

Early Years Inspectorate Regulatory Report School Age Services

TUSLA Identifier:	TU2024DR006SA
Name of School Age Service:	Sherpa Kids Goatstown Educate Together
Name of Registered Provider:	Jennifer Lee
Address of School Age Service:	Goatstown Educate Together, Upper Churchtown Road, Dublin 14.
Eircode:	D14Y563

Date of Inspection:	19/01/2026			
Number of school age children present during inspection:	AM	NA	PM	26
Registration status:	Registered for school age care			
Conditions (if applicable):	Not applicable			

Address of the Early Years Inspectorate	The Brunel Building, Heuston South Quarter, St. John's Road West, Dublin 8.
Inspection undertaken by:	R Duff and L O' Connor
Title:	Early Years Inspectors

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:

Sherpa Kids Goatstown Educate Together National School is located in Dublin 14. It is part of a chain of school age services located throughout the country. The school aged service is based in a primary school and provides school age care for children attending the school. The service has use of two classrooms, a kitchen area and a large outdoor area.

The service is registered to accommodate up to 60 school age children between the ages of 4- 12 years at any one time. The opening hours are 1:00 to 18:00 term time and 9:00 to 17:00 outside term time.

Staffing:

There are nine adults employed within the service, including the registered provider and area manager. The registered provider does not work directly with the children. Seven adults work directly with the children.

On the day of inspection, there were five adults present in the service. The area manager arrived at the service shortly after the commencement of the inspection.

Additional Information:

The inspection was triggered by information which was submitted to the inspectorate.

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

Summary of Findings:

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

- Regulation 8(1)(2): Vetting disclosures;
- Regulation 9(2): Staffing levels;
- Regulation 12: Insurance.
- Regulation 13: Complaints

The registered provider was found to be non-compliant in relation to the following:

- Regulation 9 (1)(4): Staffing levels;
- Section 58(G) of the Child Care Act 1991 as amended.

Conclusion and follow up actions:

The actions and evidence submitted by the registered provider, in their corrective and preventive action plan for Regulation 9 (1) (4) and Child Care Act 1991, Section 58(G) as amended by Part 12 of the Child and Family Agency Act, 2013, have adequately addressed the non-compliance identified on 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 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.

(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)

Documentation relating to nine staff files were reviewed. Eighteen validated references were available. The required Garda vetting disclosures were available for the nine staff members. 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. Police vetting was required for eight adults, and it was available for review.

(2)

It was demonstrated that the required documentation was in place prior to all adults being appointed, assigned or allowed access to or contact with a child attending the school age service. The procedures as required for the consideration of references and police vetting were carried prior to the adults being appointed, assigned or allowed access to or contact with children.

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

(2)

The adult to child ratio was maintained throughout the inspection. On the day, there were five adults present with 26 school age children in the service.

Regulatory Requirement not met

(1)

The registered provider did not ensure that there were competent and suitable adults within the service to ensure that the service's procedures and safeguarding practices were effectively implemented. The registered provider had not implemented measures following an incident on 12 January 2026 to ensure that the staff members with key responsibilities in the service were familiar with the service's safeguarding procedures for collection and the drop off. Please refer to Section 58(G) of the Child Care Act 1991 as amended.

(4)

The registered provider did not ensure that the children were appropriately supervised at all times. The inspector identified significant risk with supervision of children at times of drop off from service to the school bus. It was confirmed that on the 12 January 2026 that a child was unaccompanied for approximately 30 minutes and brought to a place of safety by a member of the public. Please refer to findings under Section 58(G) of the Child Care Act 1991 as amended

Corrective & Preventive Action Response submitted by the Registered Provider

The registered provider has stated that:

(1) (4)

- Memos have been sent to staff regarding supervision practices, Drop/Collection Policies.
- Child Safeguarding Risk Assessment document updated to include: Supervision of children during after-school sessions and transition to bus service.
- All staff have received the reviewed policy, been retrained in the Drop/Collection procedures and have signed off on having been retrained and aware of the new policy changes.
- Staff were retrained by the Area Manager in Drop/Collection, and Supervision Policy.
- Staff undertook repeated training in Child Safeguarding (Children First, and Children First Mandated Person)
- Letters of Concern have been issued to relevant staff on breaches/failures.
- Area Management regular site presence (to observe changes in Drop/Collect and supervision practice)
- A memo specific to the school bus drop off and permissions (in writing from parents) was sent to staff and acknowledged.

Summary of Findings

The regulatory requirement has been met.

Regulation 12: Insurance

A registered provider shall ensure that the school age service is adequately insured.

Regulatory Requirement met

The service was insured for 60 children to attend at any one time. The policy was dated from 28 March 2025 to 27 March 2026.

Regulation 13: Complaints

- (1) A registered provider of a school age service other than a childminding service 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 of a school age service other than a childminding service shall ensure that—
- (a) a record in writing is kept of a complaint made to the provider in respect of the school age service,

Regulatory Requirement Met

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

A complaints policy was available within the service for a person to make a complaint. The policy detailed the procedures to follow, including the assigned person responsible for dealing with a complaint, how complaints are dealt with and communication strategies in the case where a complaint is made to the service. The policy also included an appeals provision should the complainant wish to appeal the outcome of the complaint investigation.

(2)(a) The service's policy outlined that the service would retain the record of complaint for 2 years from the date the complaint was dealt with.

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 not met

1. The registered provider did not ensure that effective measures were implemented to mitigate the risks identified by the service at drop-off and collection times. The following was noted;

- a. In discussion with two staff members with key responsibilities, it was confirmed that there were no changes made to the procedures at drop off times following an incident which occurred on the 12 January 2026. This posed an increased risk to the safety of the children at drop off times and increased likelihood that an incident may reoccur. This was at variance of the service's own Child Safeguarding Statement which outlined that there would be procedures in place to manage any risk identified.
- b. There was inconsistent information provided to the inspectors by staff members regarding children who were due depart the service to the school bus at 2pm. In discussion with staff members at 1.40pm, they outlined that 5 children aged 4 to 7 years were due to leave the service and would be brought to the school bus at 2pm. The inspector observed at 2pm that a group of 6 children were in a line outside the school age room. A staff member confirmed these children were being brought to the bus. The inspector accompanied a staff member and children to the bus, and it was confirmed that only 4 children were being dropped off.
- c. The child safeguarding statement outlined that children were not permitted to access the bus without staff escort. On the day of inspection, a staff member with key responsibilities outlined that the procedure in place was that children were brought to a different classroom, and an adult who was not employed by the service, accompanied these children to the bus. This staff member advised the inspector that this was the practice in place on the day of inspection and that a staff member was not accompanying the children. It is noted that when the inspector advised this staff member that they would observe the collection procedure, they accompanied the inspector.
- d. The practices observed regarding the children attending extra-curricular activities was at variance of the service's procedures as set out in the child safeguarding statement as follows;

- i. On the day of inspection, children were collected from the service by the adult from the extra-curricular activity and then brought to the designated room. This procedure as set out in the child safeguarding statement stated that all children must be physically escorted into the classroom by staff and their presence confirmed by the supervising staff member. The procedure set out that staff must ensure visual confirmation of entry.
 - ii. In discussion with a staff member regarding an incident which occurred on 12 January 2026, it was outlined that the drop off procedure as set out in the child safeguarding statement was not followed.
2. While it is noted that evidence was available to demonstrate that staff members with key responsibilities received training on the service's policies, it was evident that the procedures were not consistently implemented which potentially placed a child at risk of harm. The following was noted;
 - a. The service's accident and incident policy outlined that a record must be kept of every accident or incident. It was confirmed that a record was not completed and/or available on the day of inspection regarding an incident which occurred on 12 January 2026.
 - b. The service's child safeguarding policy outlined that written permission from a parent and/or guardian was required for a child to attend an extracurricular activity. The policy also outlined that parents were required to provide written confirmation of bus use and days of travel. The policy outlined that this practice was implemented by management of the service. In discussion, it was confirmed that this procedure was not consistently implemented within the service. It was outlined that a staff member accepted a verbal exchange regarding a child's attendance of extra-curricular activities. This ineffective communication contributed to a child being incorrectly

placed onto a school bus on the 12 January 2026.

- c. The person with key responsibilities or staff members did not follow the procedures as set out in the child safeguarding statement on the 12 January 2026 to manage a risk which was identified. The policy outlined that in the case where a child may be at risk of harm, contact the Designated Liaison Person (DLP) or Deputy Designated Liaison Person. It was confirmed that this process was not followed by staff members when they were made aware of an incident which occurred.
3. The registered provider did not ensure that staff members were provided with information to carry out their role. The procedures for the collection and drop off policy were not evident within the service's policy. While the procedures for the collection and drop off by staff members was noted within the child safeguarding statement, the practices observed were at variance with the procedures. As a result, there may be an increased risk that staff members may be uncertain of their role or responsibilities during collection and drop off times. This posed an increased risk to children's safety. The following was noted;
 - a. The services collection and drop off policy did not outline the drop off and/or collection procedures specific to the service. The policy did not outline the procedures to follow when children were brought from the service to the school bus or the procedures to follow when children were dropped off and/or collected by the service from an extra-curricular activity.
 4. The measures which were in place for the management of emergency medication were ineffective.
 - a. Through a review of documentation, one child's parents informed the service that their child required emergency medication. However, in discussion with staff members, they were not aware of the child's requirement for emergency medication.
 - b. The staff members explained that any child who required emergency medication were listed on a display in the room. This child was not listed on the displays.
 - c. While it is noted that the service developed a 'risk minimisation care plan', however,

the procedure to follow in the event of the child requiring their emergency medication was not outlined.

- d. It is noted that the child's emergency medication was available in the service. Through conversations with staff members, they were not aware that the medication was present and/or the procedure for administration in the event of an emergency, to include the dosage.

5. The information systems in place within the service for daily attendance were ineffective as it did not provide staff members with information of the actual times or days when children were due to attend the service. This posed an increased risk that the whereabouts of a child may not be known. The following was noted;

- a. The staff members outlined that they recorded the attendance of children using an app on the service's mobile phone. However, the procedures in place to determine the children who were due to attend on a specific day and/or time was ineffective. The staff members outlined that they had records which indicated the time/ day which a child would attend an extra-curricular activity and the time which the child would be in attendance of the service. However, at 3.30pm when the inspector requested the names of the children who were present this measure was observed to be ineffective. The names of two children who were not present within the room were provided, and one child who was present was not named.
- b. Within the two care rooms, there were displays which listed the day of the week, name of the extra-curricular activity and children's names. In discussion, with staff members it was determined that some children who were listed were not due to attend the service on that particular day. This posed an increased risk of uncertainty for staff members regarding the children who were actually attending the service on specific day and/or who was due for collection from an extra-curricular class.

6. The registered provider did not ensure that the service was adequately heated while in operation.

- a. Staff members were observed to wear their coats in the care rooms throughout the inspection. In discussion, they advised that the heating was turned off within the building at 2.30pm. The staff confirmed that they did not have any other measures to heat the care rooms.
 - b. The temperature of the children's sanitary area was 13° Celsius at 4.20pm.
7. The registered provider did not ensure that the sanitary facilities were effectively maintained or repaired. The following was noted;
- a. The water temperature of the handbasins was 8° Celsius at 4.20pm. A staff member confirmed that the children do not have access to warm water within the sanitary area. This does not provide a pleasant experience for handwashing and may increase the likelihood of ineffective handwashing practices.
 - b. Children did not have access to toilet roll. Exposed rolls of paper handtowels were observed in two of the three cubicles. This practice increased the risk of the spread of infection.
 - c. Repairs were required on the toilets as two of the three cistern lids were not intact.

Corrective & Preventive Action Response submitted by the Registered Provider

The registered provider has stated:

(1)

- The Area Manager went on site to observe the drop/collection protocols in action, made recommendations for changes and signed off on having done so.
- The Area Manager confirmed instruction was, in fact, given to site staff in response to the incident, on 15.01.2026, during a site visit. Staff failure to relay this information during inspection was noted and subsequently addressed with the staff by the Area Manager.
- One-to-one supervision meetings were held with staff by the Area Manager with relevant staff on 15th January, two days following the incident.
- Parents were requested to reconfirm, in writing to the service email, their children's bus and/or extra-curricular schedules to enable a full accuracy review to take place.
- Staff retraining in Policy and Procedures, including Dropping/Collection, Incident Reporting, Supervision protocols and Child Safeguarding Policy and Risk Assessment

(Statement)

- Memos issued to staff, specific to Bus Verifications, escort Procedures, and the failure to record and document the incident.
- Additions made to Drop/Collection Policy to include more explicit reference to Extra-Curricular Activities, written permissions, change requests, and escorting children to the bus.

(2) (3)

- Staff were re-trained in Drop/Collection Policies and Procedures, as well as in the updates/additions made to the Child Safeguarding Risk Assessment.
- A memo specific to Bus Verification and Escort Procedures was distributed by the Area Manager to all onsite staff on 19.01.26.
- Staff undertook repeat training in TUSLA's Children First (and Mandated Person)
- The Area Manager, following observation of practices and implementation of changes/recommendations, signed off on her approval of new practices for bus drop off protocols.

(4)

- Staff were re-trained in the procedures for identifying and effectively communicating medical needs and requirements of children based on booking information provided.
- A meeting with staff was held that included an agenda on Medication Management Policy and the importance of communicating effectively the information provided and making the relevant updates to display notices.
- All medical information was checked and used to update the displays.

(5)

- Parents were requested to re-confirm their children's daily bus and/or extra-curricular schedules to enable a full review of the timetables on display for staff. Parents were also advised to use the 'bus icon' in the service system to activate this visibility function in the system for staff to reference.
- Display notices of children's daily bus and extra-curricular schedules were updated based on latest information and placed on display

- Staff memos were distributed to all site staff on accepting change requests from parents, verification of bus schedules, and protocols for escorting children to the bus. This included instruction to check the service system (where the bus icon appears) and to make mandatory updates to the display notices in the service regarding bus schedules.
- Update made to the Drop/Collection Policy to include that written permissions only will be accepted from parents regarding changes to their child's extra-curricular schedule.
- Staff were re-trained on the Drop/Collection Policy.

(6)

- The heating arrangements between the provider and the school management were altered to ensure that heating remains on in the building after 2:30pm. This includes in the Sanitary Areas.
- The registered provider sent an email to the Area Manager to ensure spot checks (during colder months in particular) are carried out on the room temperatures to ensure they are maintained to appropriate levels.

(7)

- A supplier of water heater fixtures has provided a quote to the provider for installation.
- Toilet paper was retrieved and replenished in toilet cubicles.
- An 'out of order' sign was placed on the door of the cubicle where the cistern was found to be missing. Children cannot access this cubicle until the cistern is replaced.
- A memo regarding stock control and Reporting of Faulty Facilities was sent to all onsite staff by the Area Manager to ensure effective vigilance and reporting processes are followed.

Summary of Findings

The regulatory requirement has been met.