

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2017DR501
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Name of Service:	Cocobee Childcare
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Address of Service:	1/2 Old Bray Road, Cornelscourt, Foxrock, Dublin 18
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Eircode:	D18 XP29
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Name of Registered Provider:	Lorraine Foy, Lynn Ruddle, Loraine Cahill
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Service type:	Full Day
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Date of Inspection:	28/04/2026
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No of pre-school children:	AM	57	PM	57
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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 and O Quill
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).

Early Years Inspectorate Regulatory Report

Pre School

Description of service

Cocobee Childcare is a privately owned service located in an urban area in Foxrock, South County Dublin. The service operates from a purpose built two-storey facility registered to provide full day care to children aged between 0 to 6 years. Opening hours are 8am to 6pm Monday to Friday. Children are allocated to one of five rooms according to their age and two dedicated sleep rooms are available for children attending the Baby and Wobbler rooms. Additionally, the service has a fully enclosed outdoor space to the rear of the premises.

Staffing

There are currently 16 staff members employed to work in the service, including two managers. When the inspectors arrived at the service there were 13 staff members present. After the inspection commenced, an adult rostered to be on annual leave and a staff member from another service owned by the registered provider also not rostered to be working in the service arrived to work in the service. The registered providers do not work in the service and the operations manager arrived to facilitate the inspection.

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.

Early Years Inspectorate Regulatory Report

Pre School

The inspection focused on an examination of compliance under Regulation 9,11,19,23,25 and 26; however, on inspection additional non-compliance which posed a risk was identified under Regulation 8. These findings are outlined within the relevant regulations within this report.

A sampling process was used to assess compliance under Regulation 19--Health, welfare and development of child. As a result, the scope of the inspection included the Wobbler, Toddler, Pre Montessori and Senior Montessori 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

A referral was made to Services Operating Outside of Registration (SOORS). Please refer to the information outlined under Regulation 8 in this report.

Acknowledgments

The inspectors wish to acknowledge the cooperation of the operations manager, two managers, staff and children who were present on the day of the inspection.

Early Years Inspectorate Regulatory Report

Pre School

Part II - Registration and Register

Regulation 8 - Notification of change in circumstances

(1) A registered provider of a pre-school service other than a temporary pre-school service shall, subject to paragraph (3), notify the Agency in writing of any proposed change in the details in relation to the pre-school service contained in the register pursuant to section 58C(2) of the Act or Regulation 7(2) at least 60 days before it is proposed that the change would take effect.

Non-Compliance Information

The registered providers failed to notify the agency of a change in the person in charge which occurred in December 2025. The agency must be informed of any such change at least sixty days before the proposed change.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered providers submitted the following corrective and preventative actions:

All of the required documentation relating the change in circumstances for the person in charge were submitted to Tusla. Management has reviewed internal compliance procedures and will ensure that any future changes requiring Tusla notification are submitted within the required timeframe to prevent recurrence.

Supporting documentation submitted

Evidence of change in circumstances submission

Evidence of response to SOORS

Summary Comment

The inspector has reviewed the actions and evidence submitted. The non-compliance identified under Regulation 8 has been adequately addressed.

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.*

Early Years Inspectorate Regulatory Report

Pre School

(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-

(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

(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)
- (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 inspectors arrived unannounced at the service.
 - (c) The service had a clear management structure and staff were aware of their own roles and responsibilities.
- (2) During discussions with the person in charge, it was confirmed that no new staff members were currently working in the service. Garda vetting for four adults whose disclosures were identified as due for renewal were requested for review.
- (c) Garda vetting disclosures had been obtained for three adults. However, the re-vetting timeframe was not met for one adult 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.

Non-Compliance Information

(4) The registered providers did not ensure that all adults working directly with the children were appropriately qualified. The inspectors observed that one adult providing direct care to children in the Toddler room on the day of the inspection did not hold a qualification. Additionally, staff reported that the adult had provided relief cover in another care room on 24 April 2026. This regulatory requirement was non-compliant for this adult on previous inspections dated 29 May 2023, 11 June 2024 and 30 June 2025. The preventive actions submitted following these inspections have not prevented the non-compliance from recurring.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered providers submitted the following corrective and preventative actions:

Early Years Inspectorate Regulatory Report

Pre School

The staff member is not permitted to work in ratio or provide unsupervised direct care to children. The individual will only work in a support capacity and will not be counted towards regulatory staffing requirements until an appropriate qualification is obtained and recognised. The staff member is currently on their fourth module and is scheduled to complete the course in October. The service has reviewed all room rosters to ensure that only qualified staff are assigned to positions involving direct care of children and counted in ratio. Relief and cover staff will not be assigned to rooms until their qualification status has been verified. Qualification compliance will be reviewed regularly by management and is included as part of the staffing and recruitment procedures.

Supporting documentation submitted

Evidence of staff members completed modules

Summary Comment

The actions have been deemed appropriate in addressing the non-compliance. The effectiveness of the actions will be assessed on the next inspection.

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

- (2) The minimum ratio of adults to children was maintained in the Baby, Wobbler and Toddler rooms on the day of inspection. In the Senior Montessori room, the minimum adult: child ratio was maintained from 10:28am when one child went home leaving 16 children with two staff.
- (8) The roster provided to the inspectors 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.

Early Years Inspectorate Regulatory Report

Pre School

Non-Compliance Information

- (1) An adequate number of adults were not working directly with the children attending the service at all times during the inspection as detailed below.
- (2) The registered providers did not ensure that the minimum ratio of adults to children was maintained in the service at all times. An insufficient number of adults were available to the children attending in the Junior and Senior Montessori rooms during the morning of inspection. Additionally, a review of documentation available and conversation with staff highlighted that the rooms were also out of ratio on the morning of 24 April 2026 as outlined below:

28 April 2026

- Staff stated that Junior Montessori and Senior Montessori join rooms until a third staff member arrives at 8.45 am. Documentation available for review evidenced that the ratios increased from 16 to 19 between 8.39 and 8.45am during which time there was 2 staff present. These children were in the 3 to 6-year age range attending on a full day care basis; the minimum ratio of adults to children for this age range is 1:8.
- Between 10.08 and 10.28 am the inspectors observed that there were 17 children present with 2 adults in the senior Montessori room.

24 April 2026

- Documentation reviewed evidenced that 2 adults were rostered to care for the Junior Montessori children and Senior Montessori children until 9am. Between 8.23 and 9.00 am the ratio increased from 16 to 20 children.

When the third staff member arrived at 9am and the rooms split there were 2 adults caring for 17 children all of whom were attending the Senior Montessori room on a full-time basis.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

The registered providers submitted the following corrective and preventive actions:

An immediate review of staffing arrangements was carried out following the inspection. Morning rosters have been adjusted to ensure sufficient staff are available during arrival times and rooms will not be combined where this would result in ratios being exceeded. Management will continue to monitor attendance and staffing levels throughout the day to ensure ratios are maintained at all times. Where a staff member is delayed or absent, relief staff will be contacted immediately and deployed without delay to maintain ratios.

Early Years Inspectorate Regulatory Report

Pre School

Supporting documentation submitted

No evidence submitted

Summary Comment

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

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-

(a) each child's learning, development and well-being is facilitated within the daily life of the pre-school service through the provision of the appropriate activities, interaction, materials and equipment, having regard to the age and stage of development of the child, and

Compliance Information

The inspectors observed that each child's learning, development and wellbeing were facilitated in the service as outlined below:

Staff reported that the service provides breakfast and a hot meal, and children bring a morning and afternoon snack from home. Mealtime was observed to be a calm, relaxed experience for children. Staff sat with the children and engaged in conversation, supporting the development of their social skills. Staff provided children with time to eat their meal at their own pace and offered support where required. Drinking water was available to children and offered with meals and during outdoor play. Staff tended to children's personal care needs in a respectful and timely manner. Children's nappies were changed on a schedule and as needed, with staff providing them with advance notice ensuring it was a positive experience. Older children were observed to use the toilet independently and staff remained close by to provide support and remind children to wash their hands.

Young children were provided with an opportunity to rest at a designated time after lunch, and staff reported that children could rest outside of the designated time if required. Staff were observed to sit with children and offer comfort and support during their transition to sleep, speaking in soothing tones to promote children's sense of security. Rest areas with rugs and child size seating were available in each of the care rooms, and children were observed to use the space to take a break from activities during the day. Children were observed to spend time outdoors throughout the inspection and were appropriately dressed for the weather. Staff were observed to be actively involved in children's play during their time outdoors, for example, they sang songs and played games and children were free to opt in and out of the games as they pleased.

Early Years Inspectorate Regulatory Report

Pre School

Staff were observed to be familiar with children and interacted with them in a warm and friendly manner. They took the time to come down to the children's level, make eye contact and communicated in a way that was appropriate to the child's age and stage of development. Staff reported that information is shared regularly with parents/guardians regarding care, development and daily experiences.

The indoor environments were laid out with low level open shelving supporting children to access play materials independently, move freely around the care room and engage in play in groups or independently. Play was child-led, and children had access to small world materials, mark making materials for fine motor development, construction play, role play which allows children to act out real life experiences, transport which can support exploratory play and specialist Montessori equipment. Child size tables and chairs were available to support children's comfort while eating meals and participating in tabletop activities. The outdoor environment provided children with opportunities for physical activity. The space was equipped with materials to support the development of children's gross motor skills, coordination, and risk taking.

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 adequately secured to prevent unauthorised persons from entering and to ensure children could not exit unsupervised.
- Cleaning agents and medication were stored safely out of children's reach.
- The staircases were adequately lit, the floor covering was non-slip, and appropriate handrails were in place.
- No heavy furniture was observed at a height that could pose a tipping risk to children.

Infection Control:

- Pedal operated bins were in use in the sanitary areas and care rooms to support the safe disposal of waste.
- The premises and equipment were clean and well maintained; and cleaning schedules were available for review outlining cleaning tasks.
- Children's soothers were labelled and stored in individual containers and sterilised daily and as required.

Early Years Inspectorate Regulatory Report

Pre School

- Individual bed linen was provided for children requiring sleep and staff stated these were washed on a weekly basis and as needed.

Administration of Medication:

- Staff adequately detailed the procedures to follow when administering medication. This included obtaining written parent/guardian consent; having a second staff member present as a witness and making a record.

Safe Sleep:

- Standard cots and low-level beds were available for sleep and were used in accordance with children's age.
- The temperature of the rooms where children slept were maintained at the required temperature range.
- Staff were observed to carry out physical checks on sleeping children every ten minutes.
- Sleep logs were available for review, detailing the room temperature, breathing pattern, colour and position of the child.

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 clearly marked.

Non-Compliance Information

General Safety:

- Garda vetting was available for one staff member. However, the vetting disclosure was not dated within the previous three years in adherence with the Early Years Inspectorate Regulatory Notice 'EYI-RN12.3 Renewal of Garda Vetting'. The staff member's Garda vetting expired on 19 April 2026, it is acknowledged that the staff member's application was submitted to the relevant organisation on the 16 March 2026 and evidence was available to demonstrate that the staff member had contacted the organisation in an attempt to obtain the vetting which is currently still in progress. The staff member informed the inspectors that they have not been working directly with the children since the vetting expired.
- A cable in the baby room cot room was not safely attached to the wall. A cable from a camera was hanging directly behind a cot which had been used by a child during the morning of the inspection. It is acknowledged that the cable was removed when the inspector alerted one of the managers to the concern.

Early Years Inspectorate Regulatory Report

Pre School

3. There was a significant tear in the artificial grass in the outdoor space used by the Junior Montessori room on the day of inspection. The tear posed a trip hazard to children playing in the space.
4. A wooden blackboard in an outdoor space used by the Wobbler room had a hole in the centre with rough edges posing a potential risk of injury to a child.
5. A wooden play structure in an outdoor area used by the Senior Montessori room was damaged in one section leaving rough jagged edges posing a risk of injury to a child.

Infection Control:

6. Children's hands were not washed in the Toddler room following nappy changing. This practice is at variance with the services nappy changing policy and poses a risk of the spread of infection.
7. Vinyl furniture and play equipment was torn with the internal foam exposed as outlined below:
 - Child size seating in the outdoor area
 - Child size seating, a ramp and the surround of the ball pool in the Wobbler room
 - Ramp in the Baby room

The exposed foam is porous and as such cannot be effectively cleaned posing a risk of the spread of infection.

Fire Safety:

8. The inspectors observed that fire doors in the Junior Montessori room and the Senior Montessori room were held open. Both doors displayed signage stating fire door keep shut. Staff reported that the doors are kept open at all times to allow children to access the toilet. This practice compromises fire safety measures and poses a potential safety risk.

Action submitted by the Registered Provider

Corrective & Preventive Actions

General Safety:

The registered providers submitted the following corrective and preventative actions:

1. Garda vetting has been obtained and added to the staff members file. A Garda Vetting monitoring process has been implemented which records vetting issue dates and renewal due dates for all staff. Management will review the register monthly and renewal applications will be submitted at least six months in advance of expiry where possible. The person in charge will monitor outstanding applications and maintain documented follow-up correspondence with Garda Vetting to ensure timely completion.

Early Years Inspectorate Regulatory Report

Pre School

2. The cable identified by the inspector was removed immediately upon notification. An environmental inspection was conducted throughout the service to identify and rectify any similar hazards. Daily room safety checks have been updated to include inspection of all electrical equipment, cameras and associated cabling. Staff have been reminded of their responsibility to report and address environmental hazards immediately.
3. The area was immediately closed off to children upon identification of the hazard. The necessary repairs were completed. Outdoor play areas are included in the service's routine health and safety inspections and maintenance programme. Any hazards identified will be addressed immediately and recorded in the maintenance log.
4. The area was immediately closed off to children upon identification of the hazard and the outdoor blackboard was removed. All outdoor equipment is inspected regularly as part of the service's health and safety and maintenance procedures. Any damaged equipment identified will be removed from use immediately until repaired or replaced.
5. The pirate ship area was immediately closed off to children. The necessary repairs were completed and the equipment was only returned to use once it was confirmed safe. All outdoor equipment is inspected regularly as part of the service's health and safety and maintenance procedures. Any damaged equipment identified will be removed from use immediately until repaired or replaced.

Infection Control:

6. All staff were immediately reminded of the service's nappy changing policy. All team members have since completed refresher training on infection prevention and control procedures. Management will continue to monitor compliance through regular room observations and infection control audits to ensure procedures are consistently followed.
7. All damaged items identified were immediately removed from use and replaced. This included the seating in the outdoor area, seating and equipment in the Wobbler Room, and the ramp in the Baby Room.

Fire Safety:

8. Following the inspection, staff were instructed that fire doors must remain closed at all times unless fitted with an approved fire safety hold-open device. The practice of holding the fire doors open to facilitate children's access to the toilet ceased immediately and the doors are now being used in accordance with their fire safety function. A review of all fire safety procedures has been completed with staff. Fire door checks have been incorporated into daily health and safety inspections and monthly fire safety audits. Staff have received refresher guidance regarding the importance of maintaining fire safety measures and

Early Years Inspectorate Regulatory Report

Pre School

ensuring that fire doors are not wedged or held open in a manner that compromises fire safety.

Management will continue to monitor compliance through regular environmental and fire safety checks.

Supporting documentation submitted

General Safety:

Garda Vetting disclosure and staff overview document

Photograph evidencing the hazard has been removed

Photograph of the repaired artificial grass

Photograph of the repaired pirate ship

Infection Control:

Nappy changing procedure and evidence confirming staff have been retrained

Photograph of new seating and receipts for additional equipment

Fire Safety:

Photographs of new signage placed on fire doors and evidence confirming staff have been retrained

Summary Comment

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

Part VI - Safety

Regulation 25 - First aid

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

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

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

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

Compliance Information

(1) There was evidence to show that three adults hold certification in First Aid Responder (FAR) training, two of which were rostered to be available to the children on the day of the inspection.

(2)

(a) Suitably equipped first aid boxes were available and stored safely in easily accessible and prominent positions in the care rooms.

Early Years Inspectorate Regulatory Report

Pre School

- (b) The first aid boxes were observed to be readily available to the adults caring for the children attending the service.

Part VI - Safety

Regulation 26 - Fire safety measures

- (1) A registered provider shall ensure that a record in writing is kept of-*
- (a) any fire drill that takes place in the premises, and*
 - (b) the number, type and maintenance record of fire fighting equipment and smoke alarms in the premises.*
- (2) The record referred to in paragraph (1) shall be open to inspection by-*
- (c) an authorised person.*
- (4) A notice of the procedures to be followed in the event of fire shall be displayed in a conspicuous position in the premises.*

Compliance Information

- (1) The registered providers ensured that a record in writing was kept of the following:
- (a) A written record was available detailing fire drills that had taken place in the service. The record showed that the last fire drill took place in March 2026. In addition, there was evidence to show that practice fire drills are carried out on a monthly basis.
 - (b) The number, type and maintenance record of firefighting equipment and smoke alarms on the premises were up to date. Fire extinguishers were service on 19 January 2026 and smoke alarms were serviced on 10 April 2026.
- (2)
- (c) Written records referred to in paragraph (1) were kept onsite and made available to the inspectors upon request.
- (4) The procedures to be followed in the event of a fire were displayed in the care rooms.