materials to facilitate play.
- The play materials and equipment available to the children was suitable for their age and stage of development.
- There was rest spaces in the care rooms where children could take a break from activities.
- The outdoor environments were resourced with sufficient and adequate equipment for the number of children in attendance and it was appropriate for their age range and stage of development.

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:

- Staff conducted head counts when moving with the children through the service to the sanitary areas and garden. In the event a group was split, staff ensured to confirm with their colleague how many children were in their care at that time.
- Waste was inaccessible to children and bins were emptied promptly.
- The kitchen door was observed closed on the day of inspection.
- Finger pinch protectors were in place on doors.
- There was evidence of recent room audit carried out in building 2 to identify potential risks.

Infection Control:

- Windows were open throughout the premises allowing fresh air to circulate.
- Sand used for playing in the outdoor area was covered when in not use.
- Soothers were hygienically stored.
- Nappy creams were individually labelled.
- Cot mattresses were observed to be washable and wipeable.

Administration of Medication:

- Medication was stored in its original box clearly labelled and out of children's reach. A record for expiry was maintained.

Safe Sleep:

- A timely record was maintained for physical checks carried out on sleeping children.

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- Children were provided with suitable sleep facilities based on their age and stage of development in line with safe sleep guidance

Fire Safety:

- Accurate attendance records were maintained supporting safe evacuation from the building in the event of an emergency.

Non-Compliance Information

General Safety:

- In toddler 3 room a low-level press was not adequately secured which posed a potential safety risk to children.
- Water temperatures in toddler 1 room exceeded the maximum allowable temperature of 43°C. This posed a potential safety risk to children. It is acknowledged that when brought to management's attention by the inspector this was addressed.
- A cleaning cloth containing antibacterial spray was accessible to children in the junior preschool 1 care room. This posed a potential safety risk to children.

Infection Control:

- The sofa coverings in room 1 and room 2 and toddler 3 were damaged. This prevented effective cleaning and posed a potential infection control risk.
- A soiled nappy changing mat was observed in use in building 2 second sanitary area. This posed a potential risk of cross contamination.
- The wooden ledge in the second sanitary area in use in building 2 was unfinished. This prevented effective cleaning and posed an infection control risk.
- Staff were observed to place baby wipes over the wooden ledge in the sanitary area used by Toddler 2 in preparation for nappy changing. This was not in line with service policy and posed a potential infection control risk.
- The storage of water beakers for Junior Preschool 1 posed an infection control risk. Beakers were observed stacked in a large tray with mouth pieces touching, spilled water gathered at the bottom and only a portion of the beakers labelled.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. The door was secured with a new safety lock on the morning of the 10 June. The room daily risk assessment has been updated to ensure that all press locks are checked and confirmed to be in good working order. If any press lock is found to be faulty, staff must inform their Team Lead, who will then notify the maintenance staff member to attend and secure it as required.
2. When management were informed that the water temperature was too high at lunchtime, our maintenance staff member adjusted the water heater. Management have updated the daily risk assessment to include a morning check of all water heaters to ensure they are set to the correct temperature.
3. Once this was brought to the attention of the staff team by the inspector, the cloth was removed from the low shelf and returned to its designated storage area in the room, which is out of reach of children. The room daily checklist has been updated to include a check that cleaning cloths are stored correctly. A new sign has also been displayed in the room to remind staff to return cleaning cloths to the designated storage area after use.

Infection Control:

4. All three sofas have been repaired. Two had new zips and stitching completed, and the third was re-covered. Management have updated the room daily risk assessment and monthly room inspection checklist to include a check of all sofas to ensure they are inspected regularly for any signs of damage or wear and tear.
5. Once this was brought to our attention, the changing mat was checked and cleaned immediately to ensure it was maintained to the required standard. Daily spot checks of changing mats have been added to the Team Lead checklist. Staff have also received refresher training on the nappy-changing policy and procedures to ensure they are fully aware of the required standards and practices.
6. The wooden ledges have been replaced, and the work has been completed to ensure they are safe, secure, and maintained to the required standard. Management have updated the daily maintenance checklist to include an inspection of all wooden ledges to ensure they are checked regularly for any signs of damage and maintained to the required standard.
7. All staff were informed that placing wipes on the ledge was not an acceptable practice. Staff were also reissued with the Nappy Changing Policy and Procedure to ensure they are fully aware of the correct

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procedures and expectations. As part of management daily spot checks, we have added an observation to monitor where wipes are placed to ensure they are stored correctly and that the required procedures are being followed.

8. Staff have relabelled all children's beakers and were reminded to use the appropriate water bottle storage boxes for their room. Management have updated the daily room risk assessment and the Team Lead daily checklist to include checks of children's water beaker storage and labelling, ensuring that hygiene and identification standards are consistently maintained.

Supporting documentation submitted

General Safety:

Photographic evidence.

Template Daily Risk Assessment.

Completed water temperature log.

Infection Control:

Photographic evidence.

Template monthly inspection sheet.

Staff training record.

Template team lead checklist.

Template maintenance checklist.

Summary Comment

The inspector has reviewed the actions and evidence submitted. The noncompliance's identified under Regulation 23 have been addressed.