Health Information and Quality Authority

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

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

Issued by the Chief Inspector

Name of designated centre:	Pebble Bay
Name of provider:	Talbot Care Unlimited Company
Address of centre:	Wicklow
Type of inspection:	Announced
Date of inspection:	21 April 2026
Centre ID:	OSV-0008630
Fieldwork ID:	MON-0042686

About the designated centre

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

Pebble Bay is a designated centre operated by Talbot Care Unlimited Company. The centre is located in a large town in county Wicklow that is close to many services and amenities. The centre provides a residential service for children with intellectual disabilities and autism who may also have mental health difficulties and behaviours of concern. The services at Pebble Bay are provided in a home-like environment that promotes dignity, respect, kindness, and engagement for each child. Children are encouraged and supported to participate in the community and to avail of the amenities and recreational activities. The centre is managed by a full-time person in charge, and the staff complement includes senior social care workers and direct support workers.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	4

How we inspect

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
Tuesday 21 April 2026	15:00hrs to 18:00hrs	Eoin O'Byrne	Lead
Wednesday 22 April 2026	10:15hrs to 15:30hrs	Eoin O'Byrne	Lead
Tuesday 21 April 2026	15:00hrs to 18:00hrs	Jennifer Deasy	Lead
Wednesday 22 April 2026	10:15hrs to 15:30hrs	Jennifer Deasy	Lead

What residents told us and what inspectors observed

The announced inspection took place over two days. On the first day, inspectors spent time with the young people, the staff team, and the person in charge. Inspectors met all four young people and the five staff members who supported them. Inspectors also spoke with representatives of each young person. Feedback from these interactions was very positive. The person in charge and the incoming person in charge facilitated the inspection.

The second day involved a more formal review of documentation and records, including governance arrangements and information relating to how the service was managed and the type of care and support provided to the young people.

Inspectors met with all four children who lived in the designated centre on the afternoon of the first inspection day. They spent three hours chatting and playing with the young people and their staff team, while also observing the delivery of care. Inspectors spoke with one parent and three social workers during the inspection.

Overall, inspectors observed and heard that the children were happy, safe, and comfortable in their home. Their needs were met, and their development and well-being were promoted. All regulations assessed during the inspection were found to be compliant, and the service went beyond the requirements of the regulations, striving to meet national standards.

It was evident that the young people were at ease in their home. There were numerous examples of the young people seeking comfort and assurance from those supporting them, and staff members demonstrated knowledge of how to support each young person individually.

Inspectors met each child as they returned from school. They observed staff following each child's lead and allowing them to settle at their own pace after a busy day. One child needed extra time to transition into the house, and staff ensured they had as much time as needed. Inspectors noted the children were well dressed and that their personal care was well attended to by the staff team. Two staff members described to inspectors the specific hair care routines in place for two of the children. A family member also complimented the staff team on how well they looked after the children's hair.

One child showed inspectors presents they had received from their mother following a family visit. The child was proud of the gifts and eager to share them with inspectors and staff. Staff members responded enthusiastically.

This child gave an inspector a tour of their home and bedroom. The inspector observed that the bedroom was beautifully decorated in a child-friendly style,

reflecting the child's personal tastes. Inspectors saw that all the bedrooms were well presented. One child had decorated their bedroom door with stickers that reflected their interests.

One child told an inspector that they were very happy in their home, describing it as a good place to live and speaking fondly of the staff team. The child shared, "I loved the garden and I love the trampoline." This child also completed a resident's questionnaire, writing, "I love the food. I choose the menu on Saturday," and "I love my bedroom."

All the children required support with communication. These supports included picture schedules, objects of reference, and direct guidance. Inspectors observed staff using these communication systems throughout the day. Children were provided with choices and supported to have autonomy in their routines. For example, when a child asked to visit a playground, staff offered options for playgrounds that could be facilitated. In another instance, a staff member used objects of reference to help a child choose between reading a book and watching television.

Interactions between staff and children were respectful, gentle, and caring. Staff engaged positively and affectionately with the children in age-appropriate ways. Inspectors saw that dinner was a positive mealtime experience, with children supported to eat together according to their preferences.

As part of the inspection, inspectors contacted and spoke with representatives for all four young people, requesting feedback on the care and support provided. All responses were positive. One representative stated they were happy with the service, noting a home-like environment during previous visits. They highlighted clear communication with the staff team and said the child was well cared for. Other representatives also gave positive feedback, complimenting the staff team and the excellent multidisciplinary supports available to the children. Social workers and family members said the service communicated well and was proactive in meeting the children's needs. One family member remarked there was "clearly love and care going in" to the service.

The designated centre was a detached house in an urban area of Co. Wicklow. It was well maintained, both inside and out, and was spacious and homely. Each child had their own bedroom, two of which were en suite. The centre also included two playrooms, a sitting room with additional play equipment, a kitchen, dining room, communal bathroom, and a large garden with play facilities.

All rooms in the centre were very clean and decorated in a child-friendly manner. Colourful murals adorned playroom walls, and photographs of the children were displayed in communal areas. Sensory play equipment was readily available and children freely used it, including trampolines and spinning chairs. There were opportunities for child-led play, and staff joined children in their play, encouraging communication and interaction.

In summary, Inspectors found that the designated centre provided a safe, caring, and child-focused environment. The centre promoted positive relationships, effective

communication, and high standards of care, exceeding regulatory requirements and supporting each child's individual needs.

Capacity and capability

Inspectors reviewed the provider's governance and management arrangements and found them appropriate. They ensured that the service provided to each child was safe, suitable to their needs, consistent, and effectively monitored. Systems were in place to monitor incidents, complaints, and safeguarding concerns, with appropriate actions taken and learning used to inform improvements in practice. The review of information and observations over the two days demonstrated that the provider had a commitment to compliance with the regulations and standards, and to promoting a culture of safety and child-centred care within the designated centre.

The inspectors also reviewed the provider's arrangements regarding staffing and staff training. The review of these areas found that they complied with the regulations.

An inspector reviewed a sample of staff rosters and found that the provider had maintained safe staffing levels. The person in charge ensured that the staff team had access to, and had completed, training programmes to support them in caring for the residents.

In summary, the review of information demonstrated that the provider had systems in place to ensure that the service provided to children was person-centred and safe.

Regulation 15: Staffing

As part of the inspection process, an inspector reviewed the staffing arrangements within the centre. The staffing arrangements were found to be appropriate to meet the needs of the children. This included a review of the current staff roster, as well as rosters from one week in January and one week in February of the same year. A comparison of the rosters across the three time periods demonstrated that a consistent staff team was in place to support the children. Discussions with staff members on the first day of the inspection confirmed that many staff members had worked with the children for a prolonged period, supporting continuity of care. The review of rosters also indicated that the skill mix of staff supporting the children was appropriate and sufficient to meet their assessed needs. As stated earlier in the report, there was a large staff presence each day, which was deemed appropriate to support the children and did not impact their rights. As part of the inspection process, an inspector reviewed staff members' records in line with the requirements

of Schedule 2 of the regulations. Records for six members of the staff team were examined. This review found that the provider had ensured all required documentation was in place and appropriately maintained. Staff files contained the necessary information as required under the regulations, demonstrating that safe recruitment practices were followed. This included Garda vetting, evidence of staff members' training, employment history, and suitable references, all of which were available for review. In summary, the inspection found that staffing arrangements at the centre were appropriate, consistent, and met regulatory requirements, with staff continuity and safe recruitment practices in place.

Judgment: Compliant

Regulation 16: Training and staff development

An inspector reviewed the systems in place to ensure that the staff team received appropriate training and possessed adequate knowledge for their roles. This appraisal indicated that suitable systems were in place.

An inspector reviewed the training records for the staff team as part of the inspection process. The review identified that staff had completed a comprehensive range of mandatory and role-specific training.

- Training completed included:
- Fire safety training
- Managing behaviour that is challenging
- Children First training
- Infection prevention and control training
- Personal protective equipment (PPE) training
- Communication skills training
- Conflict resolution training
- Epilepsy awareness training
- Positive behaviour support training
- Understanding autism training
- First aid training
- Supporting people on the autistic spectrum training

Discussions with staff members identified that they had an appropriate level of knowledge regarding the children's care and support needs. Staff were able to clearly describe safeguarding practices, medication management, and arrangements in place to support the children in education. This demonstrated that staff were receiving relevant and appropriate training.

Observations on the first day of the inspection also identified that staff members carried out their duties in a professional and appropriate manner.

Monthly staff meetings were held. Inspectors reviewed the records of two meetings from February and March 2026. These meetings provided opportunities for the person in charge to discuss pertinent issues relating to the service and to ensure staff were informed of their roles and responsibilities.

The supervision records for five staff were reviewed. Inspectors saw that supervision was carried out as frequently as defined by the provider's policy. Supervisions were clearly used to performance manage and develop staff. Action plans were developed where required in order to enhance staff competencies.

In summary, staff received comprehensive and appropriate training, providing them with the necessary skills and knowledge to meet the needs of children in their care.

Judgment: Compliant

Regulation 23: Governance and management

Inspectors found that the designated centre benefited from effective governance and management arrangements. Clear management structures were in place, and the roles and responsibilities of the provider, person in charge, and staff team were well defined and understood.The person in charge demonstrated strong oversight of the service and was knowledgeable about the needs of the children, the governance systems in place, and the day-to-day operations of the centre. Appropriate systems were in place to monitor the quality and safety of care provided, including regular reviews of areas such as:

- Medication audits
- Governance and management audits
- Health and safety audits
- Positive behaviour support audits
- Staff training audits
- Children's healthcare audits

An inspector reviewed a sample of these audits and found that, where required, improvements were identified. Action plans had been established, and there was evidence that actions were addressed promptly. For example, several actions were identified in a February medication audit, while the March audit found no actions. An inspector also reviewed medication management practices and found them to be compliant, demonstrating a prompt response to adverse findings.

Monthly oversight visits were completed by members of the provider's senior management. The provider also ensured that necessary visits and reports were completed in line with regulations, leading to further effective oversight of the service provided to children.

Overall, the governance and management systems in place were found to be effective and ensured that a high standard of care and support was consistently provided to children.

Judgment: Compliant

Quality and safety

The inspection concluded that the children were receiving a good standard of care and support. Children were supported to live in a safe and child-centred environment. Comprehensive assessments of their needs had been completed, informing the care and support plans developed. The inspector reviewed samples of these, and they were found to be well written and to reflect the children's changing needs. Care practices observed were warm, respectful, and responsive to children's individual needs.

Key areas, including protection, risk management, communication, medication management and behaviour support, were studied and found to be compliant with regulatory requirements.

In summary, the children appeared happy at home, and the information review indicated they were engaged in activities they enjoyed.

Regulation 10: Communication

All of the children living in the centre required support with their communication. Inspectors saw, on reviewing children's files that they had up to date communication assessments which were written by relevant multidisciplinary professionals. These assessments informed care plans which detailed strategies required to ensure that children could effectively exercise their right to communicate.

Inspectors saw that these strategies were implemented in the centre and that staff were familiar with them and could use them to support communication. For example, inspectors saw staff using objects of reference to assist a child with making a choice for their evening activity. Inspectors also saw staff offering clear and consistent choices as recommended by one support plan. Inspectors were told that there was further training planned for staff to enhance their competencies in providing for a total communication environment.

Staff members were seen to be responsive to children's verbal and non-verbal requests.

Visual supports in the centre were accurate and clearly reflected the staff team on duty and the week's menu plan.

Judgment: Compliant

Regulation 13: General welfare and development

Inspectors found that children were well cared for, and their overall welfare and development were effectively promoted. The designated centre provided a warm, welcoming, and child-centered environment where children appeared comfortable and settled in their home.

Children were supported to attend school in accordance with their assessed needs, emphasising the importance of education in their daily lives. They were also encouraged to identify and work towards individual goals on a monthly basis. Goal-setting served as a meaningful way to promote development and participation. Records reviewed showed a balance of goals, including those focused on developing practical life skills and others aimed at promoting play, enjoyment, and having fun.

For example, one child had several keyworking sessions to plan their birthday party and select a present they wanted to receive. Another goal for a different child involved attending and participating in a St. Patrick's Day parade, while another goal focused on developing healthy eating skills.

The inspector also reviewed daily notes that captured the activities the children engaged in. During the Easter holidays, the children took part in a variety of activities, including nature walks, local community outings, visits to play centres, and an Easter egg hunt.

Additionally, some children were supported in engaging in life story work, which helped them understand and process previous life events. This work was linked to the therapies the children were participating in.

Judgment: Compliant

Regulation 17: Premises

The designated centre was well-maintained internally and externally. It was clean, bright and homely. The centre was spacious and offered ample communal and private spaces for the children. Each child had their own bedroom and shared playrooms, a kitchen, a dining room, sitting room and garden. There was sufficient play equipment in the house and in the garden to meet the children’s needs.

All furniture and fittings were clean and well-maintained. The house was decorated in a child-friendly manner with colourful murals, artwork and photographs on display. Children's bedrooms were decorated in line with their individual tastes and reflected their hobbies and interests. There was sufficient storage for children's belongings and inspectors saw that their belongings were stored or displayed carefully.

The kitchen was clean and well-maintained and provided suitable facilities to prepare and cook food.

Judgment: Compliant

Regulation 18: Food and nutrition

Children were being provided with a range of wholesome and nutritious food which were properly prepared and served. Meals offered also reflected their dietary preferences and needs; for example, inspectors were told of how foods were prepared which reflected one child's culture.

One of the children showed an inspector the menu plan for the week. They knew what was for dinner on the day of inspection and spoke excitedly of plans to get take away at the weekend. Dinner on the day of inspection was meatballs, pasta and salad. The food prepared looked and smelled appetising. Three of the children sat together for the meal and were provided with support from the staff team to eat if they required it. Staff were responsive the children's requests for drinks and other assistance. The mealtime was seen to be pleasant and relaxed and reflected a typical family dinner.

The fridge was seen to contain fresh fruit, milk and yoghurts. Suitable fresh meat was in the fridge on the second day for that evening's dinner of lasagne.

One of the children had a restricted diet in line with their preferences. Inspectors saw that there was an assessment completed by a dietitian and recommendations were made to enhance this child's diet. An inspector reviewed the food records for this child over the course of one week and saw that these recommendations were being implemented.

Judgment: Compliant

Regulation 20: Information for residents

The inspectors found that the children were provided with age-appropriate and accessible information about the designated centre, their rights, and what to expect while living there.

Judgment: Compliant

Regulation 26: Risk management procedures

There were suitable risk management systems implemented in the service. An up-to-date risk management policy informed the risk oversight of the centre. A comprehensive risk register was maintained which reflected the risks presenting and detailed control measures to mitigate against these risks. Control measures were seen to be proportionate and suitable in respect of the risk identified.

Individual risk assessments were also in place where required. Control measures required to mitigate against individual risks were in place. For example, one risk assessment detailed that all staff be trained in autism awareness and positive behaviour support as a control measure. Records showed that this training was up-to-date,

Adverse incidents were regularly reviewed and learning was taken from, and documented, to assist with preventing future occurrences of similar incidents.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

Medications were stored securely in the centre. Each child's medications were stored separately. An inspector reviewed the medications for two children and saw that each medication was labelled with the child's name and was dated. There were no out-of-date medications observed stored in the presses.

Children's medication administration records were up-to-date. An inspector reviewed the medications administered to two children over two weeks in April 2026 and saw that medications were administered as prescribed. Medication profiles detailed potential side effects of medications. The person in charge as informed of these side effects and had ensured there was suitable oversight from a medical professional to monitor for side effects.

Medication audits were completed by the provider. An audit in February 2026 found 16 actions required to ensure safe medication storage and administration. The action plan detailed that all actions were completed. An inspector checked five of these required actions and saw that they had been completed.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

Inspectors reviewed the files for two children in detail and reviewed aspects of the other two children's information. These files contained their individual assessments and care plans. Inspectors saw that a comprehensive assessment of each child's needs had been completed on admission and was updated as required subsequently. These assessments were informed by multidisciplinary professionals and also reflected children's and their representatives' preferences in respect of their care.

Care plans were implemented in respect of each assessed need including in respect of health, social care and educational needs. All of the children were attending school. Where there were gaps identified in respect of multidisciplinary oversight, the person in charge, had referred to external professionals and had ensured that this area was reviewed. For example, one child had been supported to access a consultant psychiatrist for a review of medication as they were on a long waiting list for public mental health services.

Care plans were written in a rights-informed manner. For example, the goal of a personal care plan was to "provide comfortable, safe and supportive care" and to support the child's "emotional wellbeing and personal preferences" in the provision of this care.

Strategies recommended by multidisciplinary professionals were clearly being implemented. For example, inspectors saw that social stories were used to assist children to understand aspects of their development, and sensory equipment was available as prescribed by an occupational therapist.

Regular child in care reviews were being held for children who were under care orders. Copies of these care orders were also maintained on file.

Judgment: Compliant

Regulation 6: Health care

Young people's health needs were being met through regular review and access to appropriate health and social care supports.

An inspector reviewed the health information of two young people and found that their health needs were under ongoing review and that they were being supported to maintain their health.

Young people were accessing a range of allied health care professionals, including:

- Occupational therapy
- Mental health therapy
- Play therapy
- Dietitian services
- Dental services
- Speech and language therapy

Input from other relevant medical and allied health care specialists in line with young people's diagnoses and assessed needs
There was evidence of young people attending appointments as required, as well as proactive follow-up by staff in relation to appointments. Records also demonstrated examples of the management team seeking specialist input to respond to the changing needs of young people.

Judgment: Compliant

Regulation 7: Positive behavioural support

There were a low number of restrictive practices in place in the centre. These were logged on a restrictive practices log and were reviewed regularly to ensure they were the least restrictive possible and in place for the shortest duration. A clear rationale was detailed for each restrictive practice. One child told inspectors of some of the restrictive practices and demonstrated a clear understanding of their purpose and the rationale for them.

Inspectors saw that, where children required support with managing their behaviour, there were up-to-date behaviour support plans on their files. These were written in a manner which upheld children's rights. They detailed proactive and reactive strategies to respond to behaviour. Staff members spoken with were informed of the behaviour support plans and told inspectors of the training that they had in meeting children's behaviour needs.

Judgment: Compliant

Regulation 8: Protection

Inspectors found that appropriate safeguarding arrangements were in place within the centre. Where incidents had occurred, these had been appropriately identified and investigated by the provider in line with local policy and regulatory requirements.

Records reviewed showed that the provider had taken appropriate action following these incidents and had notified and engaged with the relevant external bodies where required. This demonstrated that the provider understood their safeguarding responsibilities and was proactive in ensuring concerns were managed appropriately.

An inspector reviewed an internal safeguarding measures report which had been completed to help guide staff members in reducing safeguarding incidents and protecting all young people. The inspector found that the report was well-written and gave the reader clear and effective guidance.

There were also training certs available for review that showed that staff members had completed Children First training.

Overall, the systems in place supported the protection and welfare of the young people.

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	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Quality and safety	
Regulation 10: Communication	Compliant
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 18: Food and nutrition	Compliant
Regulation 20: Information for residents	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 6: Health care	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant