Early Years Inspectorate Regulatory Report
School Age Services

TUSLA Identifier:	TU2019WX003SA
Name of School Age Service:	Sunny Days Afterschool Kilmore
Name of Registered Provider(s):	Nicola Lambert, Debra Devereux, Helen Pegman
Address of School Age Service:	Kilmore GAA, Ballask, Kilmore, Wexford.
Eircode:	Y35 TA40

Date of Inspection:	10 February 2026			
Number of school age children present during inspection:	**AM**	Not Applicable	**PM**	32
Registration status:	Registered			
Conditions (if applicable):	n/a			

Address of the Early Years Inspectorate	Primary Care Centre, Castle Park, Arklow, Co. Wicklow
Inspection undertaken by:	L O' Connor
Title:	Early years inspector

Authority to Inspect
Tusla's 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:	Sunny Days Afterschool Kilmore is in Kilmore, a village on the outskirts of Wexford town. The service is located in a muti-use premises and operates Monday to Friday for 38 weeks of the year. The breakfast club operates from 8am to 9am, and an afterschool service operates from 2pm–6pm. The service caters for a maximum of 48 children aged 4 to 15 years. Within the building, the children have access to the main care room with adjoining sanitary facilities. There is a kitchenette available in the main care room. The children also have access to an indoor sports hall. An outdoor area is also available. The registered providers operate other school age services within County Wexford.

Staffing:	There are seven adults employed to work directly in the service, including the registered providers. On the day of inspection, there were four staff working directly with the children.

Additional Information:	An Immediate Action Notice (IAN) was issued to the service on 11 February 2026 due to an immediate risk identified regarding the procedures in place regarding children who required emergency medication. Please refer to Section 58(G) of the Child Care Act 1991 as amended. An adequate response was received on 12 February 2026 which outlined the measures implemented to reduce the risk identified.

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Legislation

Tusla's Early Years Inspectorate is the independent statutory regulator of School Age Services in Ireland, and its role is to promote and monitor the safety and quality of school age care provision in accordance with the following legislation:

- The Child and Family Agency Act 2013, Part 12.
- Child Care Act 1991 (Early Years Services) (Registration of School Age Services) (Amendment) Regulations 2022.
- The Child Care Act 1991 (Early Years Services) Registration of School Age Services Regulations 2018 (S.I. 575 of 2018).

A school age service means any early years service, play group, day nursery, crèche, day-care or other similar service which:

a) caters for children under the age of 15 years enrolled in a school providing primary or post-primary education,
b) provides a range of activities that are developmental, educational and recreational in manner, which take place outside of school hours, the primary purpose of which is to care for children where their parents are unavailable, and
c) the basis for access to which is made publicly known to the parents and guardians of the children referred to in point (a) above.

It is the responsibility of a registered provider to ensure the safety and well-being of school age children and the above legislation authorises Tusla to assess compliance with the Regulations.

Inspection Methodology:

The inspection is unannounced to assess compliance with the Child Care Act 1991 (Early Years Services) Registration of School Age Services Regulations 2018 (S.I. 575 of 2018), Child Care Act 1991 (Early Years Services) (Registration of School Age Services) (Amendment) Regulations 2022, and the Child Care Act 1991, Section 58 as amended by Part 12 of the Child and Family Agency Act, 2013.

The findings on inspection are gathered through a triangulation method, including:

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

This inspection aims to determine the extent to which service is appropriate for the care, safety, and wellbeing of children in accordance with the regulations cited above.

Inspection findings are documented in the School Age Services 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 corrected the non-compliance and how they will prevent them 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 CAPA 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.

Acknowledgements:

The inspector wishes to acknowledge the co-operation of the children, person in charge, staff and registered provider who were present on the day of inspection.

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Summary of Findings:

The inspector planned to focus on Regulation 8: Vetting disclosures, Regulation 9: Staffing levels, and Regulation 12: Insurance.

On inspection, the registered provider was found to be compliant in relation to the following:

- Regulation 9(1)(2)(4): Staffing levels:
- Regulation 8(1)(2): Vetting disclosures:
- Regulation 12: Insurance.

On inspection, the registered provider was found to be non-compliant under:

- Section 58(G) as amended by Part 12 of the Child and Family Agency Act, 2013.

Conclusion and follow-up actions:

The registered providers submitted actions and supporting documentation to demonstrate the measures which were put in place to address the non-compliance. Based on the implementation of these actions, it is deemed that the requirement has been met. Section 58(G) of the Child Care Act 1991 as amended will be reviewed on the next inspection.

Regulation 8: Vetting disclosures

(1) A registered provider of a school age service other than a childminding service 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 Síochana 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.

(2) The procedures specified in paragraph 1 shall be carried out prior to any person being appointed, assigned or allowed access to or contact with a child attending the school age service.

Regulatory Requirement Met

(1) (a)(b)(c)(d)

The registered provider confirmed that two new staff had joined the service since the previous inspection. These staff files were reviewed. The Garda Vetting disclosures, and two validated references were available for both of the adults. The registered provider had determined that police vetting was not required.

It was demonstrated that the service adhered to the re-vetting timeframes as outlined in the Early Years Inspectorate Regulatory Notice, requiring services to renew Garda vetting every three years. Five vetting disclosures for existing staff members were renewed.

(2)

The required documentation was in place prior to staff being appointed, assigned or allowed access to or contact with a child attending the school age service.

Regulation 9: Staffing levels
(1) Subject to this Regulation, a registered provider of a school age service other than a childminding service shall ensure that there is at all times an adequate number of competent and suitable adults on the premises while the service is operating. *(2) Without prejudice to paragraph (1), a registered provider of a school age service other than a childminding service shall ensure that there is a minimum ratio of 1 adult to 12 children at all times while the service is operating.* *(4) A registered provider of a school age service shall ensure that the school age children attending the service are appropriately supervised at all times.*
Regulatory Requirement Met
(1)(2)(4) There was an adequate number of adults working directly with the children throughout the inspection. On the day of inspection, there were 32 school age children present with 4 adults. The children were appropriately supervised by the adults present throughout the inspection through sight and sound. The staff members remained within close proximity to the children while supervising them in the indoor hall and main care room.

Regulation 12: Insurance
A registered provider shall ensure that the school age service is adequately insured.
Regulatory Requirement Met
The service was insured for 48 children to attend at any one time. The policy was dated from 28 March 2025 to 27 March 2026.

Child Care Act 1991, Section 58(G) as amended by Part 12 of the Child and Family Agency Act, 2013
It shall be the duty of every person providing an early years service to take all reasonable measures to safeguard the health, safety and welfare of children attending the service and to comply with regulations made by the Minister under this Part.
Regulatory Requirement Met

In discussion with staff members, they outlined that the service carries out a fire drill twice a month. They explained that separate fire drills were carried out with the children in the morning who were attending the breakfast club, and afternoon to include the younger children and older children. Staff members explained the route to take in the event of an emergency and outlined the location of the fire assembly point. Fire exit routes were identifiable through fire safety signage and there were displays throughout the service with the procedures to follow in the event of an emergency. These practices were reflective of the service fire safety policy.

Through a review of documentation, it was demonstrated that a person with First Aid Responder (FAR) was available to the children.

The interactions between the staff members and the children were observed to be warm and responsive. The staff members used calm and low tones when engaging with the children. They were observed to interact with children individually and in small groups throughout the inspection. for example, one staff member sat with three children who were playing with a pirate ship. They were overheard to playfully engage with the children, asking questions of where the ship was going and what treasures they might find. While at the same time, another staff member was sitting with one child who was playing on their own and was warmly engaged in conversation with the child.

The children were provided with choice in the activities which they partook in. The children were familiar with the resources available and encouraged to explore their own interests. The main room provided children with equipment and resources which was age appropriate and accessible at a low level. On arrival to the service, the younger children were fully engaged in various activities across the room. this included playing with dolls, a dolls house, arts and crafts, fuse beads on peg boards, and reading. Staff members explained that when the older children arrived in the service, many of

the children would complete their homework and then would go to play. After homework was completed, children were observed to engage in various self-chosen activities. For example, football or games in the indoor pitch, arts and crafts or board games.

Regulatory Requirement not met

1. An Immediate Action Notice was issued to the service on 11 February 2025 as it was deemed there was a significant risk in relation to the safety of children who required emergency medication. The registered providers did not ensure that effective measures were in place to provide staff members with the information required to safely care for children who required emergency medication. The practices observed posed an increased risk to the child in the event of an emergency as they may not receive the emergency medication and/or treatment as required. The following was observed:

   a. The medical needs of two children attending the service were not known to staff members or the registered provider. Through discussion, inconsistency was identified in the information provided regarding the children attending who had a known allergen. Two staff members identified two children as having a known food allergen. In conversation with another staff member, they confirmed that a third child attending the service also had a known food allergen. Staff members and registered provider confirmed to the inspector that a care plan was not in place for two of the three children and that these two children did not require emergency medication. The inspector requested the registered provider to verify this information. It was later confirmed that both children required emergency medication. This practice posed an immediate risk as the procedure to follow was not known to staff members and the emergency medication was not available within the service to provide treatment to a child in the event of an emergency.

   b. Staff members were not familiar with the procedures to follow if a child may require emergency medication. In discussion with a staff member, the allergen identified for a child, who required emergency medication, was at variance with the allergen listed on the child's care plan. In discussion with another staff member, they were unfamiliar with the named allergen for this child. While the staff members provided the inspector with the child's emergency medication, they were not aware of the procedures to follow, should the child

require the emergency medication. The staff members were advised by the inspector that the child's care plan, which outlined the procedures to follow and known allergen, was stored with the child's emergency medication. The service administration of medication policy stated that every individual health plan will be jointly reviewed with staff and parents every three months, and that staff would be informed and kept up to date of the health care plans.

A response was received from the registered providers on 12 February 2026. This non-compliance was also found on the previous inspection in February 2024.

2. An Immediate Action Notice was issued to the service on 11 February 2025 as the registered provider did not take effective measures to ensure that the service was appropriately secured to mitigate the risk of unauthorised access to the service and/or exit from the service. The following was noted:

    a. The main entrance of the service was not secured throughout the inspection as follows:
        i. On arrival, the inspector gained access to the service unnoticed.
        ii. At 3pm an adult who was collecting a child entered the service and the main care room unnoticed by staff members present.

    b. The fire exit door located in the hallway beside the indoor pitch was ajar twice during the inspection. Children were observed to freely move between the main care room and indoor pitch throughout the inspection which was in close proximity of this door.

    This practice posed an increased risk of a child leaving unattended or an unauthorised person entering the service. A response was received from the registered providers on 12 February 2026.

3. The sanitary facilities provided for the children were not maintained. Staff members explained that the boys and girls use two separate sanitary facilities, and the following was noted:
    a. The temperatures in the sanitary areas were as follows:

i. The boy's sanitary area measured 12.3° Celsius at 3.26pm.

ii. The girl's sanitary area measured 12.8° Celsius at 3.32pm.

Following the previous inspection on 13 February 2024, the registered providers responded to the CAPA stating that thermometers were installed in the sanitary area to monitor the temperature and that the landlord is looking into installing heating in the sanitary areas if possible. Works were not carried out in the sanitary area to ensure they were adequality heated and there continues be no means of heating within the area. Measures to monitor the temperatures were not observed to be in place.

b. In the boy's toilets, there was a strong malodour from the two urinals. The urinals did not appear to be clean. This was at variance with the service infection control policy which outlined that toilet areas were cleaned frequently in accordance with the cleaning schedule and immediately if soiled.

c. Warm water was not available for handwashing in any of the taps across both sanitary areas. Two of the hot taps were broken and two provided water which was cold to touch. This was contrary to the service infection control policy which outlined that warm water was always available for children for handwashing.

d. In the two sanitary areas, toilet roll was observed on the floor while the toilet roll holders fixed onto the wall were empty.

e. The bins in the two sanitary areas were overflowing with used paper towel.

Corrective & Preventive Action Response submitted by the Registered Provider

1. The registered providers stated the following through their response to the Immediate Action Notice and the CAPA process:
   a. The parent/guardians were contacted on the evening of the 10 February 2026 by phone to update both children's medical records and medical requirements while attending the service. Both care plans to be completed and returned to the service along with any medication

required. Medical care plans and the required medication was in place prior to the child attending the service. Children will not start the service until a fully completed care plan and any medication required is on site and that staff are aware of details of the child's medical needs. The service's admission policy has been updated to reflect this. A summary medical sheet has been made and is in our daily folder for staff to continuously review to keep themselves familiar with medical needs of children each day. All medical care plans are to be updated, and they will be reviewed twice annually.

b. The care plans have been developed. One copy is kept with the child's medication and a second copy filed in the child's file. A summary sheet was developed and placed in the daily folder for staff to familiarise themselves with all care plans and to be aware each day of children with allergies and medical needs that are in attendance. It has been marked in the daily diary and the last Friday of every month; all staff will refresh themselves with the children's care plans. The registered provider will also carry out monthly spot checks to ensure staff are familiar with the care plans that are in place. A record of this is kept in the main office diary.

The registered providers submitted a photo of the three care plans and required medication, the service's updated admissions policy, and a medical and allergy summary sheet.

2. In response to the Immediate Action Notice and through the CAPA process, the registered providers stated that the following actions have been implemented:

a. The door is kept always closed while the children are in the service. The staff will greet parents at the door for collections and close the door as they leave the service. When bringing children to the bus or the school at 3pm, the staff member at the back of the line will ensure that the door is closed behind them. Two staff members are starting at 1.45pm to complete our daily checklists prior to children entering the service. This includes ensuring that all doors are closed. Signs were placed onto the door to remind staff to ensure the door is closed.

b. The closure of the side door is included in our checklist now and two staff members complete

it prior to our first collection of children from school. To remind staff to ensure that the door is closed 'Keep door closed' signs are on the door. Once this door is closed, no access can be gained from outside through this entrance. Walkie talkies have been introduced for use to monitor the children's movement between the indoor pitch and the care room.

The registered provider submitted a copy of the daily checklist and photos of the side door with signs.

3. In response to the findings regarding the sanitary facilities, the registered providers stated the following actions were implemented:
   a. Since 12 February 2026, the service no longer use the boy's bathroom. The service is using the second sanitary area which has two cubicles and also have use of a disability bathroom.

      A bathroom heater was installed in the girl's sanitary area prior to reopening following Easter holidays on the 13th of April 2026. A room thermometer has been put into place on the wall of the bathroom, and a temperature record sheet is on the back of the sanitary area door to monitor and keep record of the temperature in the sanitary area. The sanitary area temperature is recorded twice per day.

   b. Since 12 February 2026, the service no longer use the boy's bathrooms. The staff start work 15 minutes earlier to complete the daily checklist prior to opening, which includes that the bathrooms are clean.

   c. New taps were installed in the girl's sanitary area sink prior to reopening following the Easter holidays on 13/04/26. The immersion and solar panels are now supplying warm water to the hot tap in the girl's sanitary area. A repairs logbook has been put in place to keep track of any repair works that need to be completed as soon as any furnishing need any repair or improvement works. The service manager will inform the registered providers if there are any repairs that need to be done immediately going forward.

   d. The keys were obtained for the toilet roll dispenser on 12 February 2026. These are fully

stocked and used daily since the 12 February 2026. Two staff members will start work at 1.45pm, to complete daily checklist and refill the dispensers if needed, prior to our first collection of children entering the service

e. Bins are emptied prior to opening and again later in the afternoon when cleaning the bathrooms. Two staff member's starting work 15 minutes earlier to ensure that this is completed when doing our daily checklist prior to our first collection of children at 2pm. Two staff are completing the checklist prior to our first collection of children from school. The staff members spoke with the children regarding placing the paper towels in the bin.

The registered providers submitted the following:

a. A photograph of the heater, the thermometer on the wall and of the temperature record sheet.
b. Photograph of the boy's bathroom which is blocked off.
c. Photograph of the immersion and solar panel water heating system. Photograph of Repair logbook. Photograph of the new taps and a photograph of both taps running water.
d. A copy of the daily sanitary area checklist.
e. A photograph of the sanitary area in use, to include the toilet paper holders containing toilet paper and bin area.

Summary of Findings

Based on the implementation of the actions submitted, the requirement has been met for Section 58(G) of the Child Care Act 1991 as amended. This will be assessed on the next inspection.