



Report of an inspection of a Designated Centre for Disabilities (Children).

Issued by the Chief Inspector

Name of designated centre:	Finvola
Name of provider:	GALRO Unlimited Company
Address of centre:	Laois
Type of inspection:	Announced
Date of inspection:	14 January 2026
Centre ID:	OSV-0007767
Fieldwork ID:	MON-0039956

About the designated centre

The following information has been submitted by the registered provider and describes the service they provide.

Finvola comprises of a large detached dormer dwelling with an additional 2-bed bungalow on the same site on the outskirts of a town. One building is designed for single occupancy and the other has capacity for six children with three bedrooms on the ground floor and three on the first floor. The main house which is currently the only one occupied, has three living rooms, and a playroom in addition to a kitchen dining room. There is a large car park to the front of the centre and to the rear is a patio and garden with children's play equipment. Children who live in this centre present with moderate or severe intellectual disability, autism or complex medical conditions. Children who live in Finvola may be in statutory care. This centre is open on a 24 hour a day, year round basis. When fully occupied there are eight staff on duty during core daytime hours and two waking night staff on duty at night along with sleep over staff. The children are supported by a team of social care workers and support workers and there is a centre manager full time who provides support to the person in charge.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	7
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This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended). To prepare for this inspection the inspector of social services (**hereafter referred to as inspectors**) reviewed all information about this centre. This included any previous inspection findings, registration information, information submitted by the provider or person in charge and other unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- speak with residents and the people who visit them to find out their experience of the service,
- talk with staff and management to find out how they plan, deliver and monitor the care and support services that are provided to people who live in the centre,
- observe practice and daily life to see if it reflects what people tell us,
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service is doing, we group and report on the regulations under two dimensions of:

1. Capacity and capability of the service:

This section describes the leadership and management of the centre and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. Quality and safety of the service:

This section describes the care and support people receive and if it was of a good quality and ensured people were safe. It includes information about the care and supports available for people and the environment in which they live.

A full list of all regulations and the dimension they are reported under can be seen in Appendix 1.

This inspection was carried out during the following times:

Date	Times of Inspection	Inspector	Role
Wednesday 14 January 2026	11:00hrs to 17:30hrs	Ivan Cormican	Lead

What residents told us and what inspectors observed

This was an announced inspection conducted following the provider's application to renew the registration of this centre. The centre offered a fulltime residential service to children and young people. The centre's last inspection highlighted issues in relation to safeguarding and fire safety, and the actions taken to address these issues were reviewed as part of the inspection process. The inspection was facilitated by the centre's person in charge and a centre based manager. Two additional staff members from within the wider organisation, and who held responsibility for quality and compliance, also attended for the duration of the inspection. The inspector also met with seven staff members and five of the children who used this service.

The centre was located on a large site in a town in the midlands. This comprised of two separate buildings, one of which was a substantial detached property which accommodated six children. The second building was located towards the rear of the site and was an apartment style dwelling which had a kitchen/dining room and a separate living room. The young person who lived here had their own bedroom and there was also a large bathroom. In the main building, each child had their own bedroom and there were an ample number of shared bathrooms and toilets. There was also a moderate sized kitchen/dining area and there were a number of shared reception rooms in which children could relax, play games and watch television.

On the previous inspection there were a number of improvements required in relation to maintenance and upkeep, which the provider had addressed. On the day of inspection, new flooring was also being laid in the main building. Both buildings in the centre were clean, warm and had a homely feel. Some children had decorated their own bedrooms with posters and pictures, and they also kept some of their toys such as gaming devices and trains. The main areas of each building also displayed a collage of numerous photographs of children enjoying the summer months. One child had organised a sports day in the centre and photographs also showed children enjoying a pool garden party in another centre operated by the provider.

The inspector met with five children overall and spent time chatting with two of them. On the morning of the inspection, the young person who used the apartment area of the centre was up and preparing for the day ahead. They were supported by two staff and they spoke with the inspector for a short period of time. They were very happy and content in the company of staff and they told the inspector that they liked their apartment. They planned to go to a nearby open-farm later in the day as they loved to visit the highland cattle. They interacted frequently with staff for encouragement and support and it was clear that they had a good relationship with those who were supporting them. The inspector met briefly with two residents as they returned home from school but they were more interested in watching the television and electronic tablets than interacting with the inspector. The third resident was having their evening meal with two peers when the inspector met with

them and again the interaction was limited; however, the mealtime was pleasant and both children and staff were enjoying the interactions.

The remaining child was relaxing in their room, playing video games, when the inspector met them. They were very chatty and they showed the inspector the video game that they were playing. They were very relaxed and they also chatted and joked with staff about upcoming plans. They also invited the inspector to play a racing game and they explained that they were very good and more than likely the inspector would lose. Unfortunately, the game could not go ahead due to technical difficulties and staff reassured the child that they would resolve this issue the following day. The child was satisfied with this and they made plans to visit a gaming shop the next day to purchase additional storage for their gaming device.

The children who used this service were well supported in term of activities and social access. The inspector reviewed records which showed that children were out and about on a daily basis and they enjoyed going to shops, having their favourite meals out and also visiting play centres and playgrounds. Personal planning for 2026 was underway and staff explained that they were hoping to assist a child to attend a Dublin match, maybe in Croke Park and also to go to a theme park. Staff who met with the inspector also stated that children had a busy summer visiting the seaside and play centres and also enjoying birthday parties and making the most of seasonal events like Easter, Halloween and Christmas.

The inspector found that this was a pleasant place in which to live and it was clear that the provider and staff placed the wellbeing of children to the forefront of care. Previous issues in relation to fire safety and safeguarding had also been addressed. Areas of care such as education for one child, finances and staff files required some adjustment but overall, the quality and safety of care was promoted in this centre.

Capacity and capability

The actions taken by the provider since the last inspection had brought about sufficient improvements in the overall quality of care provided. The oversight of care was a priority within the centre and both local and provider lead oversight arrangements assisted in ensuring that children were safe and enjoyed living in this centre.

The provider had employed a full-time person in charge who held responsibility for the day-to-day delivery and oversight of care. They were supported in their role by a centre based manager and both individuals were found to have a good understanding of both the service and the childrens' collective needs.

The provider had arrangements in place for the monitoring of care and the person in charge outlined a schedule of internal audits which they, and the centre's management team completed on a weekly and monthly basis. In addition, the

provider had ensured that all required audits and reviews were completed as set out in the regulations. The inspector found that these arrangements assisted in ensuring that care was held to a good standard at all times.

The provider had a senior management structure in place with two additional senior personnel from within the organisation appointed to support the provision of care. The provider also ensured that the centre was well resourced with a consistent staff team who knew the children's individual needs well.

Overall, the inspector found that the governance structure in this centre ensured that care was actively monitored and it was clear that the provider and staff team were committed to the welfare and wellbeing of children. Some areas of care required further review, but overall the inspector found that care was generally held to a good standard.

Regulation 15: Staffing

The provider had a rota in place which accounted for the day and nighttime support arrangements in this centre. The inspector reviewed a sample of dates within this rota and found that the centre was resourced as required at all times.

The day-to-day staffing arrangements were held to a good standard, but some adjustments were required in relation to staff files. The inspector examined two staff files and found that the majority of the required schedule documents were in place. Vetting disclosures were up-to-date and employment histories were in line with the staff members submitted application for employment. The regulations require two references for each employee and although references had been sought for both staff members, two had not been signed and a confirmation of employment was in place for one staff member as opposed to a complete reference.

Judgment: Substantially compliant

Regulation 16: Training and staff development

The provider had a mandatory and refresher training programme in place which assisted in ensuring that staff could cater for residents' assessed needs. Staff had completed training in areas such as safeguarding, fire safety, behavioural support and the safe administration of medications. The delivery of care also required specific training in relation epilepsy and the care of a percutaneous endoscopic gastrostomy (PEG) site which all staff had completed.

Staff members also attended scheduled team meetings and individual supervision sessions which promoted an open and transparent culture within the centre.

Judgment: Compliant

Regulation 23: Governance and management

The provider had recently made adjustments in the approach to the unannounced internal monitoring of care in this centre. Previous unannounced internal audits had focused on examining a large number of regulations and giving a percentage score of compliance achieved. Although this approach did meet the requirements of the regulations, the provider recognised the limitations of this approach and a revised audit tool focused on the quality of the service was introduced. The inspector found that this approach gave the auditor scope to observe interactions between staff and children and during the centre's last visit, the auditor noted how behavioural support was promoted and that children enjoyed the company of staff, including playing in the back garden.

The centre's most recent internal audit gave a good account of the service and in general found that care was held to a good standard. Areas of care reviewed included personal planning, rights, healthcare, safeguarding, medications and fire safety, with some minor improvements needed in relation to four of these areas. A follow up visit from the auditor confirmed that action had been taken by the centre's person in charge to address these areas and overall the inspector found that the level of oversight was clearly child focused.

The provider had also ensured that the centre had a management structure to organise and provide oversight of the day-to-day delivery of care. A fulltime person in charge had been appointed and they were supported in their role by a centre based manager. The provider had a range of weekly and monthly audits which management of the centre completed and this oversight and governance arrangement ensured that care was held to good standard.

Judgment: Compliant

Regulation 31: Notification of incidents

A review of information indicated that all notifications had been submitted as required by the regulations.

Judgment: Compliant

Quality and safety

The quality and safety of care provided to children was held to a good standard in this centre. The children who met with the inspector appeared happy and issues found on the centre's last inspection had been, for the most part resolved. The centre's previous inspection identified that the collective needs of all children did not promote safeguarding and the provider was at the final stages of renovating alternative accommodation for two of the children. Behaviours of concern had also greatly reduced which had a positive impact on the children's experience of their home. Some adjustments were required in relation to supporting one child with their education and also the oversight finances, but overall this was a more positive inspection.

Children enjoyed a range of activities which was in line with their age profile. They attended birthday parties and also celebrated their own milestone events with family and friends. Records indicated that children visited play centres, the zoo and during the summer months they had days at the seaside.

The previous inspection of this centre highlighted concerns in regards to negative interactions among some of the children which had the potential to impact upon safeguarding. This issue had been taken seriously by the provider and the implemented actions were found to have a positive impact on the provision of care. Comprehensive safeguarding risk assessments were introduced which incorporated enhanced oversight of care and monthly risk and safety reviews. In addition, one-to-one staffing for some children and a consistent staff team were also having a positive impact on safeguarding and children's overall lived experience in the centre. It was also clear that there was an open and transparent culture within the centre, with information on how to identify and report a safeguarding concern clearly displayed. Staff had also undertaken safeguarding training and safeguarding, as a topic, was also discussed with children at their individual keyworking sessions.

The inspector found that care was generally held to a good standard in this centre, which children considered their home. The children were supported to have fun and the design and layout of the premises meant that they had ample space and opportunities to play both indoor and outdoors. Supporting one young person with their finances and another child with their education required additional attention, but overall this was a pleasant place in which to live.

Regulation 12: Personal possessions

Children were well supported to have their own personal space where they could keep their personal possessions, including toys and electronic equipment such as hand held devices. The children also had ample storage for their clothes and in general their bedrooms were warm, child friendly and reflected their own interests in sports teams and music.

Two young people had turned 16 years of age and they were assisted by the staff team to manage their finances. The staff team maintained financial records of all transactions completed with them and also on their behalf. The inspector reviewed four months of financial transactions for a young person and found that some adjustments were required. For example, the young person had paid for three items which should have been covered by the provider, and it was unclear from some receipts viewed what some of the items purchased were. In addition, the young person was spending, what could be considered a large sum of money each month on personal items and clothes, but this trend had not been identified to consider if the young person required additional budgeting supports, or if additional oversight of this trend was required.

Judgment: Substantially compliant

Regulation 13: General welfare and development

The children who used this service had a good social life and they were out and about in their local town on a daily basis. The centre was located in a suburban area of a moderate sized town which facilitated ease of access for community based activities. The provider had also resourced the centre with transport which meant that children could easily access larger towns in the locality where they went to the cinema, bowling and shopping.

All children had supports in terms of education. One young person had a personal tutor who attended to their learning and development throughout the week. The remaining children were all in formal education in nearby schools; however, some improvements were required for one of these children, who was having difficulties with behaviours of concern in school. Although they went to school each day, their time there had greatly reduced. The provider was actively consulting with the school in relation to this issue, but a solution had not been found. The inspector found that alternatives had not been explored by the provider and this child's education required further review.

Judgment: Substantially compliant

Regulation 17: Premises

The previous inspection of this centre highlighted issues in relation to maintenance and the general upkeep of the premises, including the exterior and gardens. On the day of inspection, the flooring in the hall was being replaced and overall there was a marked improvement to the interior and exterior of the building.

The centre itself, was warm cosy and there was an ample number of bathrooms for children to use. The centre had several areas where children could relax and there was a pleasant outdoor area which was fully equipped with toys, a swing and a trampoline.

Judgment: Compliant

Regulation 18: Food and nutrition

The inspector observed three children having a home cooked meal in the evening which was a pleasant experience. The three children who were present sat together and they appeared to enjoy the social interaction with each other and staff. The centre was well stocked with food and there was fruit, drinks and snacks readily available.

There was also a nice change for a young person who had lived in the centre for a number of years. They previously required additional nutritional supports and this need was met through the use of a PEG. Since the last inspection, they had progressed to enjoying whole food orally and both management and staff reported that they were enjoying meals, refreshments and light snacks.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider had arrangements in place for recording, responding and monitoring incidents and accidents. The person in charge held responsibility for the day-to-day monitoring and they were supported by a senior manager in reviewing any trends of concern. The inspector reviewed incidents for the previous three months and found that they were no recent trends of concern. Compatibility issues and incidents of a safeguarding nature which were highlighted on the previous inspection had greatly reduced and it was clear there was good oversight of adverse events in this centre.

The provider also had a system in place for minimising the impact of known risks on the provision of care. The person in charge had completed risk assessments in relation to safeguarding, behaviours of concern, epilepsy and infection prevention and control (IPC), and these assessments were reviewed on a scheduled basis. Overall, the inspector found there was a good understanding of risk which could impact directly upon residents, and it was clear that the actions taken by the provider promoted a safe service for children and staff.

Judgment: Compliant

Regulation 28: Fire precautions

The provider had taken fire safety seriously and a fire alarm, emergency lights, fire extinguishers were installed and had an up-to-date service schedule in place. There were also a number of fire exits which were clearly identified and routine fire drills were taking place. The procedures to be followed in the event of a fire were displayed and a review of fire drill records indicated that both children and staff could evacuate the centre in a prompt manner.

On the previous inspection, a number of fire doors had been repeatedly damaged which compromised fire containment within the centre. This issue had been resolved and the final adjustments to the replacement containment measures were completed on the day of inspection.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The actions from the centre's last inspection had been addressed with better clarity in regards to the prescription of a medication for one resident. The inspector also found that medication was securely stored and staff had undertaken training in relation to the safe administration of medicinal products, including rescue medication.

The provider had suitable medication prescription sheets in place which contained the required information for the safe administration of medications. Associated administration records also indicated that medications were administered as prescribed and there were no trends in relation to medication errors in the centre.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Each child had a comprehensive personal plans in place which which gave a clear outline in terms their care needs. Each plan began with an 'All About Me' document which explored their family life, where they came from, like and dislikes and their very favourite thing to do. The plans reviewed by the inspector also went on to include what each child's day looked like and included routines around school, personal care and how best to support them in the morning and evening.

It was apparent that children were also well supported by the multidisciplinary team with regular involvement documented by psychiatry, behavioural support, speech and language, occupational therapy and social work.

Each plan contained very clear guidance in terms of each child's particular needs and routines. Each part of their day was broken down into a step-by-step guide including preparing for bed, mealtimes, going to school, dressing and how to best support them with their personal care needs.

Judgment: Compliant

Regulation 6: Health care

The actions from the last inspection had been addressed with clear guidance now in place to guide staff in relation to care for a PEG and also the monitoring the skin integrity of the PEG site.

The children enjoyed a general level of good health and there was no child awaiting formal review for known health conditions on the day of inspection.

Judgment: Compliant

Regulation 8: Protection

There was a marked improvement in the safeguarding of children in this centre. Issues in relation to compatibility remained; however, incidents of a safeguarding nature had significantly reduced. Staff reported that some children were a lot more settled and episodes of challenging behaviour, which had previously upset others and also had the potential to impact on safeguarding, were no longer a regular occurrence.

Despite the improvement in safeguarding, the provider still recognised the potential for safeguarding issues and plans remained in place to transition two children to a new centre which was located directly beside their current home.

There were eight overarching safeguarding plans in place to protect children from harm in this centre. The inspector found that these plans were comprehensive in nature and assisted in ensuring that a consistent approach was in place to protect children from harm. From talking to management of the centre and also by reviewing plans it was clear that the provider had taken safeguarding seriously with comprehensive reviews of care in place as both a proactive and reactive measure should issues arise.

Judgment: Compliant

Regulation 9: Residents' rights

The children were actively involved in decisions about their care and home. Key worker sessions were occurring weekly and gave children a platform to discuss upcoming events like birthdays, religious celebrations and seasonal events like Christmas and Easter. Staff had also covered the recent maintenance in the centre with a social story which ensured that children knew that there would be some slight disruption to their home.

The keyworking sessions were also used to plan activities, meals and preferred snacks for the coming week. It was at these meetings that children also decided on activities, with the cinema, swimming and a movie night known favourites among all the children in the centre.

Judgment: Compliant

Appendix 1 - Full list of regulations considered under each dimension

This inspection was carried out to assess compliance with the Health Act 2007 (as amended), the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, and the Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013 (as amended) and the regulations considered on this inspection were:

Regulation Title	Judgment
Capacity and capability	
Regulation 15: Staffing	Substantially compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 31: Notification of incidents	Compliant
Quality and safety	
Regulation 12: Personal possessions	Substantially compliant
Regulation 13: General welfare and development	Substantially compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant

Compliance Plan for Finvola OSV-0007767

Inspection ID: MON-0039956

Date of inspection: 14/01/2026

Introduction and instruction

This document sets out the regulations where it has been assessed that the provider or person in charge are not compliant with the Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, Health Act 2007 (Registration of Designated Centres for Persons (Children and Adults with Disabilities) Regulations 2013 and the National Standards for Residential Services for Children and Adults with Disabilities.

This document is divided into two sections:

Section 1 is the compliance plan. It outlines which regulations the provider or person in charge must take action on to comply. In this section the provider or person in charge must consider the overall regulation when responding and not just the individual non compliances as listed section 2.

Section 2 is the list of all regulations where it has been assessed the provider or person in charge is not compliant. Each regulation is risk assessed as to the impact of the non-compliance on the safety, health and welfare of residents using the service.

A finding of:

- **Substantially compliant** - A judgment of substantially compliant means that the provider or person in charge has generally met the requirements of the regulation but some action is required to be fully compliant. This finding will have a risk rating of yellow which is low risk.
- **Not compliant** - A judgment of not compliant means the provider or person in charge has not complied with a regulation and considerable action is required to come into compliance. Continued non-compliance or where the non-compliance poses a significant risk to the safety, health and welfare of residents using the service will be risk rated red (high risk) and the inspector have identified the date by which the provider must comply. Where the non-compliance does not pose a risk to the safety, health and welfare of residents using the service it is risk rated orange (moderate risk) and the provider must take action *within a reasonable timeframe* to come into compliance.

Section 1

The provider and or the person in charge is required to set out what action they have taken or intend to take to comply with the regulation in order to bring the centre back into compliance. The plan should be **SMART** in nature. **S**pecific to that regulation, **M**easurable so that they can monitor progress, **A**chievable and **R**ealistic, and **T**ime bound. The response must consider the details and risk rating of each regulation set out in section 2 when making the response. It is the provider's responsibility to ensure they implement the actions within the timeframe.

Compliance plan provider's response:

Regulation Heading	Judgment
Regulation 15: Staffing	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 15: Staffing: As there is no legal requirement for an employer to provide a reference; a statement of employment is often submitted to GALRO HR at the time of pre-employment. When we receive a statement of employment we seek to verify its legitimacy. We revised the reference request document to include additional verification details for a statement of employment.</p> <p>We revised the reference request document to include a section that HR personnel sign in the event that a reference is completed over the phone with the referee.</p>	
Regulation 12: Personal possessions	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 12: Personal possessions: We conducted a full financial review of all resident's money. We reimbursed three items paid for by a resident which should have been paid for by the provider. We introduced new guidelines for staff to ensure that such discrepancies do not reoccur. We updated the resident's inventory records to account for all of their belongings including those belongings which are kept in the family home.</p>	

Regulation 13: General welfare and development	Substantially Compliant
<p>Outline how you are going to come into compliance with Regulation 13: General welfare and development:</p> <p>We explored alternative school options. There are no viable alternative options as the alternative schools do not have the required resources or environment to adequately support the child. On that basis the alternative schools would not consider offering a school placement.</p> <p>The current school placement has acquired additional resources to support this child over the years in accordance with their evolving needs. Finvola management continue to work cohesively with the school in an effort to safely increase the child's schedule of attendance.</p> <p>Daily communication is maintained with the school, along with formal correspondence and meetings as required. The child's parents are actively involved in all decisions made in relation to their child's education. The school have committed to participating in a progression plan with the aim of increasing the time the child spends in school.</p>	

Section 2:

Regulations to be complied with

The provider or person in charge must consider the details and risk rating of the following regulations when completing the compliance plan in section 1. Where a regulation has been risk rated red (high risk) the inspector has set out the date by which the provider or person in charge must comply. Where a regulation has been risk rated yellow (low risk) or orange (moderate risk) the provider must include a date (DD Month YY) of when they will be compliant.

The registered provider or person in charge has failed to comply with the following regulation(s).

Regulation	Regulatory requirement	Judgment	Risk rating	Date to be complied with
Regulation 12(1)	The person in charge shall ensure that, as far as reasonably practicable, each resident has access to and retains control of personal property and possessions and, where necessary, support is provided to manage their financial affairs.	Substantially Compliant	Yellow	20/01/2026
Regulation 13(4)(a)	The person in charge shall ensure that residents are supported to access opportunities for education, training and employment.	Substantially Compliant	Yellow	06/02/2026
Regulation 15(5)	The person in charge shall ensure that he or she has obtained in respect of all staff the information and documents	Substantially Compliant	Yellow	16/02/2026

	specified in Schedule 2.			
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