



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

Issued by the Chief Inspector

Name of designated centre:	Mabestown House
Name of provider:	Talbot Care Unlimited Company
Address of centre:	Meath
Type of inspection:	Unannounced
Date of inspection:	23 June 2026
Centre ID:	OSV-0008768
Fieldwork ID:	MON-0049874

About the designated centre

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

Mabestown House provides a respite service for six children, both male and female, from 4 up to 18 years of age, who have intellectual disability, autism or acquired brain injury and may also have mental health difficulties and behaviours of concern. Its design and layout replicate a family home environment where possible. The comfortable and welcoming feel of the house, which includes a 1-bedroom Apartment, is consistent with a home-from-home-like environment. The main house has five individual bedrooms, 3 with en-suite. A large kitchen/dining room with a utility room. A large living room and a separate sitting room. There is a shared bathroom, WC, and staff office. The bedrooms are fitted out to a very high standard, and the children are encouraged to decorate their rooms and bring personal items, which will ensure their environment is as homely as possible. Mabestown House is located close to a large town in Co Meath, and residents can access an extensive range of amenities with staff support. The respite service is staffed on a twenty-four-hour basis.

The following information outlines some additional data on this centre.

Number of residents on the date of inspection:	5
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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 23 June 2026	15:30hrs to 18:00hrs	Eoin O'Byrne	Lead
Wednesday 24 June 2026	09:00hrs to 15:30hrs	Eoin O'Byrne	Lead

What residents told us and what inspectors observed

This was an unannounced inspection conducted over two days. The first day took place during the evening, where the inspector observed interactions between staff and young people, with a particular focus on the care and support provided. The second day focused on reviewing a large volume of documentation relating to the service, including governance arrangements, management systems, and overall service delivery.

The findings of the two-day inspection were positive, with all areas reviewed found to be compliant with the relevant regulations. The inspector found that appropriate governance and management arrangements were in place, ensuring that young people consistently received a good standard of care during their respite stays.

As part of the inspection process, the inspector spoke with six families who were availing of the respite service. Two family members were met in person and four were consulted by telephone. Feedback from all families was very positive. Some described their loved ones as being very eager to attend, with reports of young people "running in the door" happily on arrival. Families spoke positively about the quality of care provided and consistently highlighted effective communication between themselves, the staff team, and management. They also noted that young people were offered a range of activities during their respite stays. All families were asked if they thought any areas needed improvement, and all spoke highly of the care and support provided.

During the course of the inspection, the inspector met with five young people on the first day. They arrived at different times from school and home and engaged in a variety of activities, including spending time in the garden, using the on-site sensory room, relaxing in the sitting room, and playing with a wide range of toys. Outdoor activities included the use of swings, a trampoline, and a water play table. The environment was busy, with five young people and five staff members present, ensuring that each young person received one-to-one support and supervision. This high level of support was also noted and valued by family members.

One of the young people told the inspector they liked coming to the respite service and liked using the swing in the garden which they were observed to use.

The inspector observed warm, respectful, and considerate interactions between staff and young people. The young people primarily engaged with staff rather than with each other and appeared content, well supported, and actively engaged in a range of activities throughout their respite stay.

The inspector observed the staff team offering young people a range of activities. Some young people were supported to choose activities using visual aids, while others were engaged through verbal interaction. Pictures, visual supports, and "first

and next” sentence boards were readily available and were used appropriately by staff when required. The inspector observed some of the young people going for a drive with staff to look at airplanes, as the airport was nearby. This was facilitated by staff members.

Some young people, when offered activities, chose not to engage and instead preferred to relax in the sitting room, and this choice was respected by staff.

The house was laid out in a manner that met the needs of the young people, with designated play areas and appropriate play equipment available throughout the premises. The house was also found to be clean and well-maintained. The inspector visited all parts of the designated centre, including the apartment which was attached to the house. This apartment was utilised, for example, for young people who may find the main part of the house over stimulating or who preferred their own space. Some of the young people who stay in the apartment also access the main part of the house. For instance, on the first day of the inspection, the inspector observed a young person staying in the apartment mixing with the other young people in the main house and playing with the toys and staff members.

When reviewing young people’s information, the inspector found that the provider and person in charge had ensured that appropriate assessments of need had been completed. Following these assessments, care and support plans had been developed for each young person.

The inspector found that the current support plans were detailed, despite this being a respite service where most young people availed of the service for only two days per month. The support plans provided sufficient information to guide staff in how to care for and support each young person effectively.

During the course of the inspection, the inspector interacted with nine members of the staff team over the two days. The inspector spoke in more detail with three staff members regarding the care and support provided to young people.

These staff members demonstrated good knowledge of the practices in place. In particular, two staff members were able to speak in detail about how to respond to safeguarding concerns, including who should be contacted and how young people would be supported. Another staff member demonstrated clear knowledge of medication management practices within the designated centre. The review of staffing arrangements identified that there was a consistent staff team in place and also found that the staff team had been provided with adequate training to best support the young people.

The inspector also observed the staff team managing the admissions process on the first day of the inspection. In addition, the inspector observed staff practices prior to admission on the second day, as well as the handover process in preparation for incoming young people. The inspector found that this preparation was thorough, with young people’s needs clearly discussed to ensure that each staff member understood how to best support them.

In summary, the findings from this inspection were positive. This was a busy service, with nearly 60 young people and their families receiving respite breaks. The feedback from families was very positive, and observations and the review of information during the course of the inspection identified that this was a well-run service, providing a good service to the young people during their respite breaks.

Capacity and capability

The inspector found that there were strong governance and management systems in place within the respite service. The provider and person in charge demonstrated effective oversight of the service. Regular monitoring and review systems supported the ongoing delivery of a safe and quality service.

Staffing arrangements were found to be safe and appropriate to meet the needs of the young people attending the service. A consistent staff team was in place, which supported continuity of care.

The provider had ensured that staff had access to appropriate training to support them in their roles. Training was relevant to the needs of the young people and contributed to the delivery of safe, effective, and person-centred care.

Overall, the inspector found that the provider had ensured that the service was well resourced and effectively governed to meet the needs of young people attending the respite service.

Regulation 15: Staffing

The inspector reviewed the staffing arrangements in place. This included an appraisal of staffing rosters, specifically the current roster, along with rosters from February and May of this year.

The review of these rosters identified that there was a consistent staff team in place. There had been a period during which two staffing vacancies existed; however, these were in the process of being filled, with new staff due to commence in the coming weeks.

Safe staffing levels were maintained across all three roster periods. During the period of staff vacancies, existing staff members took on additional shifts, and the provider also utilised staff from other services to ensure that all required shifts were covered.

As discussed earlier in the report, the inspector found that staff members were knowledgeable in their roles and interacted with young people in a caring and respectful manner.

As part of the review of staffing arrangements, the inspector examined a sample of staff files in line with Schedule 2 of the regulations. Five staff files were reviewed, and it was found that the provider had ensured that all required information was in place. This included evidence of Garda vetting for each staff member, two appropriate references, and a clear and documented employment history for each individual reviewed.

Judgment: Compliant

Regulation 16: Training and staff development

The inspector reviewed the systems in place to ensure that the staff team received appropriate training and possessed the necessary knowledge to fulfil their roles. This review identified that suitable and effective systems were in place.

As part of the inspection process, the inspector reviewed the staff team's training records. This review identified that staff had completed a comprehensive range of mandatory training. Training completed included:

- * Fire safety training
- * Percutaneous Endoscopic Gastrostomy (PEG) feeding.
- * Managing behaviour that is challenging
- * Children First training
- * Infection prevention and control training
- * Human rights and communication
- * Epilepsy awareness training
- * People handling
- * Medication management
- * First aid training
- * Diabetes and insulin management training

Discussions with staff indicated they had an appropriate level of knowledge about the care and support needs of the young people. Staff were able to clearly describe safeguarding practices and the medication management arrangements in place to support young people. This demonstrated that staff were receiving relevant and appropriate training to carry out their roles effectively.

The inspector also completed an appraisal of the supervision systems and reviewed the supervision records of three staff members. The inspector found that supervision was provided to the staff team regularly and that there was a clear focus on performance management and on enhancing the service provided to young people. The person in charge, when required, identified areas staff needed to improve on

and set targets with staff members. This identified a proactive approach to performance management.

Judgment: Compliant

Regulation 23: Governance and management

The inspector reviewed the current governance and management arrangements and found them to be appropriate. The systems in place ensured that the staff team was sufficiently prepared to support and care for the young people availing of the respite service. These systems also ensured that the care and welfare provided to young people were appropriate.

In reaching this conclusion, the inspector reviewed a large volume of information relating to the management of the service and the care and support provided to young people. The person in charge and the service management team, which included two senior leads, conducted regular audits of service delivery and care practices. The person in charge was also supported in their role by an Assistant Director, who had regular input regarding the service being provided and was also involved in auditing the service. A sample of these audits was reviewed and found to be effective in identifying areas for improvement and in driving enhancements in the care and support provided to young people.

The inspector also reviewed the providers two most recent unannounced inspection reports completed by a provider representative in February and April of this year. The review found that improvements were being identified and that systems were in place to ensure these areas were addressed. For example, one area identified as needing improvement was the development of communication passports for all young people. The inspector found that this was an ongoing process, but the majority of young people now had them in place. Another action was to ensure that all staff members had up-to-date training, and the inspector found that this had also been addressed.

The inspector reviewed the two most recent staff team meeting minutes and found that the meetings were used to share information and upskill the staff team. The person in charge presented the staff team with potential learnings from the outcomes of recent inspections completed in the provider's other services, as well as from inspection findings from other providers. This was an effort to enhance the service being provided to the young people.

The inspector also found that the meeting was used to discuss the progress of many of the young people and to ensure that all staff were up to date with changes in needs and other relevant information.

In summary, the inspector found that the respite service was well managed, with systems in place to ensure that staff were prepared to care for the young people who use the service.

Judgment: Compliant

Regulation 24: Admissions and contract for the provision of services

As outlined earlier in the report, the inspector observed the admissions process on the first day of the inspection and the pre-admission process on the second day. The inspector found that the systems in place were appropriate to ensure that young people were safely admitted to the service and that staff members were adequately prepared, with the necessary knowledge to support their needs.

For example, on the first day of the inspection, the inspector observed staff receiving young people into the service, including the handover of medication from family members. Staff followed a checklist to ensure that all items belonging to the young people were accounted for and completed a verbal handover with family members to identify any updates or additional information required.

On the second day of the inspection, the inspector observed a pre-admission handover, where staff discussed the needs of the young people scheduled to attend the respite service. This ensured that staff had up-to-date information and clearly understood how to support each individual. Duties were also appropriately allocated among staff members in preparation for the young people's arrival.

Discussions with the Assistant Director of Services and a senior social worker indicated that compatibility among young people was regularly reviewed to ensure that individuals attending the service were placed with peers with whom they were comfortable and compatible.

Judgment: Compliant

Quality and safety

The inspector found that there were appropriate and comprehensive assessments of the young people's needs in place. These assessments informed care planning and ensured that supports provided to the young people during their respite breaks were appropriate.

Care and support was delivered in a person-centred manner, with due regard to the dignity, and wellbeing of each young person. Feedback from family members whom

the inspector spoke with was very positive. Families expressed satisfaction with the care provided and the service overall.

Young people attending the respite service were observed to be comfortable and content in their environment, and appeared happy and at ease during their time in the service.

Overall, the inspector found that the service promoted positive outcomes for young people and delivered care in a safe, and supportive environment.

Regulation 17: Premises

The inspector found that the premises were well maintained, well presented, and clean, providing a homely environment for the young people. As previously noted, adequate indoor and outdoor play and recreation facilities were available. Young people were observed engaging with and enjoying the various play options provided.

The service's layout was appropriate and designed to meet the needs of the young people attending, including those with mobility needs.

Overall, the inspector concluded that the provider and the person in charge had ensured that the premises were appropriately maintained and were suitable in meeting the needs of the young people accessing the respite service.

Judgment: Compliant

Regulation 26: Risk management procedures

As part of the inspection process, the inspector reviewed the service's risk management arrangements. This appraisal identified that appropriate and effective risk management systems were in place, supporting the identification, assessment, and management of risks.

During the appraisal of young people's information, the inspector found that some of the young people had presented with challenging behaviours and that incident reports had been completed. The inspector reviewed incident reports involving three young people. This review examined the nature of the incidents, how staff responded, and the learning identified following each event. It was found that staff responded appropriately to incidents and that learning outcomes were prioritised and discussed within staff team meetings.

In addition, the inspector reviewed risk assessments developed for four young people. These assessments were clearly linked to each young person's assessed

needs and their individual support plans. They provided clear guidance for staff on maintaining the safety of young people, outlining potential risks, the reasons incidents may occur, and the appropriate responses required.

The inspector found, when reviewing the risk assessments, that one-to-one staff supervision was a consistent risk control measure, and the provider was implementing this each day. The review of other risk control measures, including some restrictive practices, identified that the control measures were proportionate to the level of risk.

Overall, the inspector was satisfied that suitable risk management arrangements were in place.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

The inspector found that effective systems were in place for the safe management of medicines within the respite service.

Medicine administration practices were observed to be in line with best practice. A staff member showed the inspector the medication storage arrangements and discussed the medication checks and handover practices that are completed when the young people avail of respite. The inspector observed a senior staff member completing these checks with a family member over the phone prior to the young person's admission. For example the the staff member enquired if medication changes had been made since the young person's last admission to ensure that the medication administration records (MARs) were accurate.

There was evidence that staff had received appropriate training in safe medication management, and that competency assessments had been completed. The staff team included two staff nurses who worked opposite each other, providing nursing support on most days. Nurses, when on duty, took the lead regarding medication management.

Overall, the inspector found that the provider and person in charge had ensured that effective governance arrangements were in place to support safe, appropriate, and consistent medication management for young people accessing the respite service.

Judgment: Compliant

Regulation 5: Individual assessment and personal plan

The inspector found that appropriate assessments of the young people's needs had been completed both prior to and following their admission. These assessments ensured that the needs of the young people were appropriately captured.

The inspector found that, following the assessments, care and support plans had been developed. During the inspection, the inspector reviewed information from six young people availing of the respite service. The care and support plans provided clear guidance and a step-by-step approach on how to care for the young people. For example, a diabetes management plan had been developed for a young person transitioning into the respite service, and the staff team was in the process of completing diabetes and insulin management training. There were care plans in place to support some of the young people with their nutrition, as well as guidance on how to support their communication. For example, some of the young people communicated using 'first and next' visual aid boards. The inspector discussed this process with a member of the staff team, who demonstrated good knowledge of the practice.

In summary, the inspector found that the young people's needs and strengths had been appropriately assessed, that care and support plans had been devised, and that these plans were clear, concise, and provided the reader with adequate information to care for and support the young people during their respite breaks.

Judgment: Compliant

Regulation 7: Positive behavioural support

As discussed earlier in the report, the provider and the person in charge ensured that assessments of the young people's needs and strengths were completed. Following these assessments, individual support plans were developed for the young people, each including a section on positive behaviour support. The inspector reviewed two young people's plans containing such guidance and found that the information was specific to each resident, clear and concise, focused on understanding the behaviours, why they might occur, what staff could do to avoid the behaviours, and how staff should respond if they were to occur.

The inspector also reviewed adverse incidents that had occurred in the service for some of the young people who presented with challenging behaviours. The inspector found that these incidents were being appropriately managed and that learning was promoted following each incident. There were also examples of changes implemented in response to the issues, which led to a reduction in incidents and demonstrated good practice.

Judgment: Compliant

Regulation 8: Protection

The inspection identified that appropriate systems were in place to safeguard young people from the risk of abuse during their respite stays. The inspector found that all staff had received safeguarding training specific to working with young people, including completion of Children First training. The inspector also found that safeguarding was discussed at staff team meetings, promoting learning and understanding in the area.

Discussions with staff confirmed that they demonstrated a good understanding of what constitutes a safeguarding concern and how to respond appropriately.

The inspector found that where safeguarding concerns had been identified, appropriate investigations had been completed, that appropriate responses had been undertaken, including the review of compatibility concerns, and that the necessary bodies had been notified.

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
Regulation 24: Admissions and contract for the provision of services	Compliant
Quality and safety	
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 5: Individual assessment and personal plan	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant