

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2015DY131
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Name of Service:	LYCS Early Years Education Service
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Address of Service:	Rory O Connor House, Hardwicke Street, Dublin 1.
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Eircode:	D01 HK25
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Name of Registered Provider:	Sarah Kelleher
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	23/06/2026
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No of pre-school children:	AM	40	PM	35
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Address of the Early Years Inspectorate:	Early Years Inspectorate Area 1 2 nd Floor, Unit 4/5 The Nexus Building Blanchardstown Corporate Park Ballycoolin Dublin 15 D15 CF9K
Inspection undertaken by:	C. Harte
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

LYCS Early Years Education Service is a community run service located in the inner city in North Dublin. The service opens from 9:00am-5.00pm Monday to Friday providing full-time, part-time, and sessional care and education to children aged 0-6 years and participates in the Early Childhood Care and Education (ECCE) scheme. The service consists of five care rooms; Baby room, Toddler room, Tweenie room, pre-ECCE room and ECCE room. On the first floor there is also additional rooms used for gross motor activities and a small sensory room. The premises also includes a staff room, office kitchen and sanitary facilities. An enclosed outdoor area is located to the side of the building.

Staffing

The service employs 20 staff including 5 staff employed through the community employment (CE) scheme; a manager and assistant manager, fifteen staff work directly with the children, a receptionist, a cook and a cleaner. The registered provider does not work directly in the service. On the day of the inspection there was 19 adults present including the person in charge, deputy person in charge, cook, cleaner, receptionist and 14 staff working directly with children.

Methodology

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

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

The findings on inspection are based on:

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

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

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A sampling process was used to assess compliance under Regulation 19 Health, Welfare and Development of Child. As a result, the inspection included the Pre-ECCE and Preschool rooms.

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

This inspection was triggered by information received by the inspectorate.

Acknowledgments

The inspector wishes 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*

(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;*

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 the day of inspection.

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- (2) A review of paperwork and discussion with management showed that seven new staff have been employed since the last inspection. The full files of all new staff were reviewed. A review of records maintained by Tusla demonstrated that six existing employees had garda vetting disclosures which had expired, updated vetting disclosures were also requested for review as part of the inspection process. The registered provider had completed the following checks:
- (a) Six written and validated references were available from past employers.
 - (b) Two written and validated references were available from a source other than a past employer.
 - (c) Garda vetting disclosures had been obtained for 13 staff. However, the service did not adhere to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Please refer to the information outlined under regulation 23 of this report.
 - (d) Police vetting was available for two adults who had lived in a country other than Ireland for a period of six months or more as an adult.
- (4) Evidence was available to show that three adults 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

- (2) (a)(b) Three adults had no references available. Full documented checks must be completed and available in staff files prior to a person commencing in order to establish they are appropriate to have access to children.
- (3) The registered provider did not ensure that the checks required under (2) were completed in advance of the start date of five staff members. Full documented checks must be completed and available in staff files prior to a person commencing in order to establish they are appropriate to have access to children.
- (7) (a) The documentary evidence available did not adequately establish that all staff members received appropriate information and training on service policies and procedures. Induction records were only available for three staff on the day of inspection. This is not in line with service policy that details persons will read all policies and procedures including the Child Safeguarding Policy and handbook and sign to say that they have read and understood these documents.
- It is acknowledged that a sample of supervision records for 6 staff members were made available for review.

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Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

- (2) (a)(b) The missing documentation has now been obtained and placed in the relevant staff files. A full staff file check has also been completed to ensure that the required records are present, up to date and appropriately maintained. An Excel tracking system has been implemented to monitor each staff member's required documentation and identify any outstanding or expiring records. The tracker will be reviewed alongside the regular staff file checks, allowing any gaps to be identified and addressed promptly.
- (3) All staff files were reviewed to identify any missing or outstanding documentation. A staff file tracker has now been put in place to monitor the required documentation for each staff member. In addition, a full staff file review will be completed before each staff member's start date to ensure all required documentation has been received, checked and recorded prior to commencement. This process will provide a consistent system for checking staff files and help prevent the same non-compliance from recurring
- (7) (a) All current staff are now being taken through a new induction process with their manager. This ensures that each staff member has received the required information, understands their role and responsibilities, and has had the opportunity to ask questions and clarify any areas they are unsure about. The completion of each induction will be recorded and retained as part of the staff member's records. A clear staff induction policy and procedure will be implemented to ensure that all new staff receive a consistent and thorough induction. A set timeframe will be established for completing inductions, with managers responsible for ensuring that induction is completed within the required timeframe.

Supporting documentation submitted

Staff file tracker.

Summary Comment

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

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Part III – Management and Staff

Regulation 11 - Staffing levels

(1) Subject to this Regulation, a registered provider shall ensure that there is at all times an adequate number of adults working directly with the children attending the pre-school service.

(2) Subject to paragraphs (4) and (5), a registered provider of a full day care service or a part-time day care service shall ensure that at all times the minimum ratio of adults to children specified in column (3) of Part 1 of Schedule 6 opposite a particular reference number specified in column (1) of that Part in respect of the age range of the children specified in column (2) thereof at that reference number is satisfied.

Compliance Information

(1) On the day of inspection there were an adequate number of adults working directly with the children attending the service to meet their care needs.

(2) The adult to child ratios were correct when the inspector arrived unannounced to the service and throughout the inspection. Twelve qualified staff were allocated to work directly with 40 children present. The person in charge and deputy person in charge was available in a supernumerary capacity to assist in the care rooms as required.

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 observed, as evidenced by the following:

- Staff were observed to use positive engagement strategies such as praise, encouragement, child friendly tones, offering solutions and suggestions. These strategies facilitated and promoted positive behaviours in children.
- Staff joined children in play and discussion and were observed to check in with children within their care room throughout the inspection.

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- Staff discussed with the inspector the changes in their routine to accommodate for the warm weather. Staff were observed to apply sun cream for children prior to outdoor play and explained how water play was also in use to support children to feel comfortable.
- Drinks were made available for the children both in the care rooms and outdoor play area. Staff responded promptly to children's cues for toileting and drinks.
- Staff were observed to verbally indicate the transitions during the day; for example, from play to mealtime and movement to other play spaces within the service.
- Mealtimes were observed to be regular with additional portions made available for the children. The children were given ample time to enjoy their meal, and staff were knowledgeable of their meal preferences.
- Parent and family engagement was facilitated by the sharing of information via a software application and conversation at drop-off and collection.

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:

- Daily room temperature and water temperature records were displayed and completed up to date.
- The weather was warm on the day of inspection and management was observed to regularly check in with staff regarding rooms temperatures and children's time spent outdoors.
- Equipment and resources were observed maintained and suitable for use.
- Sharp objects were inaccessible to children.
- Finger pinch protectors were observed fitted on doors.
- The garden area was observed clean, maintained and suitable for use.

Infection Control:

- Adequate ventilation was supported by plug-in air-conditioning units and opened windows allowing air to circulate.
- Foot pedal operated bins were available in sanitary areas to support effective hand hygiene.

Safe Sleep:

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- Cot mattresses were observed suitable for use.
- Staff maintained a record of ten-minute physical sleep checks for sleeping children.

Fire Safety:

- Fire evacuation routes were observed clear of obstruction on the day of inspection. Staff demonstrated how to access the exit route from the garden area.

Outing:

- Children attending the playground space outside the service premises were observed to wear hi-visibility vests and staff had a first aid box present.

Non-Compliance Information

General Safety:

1. Garda vetting was available for six staff members. However, these vetting disclosures were not dated within the previous three years in adherence to with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'.
2. Staff belongings were accessible to children in the pre-ecce sanitary area. This posed a potential risk to children's safety.

Administration of Medication:

3. Staff were unclear on the individual care needs of a child attending the service. Staff advised the child may require medication at times during attendance however could not provide definitive information. This posed a risk of inaccurate administration of medication.

Action submitted by the Registered Provider

Corrective & Preventive Action

General Safety:

1. All outstanding Garda vetting applications have been followed up and the required vetting documentation is now being received and recorded. A Garda vetting tracker will be maintained and reviewed regularly by management to ensure that all staff vetting remains up to date and is monitored appropriately.
2. Staff have been reminded that personal belongings must not be left in areas accessible to children and are to be stored appropriately in the designated staff room/lockers. This was communicated directly to staff, and a general reminder was also given at the staff meeting. Management will also continue to remind staff of the requirement to keep personal belongings stored safely and will monitor the staff areas during routine checks to ensure the arrangements are being followed.

Administration of Medication:

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3. Management spoke with the child's parents. The parents were asked to provide the necessary medical information so that staff can clearly understand the child's requirements and respond appropriately if medication is required. Going forward, all children who require medication will have the appropriate medical documentation requested from their parents/guardians. An individual medication/care plan will be put in place for each child who requires medication management. Relevant staff will be made aware of the care plan and their responsibilities, and documentation will be reviewed regularly to ensure that it remains current and reflects the child's needs. Photographic evidence.

Supporting documentation submitted

General Safety:

Vetting tracker.

Staff meeting minutes.

Administration of Medication:

Photographic evidence.

Summary Comment

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

Part VIII - Notifications and Complaints

Regulation 32 – Complaints

- (1) A registered provider shall ensure that the complaints policy of the service specifies-
- (a) the procedure to be followed by a person for the purposes of making a complaint in relation to the service,
 - (b) the manner in which such a complaint shall be dealt with, and
 - (c) the procedures for keeping a person who makes such a complaint informed of the manner in which it is being dealt with.
- (2) A registered provider shall ensure that-
- (a) a record in writing is kept of a complaint made to the provider in respect of the pre-school service, and
 - (b) the complaint is duly dealt with in accordance with the provider's complaints policy.
- (3) A record in writing referred to in paragraph (2)(a) shall-
- (a) include the nature of the complaint and the manner in which the complaint was dealt with, and
 - (b) be open to inspection on the premises by an authorised person.

Compliance Information

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The registered provider ensured the following:

- (1) There was a complaints policy maintained which outlined the following:
 - (a) The procedures to be following when making a complaint.
 - (b) The way complaints would be dealt with.
 - (c) The procedures for keeping the complainant informed on how the complaint is being dealt with.
- (2) The registered provider ensured:
 - (a) A record of complaints was maintained.
 - (b) That complaints were handled in line with the service policy.
- (3) A review of records referred to in (2)(a):
 - (a) Detailed the nature of a complaint and how it was handled.
 - (b) The record was made available on the day of the inspection.