

Early Years Inspectorate Regulatory Report

Pre School

TUSLA Identifier:	TU2024DY005
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Name of Service:	Eden Montessori
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Address of Service:	Unit 1, Block 6, St. Clare's Park, Harolds Cross, Dublin 6w.
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Eircode:	D6W TP38
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Name of Registered Provider:	Gillian Deane
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Service type:	Full Day, Part Time, Sessional
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Date of Inspection:	18/05/2026
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No of pre-school children:	AM	54	PM	44
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Address of the Early Years Inspectorate:	Early Years Inspectorate, Tusla Child and Family Agency, Loughlinstown Health Centre, Loughlinstown, County Dublin
Inspection undertaken by:	Olivia Quill, Margaret Bermingham
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

Eden Montessori is registered to provide full day, part time and sessional care for children from 2 to 6 years of age. Part time care is provided from 08:15 to 13:15 and sessional care is provided from 09:00 to 12:30. The service operates from 08:00 to 18:00, Monday to Friday.

The service is located in a purpose-built facility located at ground level within a residential development in Dublin south city. There are four care rooms in the service. The Poppies room caters for children aged 2 years. The Snow drops caters for children 3 to 5 years, Bluebells caters for children aged 2 to 5 years and the Sweetpeas room caters for children aged 3 to 5 years. There is a fully enclosed outdoor space to the rear of the premises.

Staffing

In total 12 staff are employed in the service including the designated person in charge. The registered provider does not work directly with the children. On the day of inspection 11 staff worked directly with the children and the person in charge was available to provide additional support as required.

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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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.

Statutory Notices

Notice	Date Served	Detail
Immediate Action Notice IAN 0081	18/05/2026	Certified translated police vetting was not available for an adult who was working in the service.
Status	The registered provider took immediate corrective action which addressed the risk identified. Preventive actions were submitted by the registered provider which were accepted and addressed the statutory notice.	
Immediate Action Notice IAN 0082	18/05/2026	Certified translated police vetting was not available for an adult who was working in the service
Status	The registered provider took immediate corrective action which addressed the risk identified. Preventive 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

(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.

Compliance Information

(1)

- (a) The service had a person in charge and a named person to deputise.*
- (b) The person in charge was present at all times during the inspection.*
- (2) The inspection focused on a review of files for eight new adults who were employed in the service since the last inspection dated the 21 November 2024. In addition, Garda vetting for one staff member whose disclosure was identified as due for renewal was reviewed as detailed below.*
- (a) Eleven written validated references were provided from past employers.*

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- (b) Five written validated references were provided from a source other than a past employer.
- (c) Garda vetting disclosures had been obtained for eight staff members and Garda vetting and had been renewed for one adult employed in the service in accordance with the Early Years Inspectorate Regulatory Notice, which requires services to renew Garda vetting every three years.
- (d) Documentary evidence showed certified translated international police vetting was available for five staff members had lived in a state other than Ireland for more than six consecutive months as adults.
- (4) Documentation was available to show that the four 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 or above on the National Framework of Qualifications and four staff members had a letter of recognition from the Minister.

Non-Compliance Information

- See Statutory Notice section in relation to Immediate Action Notices IAN 0081 and IAN 0082 served.
- (3) All the required recruitment procedures specified in paragraph (2) had not been completed prior to staff being assigned to work with children. One staff member commenced working in the service on the 26 January and Garda vetting was not obtained until the 30 January 2026.

Corrective & Preventive Action submitted by the Registered Provider

Corrective and Preventive Action

Regarding the two staff members whose Garda Vetting disclosures required certified translations, these translations were obtained the following day and were forwarded by email to the Tusla Inspector without delay.

(3) The service has reviewed and strengthened its recruitment and onboarding procedures to ensure full compliance with TUSLA Regulations. Going forward, all Garda Vetting disclosures and overseas police clearance certificates will be reviewed by management before a staff member commences working with children. Where an overseas police clearance certificate is not issued in English, a certified English translation from a recognised translation service will be obtained before the recruitment process is completed.

In addition, a recruitment checklist has been updated to include verification that all required documentation, including Garda Vetting, overseas police vetting (where applicable), and any certified translations, has been received and reviewed before a staff member is permitted to work directly with children or be included in the adult-to-child ratios.

Where a new employee attends the service before all recruitment documentation has been finalised, they will only participate in induction activities, mandatory training, policy and procedure reviews, and administrative

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orientation under the supervision of management. They will not have unsupervised access to children or be included in staffing ratios until all statutory recruitment requirements have been fully satisfied.

Management will continue to monitor recruitment records regularly to ensure all documentation remains complete and compliant with Tusla requirements.

Supporting documentation submitted

Written records.

Summary Comment

The Corrective and Preventive actions as stated by the registered provider have addressed the non-compliance meeting 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 54 children attending the preschool service being supervised by 11 adults on the day of inspection.

(8)(a) The roster provided to the inspectors by the person in charge showed that a minimum of two adults are on the premises at all times during the operational hours of the service.

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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 observed throughout the inspection. Staff interacted with children in a calm and respectful manner, using soft tones and supportive, encouraging language. Children were engaged in a variety of activities, including Montessori work, and were observed moving freely within the care room, independently selecting activities of interest. Staff provided support and guidance where required, sitting alongside children and assisting them appropriately.

During circle time, staff encouraged conversation and participation. Children and staff sang the alphabet together, after which letters were placed on the floor and children were invited to identify and pick the first letter of their name, supporting early literacy development and learning. A calm and settled atmosphere was evident in each care room. Children appeared familiar and comfortable with their caregivers and addressed staff members by name. Staff reported that they communicate daily with parents during drop-off and collection times, with additional information shared through a digital application.

Staff confirmed that all snacks and meals are provided by the service. Prepared meals are supplied by an external catering company and reconstituted onsite. At lunchtime, children were served a hot meal consisting of mashed potatoes, chicken, vegetables and gravy. Children were afforded sufficient time to enjoy their meal in a relaxed environment. Children brought their own water bottles from home each day. Drinking water and milk was offered with meals and water was also freely accessible at children's level throughout the day. Older children were observed using the toilet independently, while younger children's nappies were changed as required. During these care routines, staff spoke warmly and reassuringly to the children.

Children were provided with an opportunity to rest following their meal. In the Poppies room, staff prepared sleep mats and supported children in removing their shoes and settling for sleep. Soothers were provided for children who used them, and staff remained with children, offering comfort and reassurance as they settled to sleep.

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All children had opportunities for outdoor play and were closely supervised by staff at all times. Children engaged in a variety of activities including skipping, climbing and drawing. The outdoor area had a variety of equipment including messy play with sand, balance steps, a playhouse and rest areas including a wigwam and picnic tables and benches. Transitions between activities were well managed, with staff providing children with adequate notice when it was time to tidy up or move to the next activity.

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 and the outdoor area 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.
- Storage facilities and the kitchen were inaccessible to children.
- Cord blinds were secured.

Infection Control:

- The environment was clean and staff maintained a daily cleaning record.
- Children washed their hands after outdoor play, using the toilet and prior to eating.
- Waste was properly managed using pedal-operated bins.
- Staff reported bed linen for the sleep mats is laundered weekly by parents.

Administration of Medication:

- Care plans were available for children who were on prescribed medication for specific medical conditions. Staff were familiar with the care plans and the medication required in the event of a medical emergency.

Safe Sleep:

- Staff demonstrated when spoken to that they were familiar with the safe sleep guidelines and they carried out physical checks of sleeping children at 10-minute intervals. The temperature of the sleep rooms was monitored and recorded by staff and maintained at the correct temperatures for sleep.

Fire Safety:

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- Staff demonstrated they were familiar with the fire drill procedure and all fire exits were clearly marked and unobstructed.

Non-Compliance Information

Infection Control:

- The nappy changing practice and observed was inadequate for infection prevention. Staff did not remove their gloves after completing a nappy change and subsequently were observed assisting a child to wash their hands while wearing the same gloves. On a separate occasion, a staff member did not wash a child's hands following a nappy change. In addition, the service's nappy changing policy was not sufficiently detailed, as it did not clearly outline all required steps of the nappy changing procedure to support consistent and safe practice by staff.

Administration of Medication:

- A sample of nine medication forms were reviewed. Three forms did not have a witness signature posing a potential safety risk and was not in line with the medication policy.

Fire Safety:

- The required maintenance of the smoke alarm and fire extinguisher had not been completed, which posed a potential risk to the safety and welfare of children and staff in the event of a fire within the service.

Action submitted by the Registered Provider

Corrective & Preventive Action

Infection Control:

- Following the inspection, all staff members were retrained on the service's nappy changing procedure and infection prevention and control practices. Particular emphasis was placed on the requirement to use two separate pairs of gloves during each nappy change, with gloves being changed between the cleaning stage and the application of the child's clean nappy. Staff were reminded that this procedure is essential in preventing cross-contamination and maintaining the highest standards of hygiene and infection control within the service.

Administration of Medication:

- In relation to medication records, the Manager met with all staff members following the inspection and reviewed the Medication Administration Policy and associated documentation. Particular emphasis was placed on

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ensuring that all medication administration records are completed fully, including the witness signature section where required.

Fire Safety:

3. With regard to fire safety, both the fire alarm engineer and fire extinguisher service engineer attended the premises following the inspection. All fire safety equipment was inspected, serviced where necessary, and confirmed to be in good working order. Relevant records and certificates have been updated and filed accordingly.

Supporting documentation submitted

Infection Control:

Written records and photographic evidence.

Administration of Medication:

Written records.

Fire Safety:

Copy of maintenance records for the smoke alarm and fire extinguisher.

Summary Comment

Supporting evidence was submitted in keeping with the actions stated. The Regulatory requirement has been met.

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) A person trained in first aid for children was at all times immediately available to the children. Three staff caring for the children had up to date First Aid Responder certificates on file.

(2) (a), (b) The first aid boxes were stored in the office and the kitchen they were suitably equipped and available to the children attending the pre-school at all times.

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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.*
- (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)
- (a) A written record was available detailing monthly fire drills that had taken place in the service. The last fire drill had been recorded as undertaken on the 11 May 2026.
 - (b) There was a record in writing of the number and type of firefighting equipment and smoke alarms on the premises.
 - (4) The procedures to be followed during a fire drill and in the event of a fire were clearly displayed in the service.