

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DS061
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Name of Service:	Busy Kids Creche
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Address of Service:	Hansted, Newcastle Road, Lucan, Co. Dublin
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Eircode:	K78 K023
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Name of Registered Provider:	James Moore
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Service type:	Full Day
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Date of Inspection:	08/07/2026
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No of pre-school children:	AM	52	PM	48
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Address of the Early Years Inspectorate:	The Early Years Inspectorate- Tusla Child and Family Agency, Loughlinstown Health Centre, Loughlinstown, County Dublin.
Inspection undertaken by:	Olivia Quill and Linda Magee
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

Busy Kids Creche is one of fourteen privately owned services operated by the registered provider. The Early Years Service is registered to provide full day care to preschool children aged 0 to 6 years. A school aged service is also provided. The service is open Monday to Friday from 7.30am to 6pm.

The service is located in an urban residential area of west Dublin. The premises is a purpose-built single storey building. Six care rooms and a separate cot room are provided for pre-school children. The Baby room caters for children aged 9 months to 1 year of age. The Wobbler room caters for children from 1 year of age. The Toddler room caters for children 2 to 3 years of age. Pre-school 1 and pre-school 3 rooms caters for children aged 3 to 5 years and pre-school 2 caters for children aged 2.5- 3 years of age. An outdoor play area for children was available on the premises.

Staffing

In total twenty-three staff are employed including two cooks. On the day of inspection thirteen staff worked directly with the children. The designated person in charge was available to provide additional support for staff. The registered provider does not work directly with the children and was not present on the day of inspection. The area manager arrived during the inspection and provided assistance to staff in the care room and was present for the feedback meeting.

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

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

However, on inspection additional non-compliance which posed a risk was identified under Regulation 29 Premises. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under regulation 19 (1)(b) Health, welfare and development of child and Regulation 16(1) Record in relation to pre-school service. As a result, the scope of the inspection included the Baby, Wobblers, Toddlers and Preschool 2 rooms. It was noted that the internal environment was warm and as it was also a hot day externally, the inspectors additionally recorded and assessed the temperatures of all care rooms and sleep rooms as part of the inspection.

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, area manager, staff and children who were present on the day of the inspection.

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Statutory Notices

Notice	Date Served	Detail
Improvement Notice IN 3841	08/07/2026	The room temperature in Preschool room 2 when six children aged 2-3 years were sleeping was recorded at 27.8- 28.1 degrees Celsius. The room temperature in the Wobbler room when eight children aged 19 months – 23 months were sleeping was recorded between 24.9 degrees Celsius and 25.2 degrees Celsius. The room temperature in Preschool 1 when thirteen children aged 3 years were playing was recorded at 28.7 degrees Celsius. The room temperature in Preschool 3 care room when two children aged 2 years and twelve children aged 3 years were present was 28.3 degrees Celsius.
Status	The registered provider took immediate corrective action which was accepted and addressed the Statutory notice. Preventative actions were submitted by the registered provider which were accepted and addressed the statutory notice.	

Part III – Management and Staff

Regulation 9 – Management and recruitment

(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

(2) Following a discussion with the person in charge and review of the staff roster and records, it was confirmed that three staff members commenced employment in the service since Regulation 9 was last inspected on the 7 of April 2025. Documentation required under Regulation 9 (2), (3), (4) was reviewed in respect of the five staff members including the files for two staff members who were employed in the school age service as detailed below. In addition, Garda vetting for four staff members whose disclosures were identified as due for renewal were requested for review.

(a) Eight written validated references were available from past employers.

(c) Garda vetting disclosures had been obtained for five staff members. However, the service did not adhere to the re-vetting timeframes for all staff 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.

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(d) Documentary evidence showed that two staff members had lived in a state other than Ireland for more than six consecutive months as adults. International police vetting from the relevant countries was available for these adults.

(4) Documentation was available to show that the two staff members employed to work directly with children attending the service held at least a major award in Early Childhood Care and Education at Level 5 on the National Framework of Qualifications. One staff member was employed for ancillary duties and did not require a qualification.

Non-Compliance Information

(2)(a), (b) There were no written validated references available for one staff member.

(3) Documentation reviewed evidenced that the procedures specified above under 9(2) had not been carried out prior to a staff member commencing employment in the service as detailed above.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(2)(a), (b) The employee in question was asked to produce additional references pertaining to their most recent employment. Although the company is no longer in existence, they were able to contact the manager that was employed with the company at the time and obtain a reference through this channel. Another reference was also obtained from previous childminding position held.

Safe recruitment policy and procedure refresher training with the management team. No onboarding of any team member will take place until the full personnel file checklist has been reviewed and completed in full by the Area Manager. All HR files are currently being uploaded onto our new Health box HR system in order to centralise all documents for review by HR GM and Area Managers. Quarterly Audit to be prioritised and scheduled regularly and be completed in full, to help ensure compliance across the service.

(3) Review and retraining of the Safe Recruitment Policy was delivered by the Area Manager to the Management Team. The service Manager has since received and validated 2 written references for the staff member. When a new starter is joining the organisation, Management will upload the new team members personnel file up onto the HR system and the onboarding process won't be completed until all documents are uploaded and reviewed by the Area Manager. Spot checks and Personnel File audits will be completed by the Area Manager.

Supporting documentation submitted

Copy of references provided.

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Summary Comment

The corrective and preventive actions and evidence submitted by the registered provider was reviewed by the inspector and deemed to meet the Regulatory requirement.

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) An adequate number of adults were working directly with the children at all times during the inspection.

(2) The minimum ratio of adults to children for full day care services was adhered to at all times during the inspection. There were 52 children attending the service being supervised by 13 adults on the day of inspection.

(8)(a) There were at least two staff members on the premises throughout the inspection. The staff roster provided for a minimum of two staff to be on the premises at all times of opening.

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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

- (1)
- (h) Details of children's attendance the time of arrival and departure was recorded.
 - (i) A staff roster was available.
 - (j) A written record was available of medication given and signed parental consent was provided.
 - (k) Details of accidents and incidents were recorded and there was evidence available that parents were informed following an accident or incident involving their child.

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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) Appropriate and suitable care practices were in place, as evidenced by the following:

Staff interacted warmly and respectfully with the children in their care. Some babies and young children were settling into the service and were observed to be upset or crying. Staff responded sensitively by comforting the children, holding them, and speaking softly and reassuringly to support their emotional wellbeing.

During mealtimes, younger children were seated in highchairs, with staff sitting at their level to promote positive interactions and maintain good eye contact. Babies were provided with spoons to encourage the development of self-feeding skills, while staff offered assistance as required. Older children were offered a hot meal of meatballs with mashed potato, with a pasta dish available as an alternative option. Drinking water was provided with meals and water stations were accessible in all care rooms throughout the day.

Nappy changing was carried out as required. These routines were observed to be calm and nurturing, with staff engaging children through warm interactions, including singing during care routines. Older children were observed to use the toilet independently.

Throughout the day, children participated in a variety of age-appropriate activities, including tabletop activities, completing jigsaw puzzles, and imaginative play in the home corner. Staff were observed sitting on the floor with the children, actively engaging in their play and supporting their learning.

Children were provided with opportunities to rest in accordance with their individual needs. Babies were placed in cots, and staff supported them in settling by removing outer clothing where appropriate and providing soothers for those who used them. Low level beds were available for older children.

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All children had opportunities to access and enjoy the outdoor play area during the day. A variety of equipment was available including slides, a climbing frame, balls and push along toys.

Staff reported that they communicate with parents daily at drop-off and collection times. In addition, an electronic application is used to share information and photographs with parents about their child's day, including details relating to sleep, meals, and activities.

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 entrance door to the service was secured to prevent unauthorised access and to prevent children exiting unsupervised.
- Cleaning products, medication and hazardous materials were stored securely out of reach of the children.
- There were no trailing flexes or cables observed.
- The kitchen and storage facilities were inaccessible to children.

Infection Control:

- Liquid soap, warm water and paper towels were available to facilitate hand washing. Children were supported to wash their hands before meals.
- Staff were observed following the nappy changing policy and procedure for the service when changing children's nappies.
- Pedal operated bins were in use in care rooms and the sanitary areas to support the safe disposal of waste.

Safe Sleep:

- Staff when spoken to were knowledgeable on safe sleep guidelines. All sleeping children were physically monitored and sleep checks were recorded every ten minutes by staff.

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Fire Safety:

- Fire exits were clearly marked and free from obstructions.
- Staff when spoken to were able to detail the procedure to safely evacuate children from the service in the event of a fire.

Non-Compliance Information

General Safety:

See Statutory Notice section in relation to Improvement Notice 3841 served.

1. Garda vetting was available for four staff members. However, vetting disclosures for three of these staff were not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'. This non-compliance was identified on the last inspection on the 7 of April 2025. The corrective and preventive actions submitted failed to address the non-compliance.
2. In the outdoor play area to the rear of the premises a hole was observed on the rubber playground surface posing a potential trip hazard.

Infection Control:

3. In preschool 2 room the cover on the large leather sofa was torn and could not be clean effectively for inspection control purposes.
4. In the baby cot room there were no waterproof mattress covers provided on the eight cots posing a potential infection control risk.

Administration of Medication:

5. A sample of ten medication forms were reviewed. Four of these forms did not have a witness signature. This posed a potential safety risk and was not in line with the services administration of medication policy.

Safe Sleep:

6. There were no documented sleep plans that included a risk assessment for the six children, aged under 2 years, who were sleeping on floor beds.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. Renewal applications had been submitted before the date of the inspection – however not in the correct time frame. Two of the three have been returned to the service since the inspection. Renewal reminder dates have been uploaded to the service Google calendar with a 3-month notice period for each staff

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member. Any/all new team member's Garda Vetting renewal dates will be input to the calendar – this has also been added to the Personnel File checklist for any new starters.

The Service Manager will review the Garda Vetting calendar each month to avoid any reminders being missed, as part of a compliance review to identify any upcoming renewals for all mandatory training.

These checks will be included in the quarterly audits of personnel files and the Garda Vetting Register to verify compliance across the service for review by the Area Manager.

2. The area has been cordoned off awaiting repair works scheduled for week commencing 03/08/2026. Team members are stationed in different "zones" in the garden area ensuring no one removes the cordon or plays near the area – the area is identifiable to the children in the garden as the Water Station. Regular repair/maintenance works will take place – the Outdoor Play Area checklist has been reviewed and retrained to the team. Management will be alerted immediately of any hazards identified.

Infection Control:

3. The chair was removed from the classroom immediately. Regular checks of any textiles in the classroom environments will be included in the daily checklists for each classroom and quarterly audits of the service going forward.
4. Waterproof mattress covers were purchased and fitted to all eight cots. All mattresses were checked within the service to ensure they comply with the service's infection prevention and control procedures. The Baby Room risk assessment and sleep environment were reviewed to ensure all cots meet regulatory and infection control requirements. Include cots to added to the daily opening checklist requiring staff to confirm that each cot has: Clean mattress in good condition with a waterproof mattress cover, and a clean and fitted cot sheet.

Administration of Medication:

5. Administration of medication within the service is explicitly completed by a member of the Management team. Management and team were reminded of the requirement for a witness signature in the physical book when administering medication, in accordance with the service's Medication Administration Policy. A full audit of all current medication records was completed to identify and rectify any further documentation errors. The medication administration procedure was reviewed with the team to reinforce the requirement for accurate and completed record keeping.

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Provide refresher training for the team on the Medication Administration Policy, with particular emphasis on obtaining and recording witness signatures where required.

Review of accident and medication books will be added to the daily closing checklist and the team in the room will review records daily at the end of each shift, to ensure documentation is complete and address any issues immediately. Management will not leave the classroom until both signatures are complete.

Safe Sleep:

- Individual permissions and sleep plans were completed for all six children under two years of age who were sleeping on floor beds.

Each child's developmental stage, mobility, ability to safely use a floor bed and individual sleep needs were assessed before continuing the use of a floor bed.

All sleep environments and arrangements were reviewed to ensure they met the requirements of the service's Safe Sleep Policy and Tusla's Safe Sleep Guidance.

Provide refresher training on Tusla's Safe Sleep Guidance and the service's Safe Sleep Policy, including the requirements for documenting permission and safe sleep plans for children under two years.

Management will ensure that any child who will be moving up to the room will have all the correct documentation completed and ensure parents are consulted regarding the transition and that their agreement is documented on the child's sleep plan. Include sleep plans and room moves/transitions in monthly Manager audits of children's records to ensure documentation remains complete and up to date.

Supporting documentation submitted

General Safety:

Written evidence.

Infection Control:

Written and photographic evidence.

Administration of Medication:

Written evidence.

Safe Sleep:

Written evidence.

Summary Comment

The corrective and preventive actions and evidence submitted by the registered provider was reviewed by the inspector and deemed to meet the Regulatory requirement.

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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,

Non-Compliance Information

- (d) The registered did not ensure the premises was maintained as evidenced by;
1. In preschool 2 room, the two sanitary units were damaged and required repair.
 2. In the wobbler room, two shelving units were chipped and worn.
 3. In preschool 2 room, four of the ceiling tiles displayed water staining.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

(d) The damaged sanitary units were assessed and arrangements were made for repair/replacement. The repair works were completed on 09/07/2026 and the sanitary units were checked to ensure they were fully functional, safe, and fit for use.

The maintenance reporting process has been reinforced to ensure any damage to children's facilities is reported immediately and actioned accordingly.

Staff have been reminded of their responsibility to report any damage or hazards immediately and continue logging until the problem has been rectified.

Supporting documentation submitted

Written and photographic evidence.

Summary Comment

The corrective and preventive actions and evidence submitted by the registered provider was reviewed by the inspector and deemed to meet the Regulatory requirement.