



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

## Issued by the Chief Inspector

Name of designated centre:	Mountain View Respite Centre
Name of provider:	Health Service Executive
Address of centre:	Cavan
Type of inspection:	Announced
Date of inspection:	04 March 2026
Centre ID:	OSV-0009042
Fieldwork ID:	MON-0048035

## About the designated centre

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

Mountain View Respite Centre provides 24 hour respite care and can accommodate up to 4 Adults with Physical and Sensory Disability. The service users of this centre are supported by a compliment of Social Care workers and care staff under the supervision and support of the Social Care Leader. In addition to this nursing support will also be provided for periods based on outcome of individual Service user assessment of need. An on call support service is also provided. Mountain View Respite Centre is a purpose built Bungalow. It consist of a kitchen/ dining room, utility room, Two sitting rooms, an office and four bedrooms which are ensuite. Mountain View Respite Centre has a large garden, and adequate parking facilities. The surrounding area of Mountain View respite centre is very scenic and there are beautiful walk ways and lakes to enjoy.

**The following information outlines some additional data on this centre.**

Number of residents on the date of inspection:	4
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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 4 March 2026	09:30hrs to 16:00hrs	Miranda Tully	Lead

## What residents told us and what inspectors observed

This was a short notice announced inspection completed to monitor compliance with the Regulations and standards. This designated centre is registered to provide respite stays for a maximum of four residents at any one time and there were four individuals staying in the centre on the day of inspection. The inspector had the opportunity to meet three of the residents and spend time with them over the course of the day.

The inspector found that this was a well run centre where safe and good quality care was being delivered to the residents by a professional, knowledgeable and competent staff team. All regulations reviewed were found to be compliant on the day of inspection.

On arrival to the centre, the inspector was greeted by the person in charge and completed a walk around of the property. The designated centre comprises a detached bungalow located outside a town in Co. Cavan. The property has been renovated into a modern and accessible layout which is homely and welcoming. The centre included four large bedrooms with en-suite facilities, kitchen/ dining room, utility room, two sitting rooms, and office. The centre had a large garden, and adequate parking facilities. The person in charge spoke with the inspector about plans to further develop the garden with planting and the purchase of garden furniture.

During the walk around of the property, the inspector met one resident who was in the kitchen eating a cooked breakfast which had been prepared by staff. On speaking with the resident, this was their second time staying in the centre. The resident was very complementary of the service. They also showed the inspector the room in which they were staying in during their respite stay. The room was a large spacious room with en-suite. The resident had raised their need and wish for additional handrails in the bathroom. On further review this had been acknowledged by the person in charge and they were in the process of assessing and arranging the progression of this request. On the day of the inspection, the resident left the centre to attend a family engagement and returned to the centre later in the day. On their return they had the option to go to the cinema however choose to stay in the centre and spent time playing cards and speaking with the inspector and staff instead. The resident spoke about the friendships they were making and the plans for the evening which included making homemade pizzas with another resident.

The inspector spent time with the other residents as they got up during the day. It was evident that each resident got up at their own pace and this was supported by the relaxed atmosphere in the centre. For another resident this was also their second respite stay, they too were very complementary and appeared to really enjoy the opportunity for respite. They had enjoyed the variety of activities that week and were enjoying the company of the other residents. They told the inspector

that they could choose to complete the planned activities or if they needed to go shopping for example, this would be accommodated. They noted that on their first stay they were unsure what to expect however this time felt more comfortable and more eager to engage in more activities.

For the third resident, this was their first stay in respite. They advised the inspector that their stay was 'beyond expectation and their care had been 'phenomenal'. They were already looking forward to a return stay. The resident went to the cinema on the day of inspection and was looking forward to shopping trips later in the week.

The fourth resident had arrived the day previous and was feeling very tired, therefore the inspector did not meet with them. On review of the pre admission process, it was evident that the centre and staff had ensured that the resident was as comfortable as possible on their stay , for example they had arranged that the specific mattress they use at home was made available to them on respite.

At the end of each respite stay the centre sought resident feedback through a survey, as part of the inspection. Some of the feedback received included comments such as:

"Everybody was lovely, everything I wanted was accommodated."

"house is homely, warm and welcoming"

"Staff go above and beyond to help"

" very homely, I found myself saying when we go home while out on activities"

Some residents had also offered constructive feedback in relation to additional storage facilities, this had been taken on board and the person in charge had advised the inspector of measures taken to address this.

In summary the inspector found throughout the inspection that residents appeared well cared for, happy, relaxed, comfortable and content. The residents were supported by a staff team who were very familiar with their care and support needs and who were motivated to ensure that each resident was encouraged and facilitated to participate in activities that were meaningful and purposeful to them. Throughout the inspection, jovial laughing and engagement was heard throughout the house. It was very apparent that staff and residents had a good rapport and staff made every effort to ensure a positive stay for residents.

In the next two sections of the report, the findings of this inspection will be presented in relation to the governance and management arrangements and how they impacted on the quality and safety of service being delivered.

## Capacity and capability

The inspector found that the designated centre was well managed and that this was resulting in residents receiving a good quality and safe service.

The provider was monitoring the quality of care and support for residents through their audits and reviews. The staff team were regularly completing a number of audits in the centre. These audits and reviews were identifying areas for improvement, and these improvements were found to be having a positive impact on residents' experience in the centre.

On the day of inspection, there was an experienced and consistent staff team in place in this centre and there were sufficient numbers of staff on duty to support residents. Based on the assessed needs of the residents nursing support was provided for one resident. Throughout the inspection, staff were observed treating and speaking with the residents in a dignified and caring manner. From a review of the roster, it was evident that there was an established staff team in place.

There was a programme of training and refresher training in place for all staff. The inspector reviewed a sample of the centre's staff training records and found that it was evident that the staff team in the centre had up-to-date training and were appropriately supervised. This meant that the staff team had up-to-date knowledge and skills to meet the residents' assessed needs.

Throughout the inspection residents were observed to be very comfortable in the presence of staff and to receive assistance in a kind, caring and safe manner. There were systems in place to ensure the staff team were supported to carry out their roles and responsibilities. For example, the person in charge was regularly present in the centre.

#### Regulation 14: Persons in charge

The registered provider had appointed a full-time, suitably qualified and experienced person in charge to the centre. The person in charge demonstrated good understanding and knowledge about the requirements of the Health Act 2007, regulations and standards.

The person in charge was familiar with the residents' needs and could clearly articulate individual health and social care needs on the day of the inspection.

Judgment: Compliant

#### Regulation 15: Staffing

The residents of this centre are supported by a compliment of social Care workers and care staff under the supervision and support of a social care leader.

The inspector reviewed rosters for January and February 2026. There was an appropriate number and skill mix of staff present in this centre. The staff team was established and the inspector found staff to be professional, knowledgeable in their roles and very caring towards the residents.

The staffing ratio's and rosters in the centre were reviewed and found to be meeting residents needs. For example, as previously mentioned nursing support was allocated based on the assessed needs of one resident throughout their respite stay.

Judgment: Compliant

### Regulation 16: Training and staff development

There were systems in place for the training and development of the staff team. The staff team in the centre had up-to-date training in areas including:

- infection prevention and control
- fire safety
- safeguarding
- manual handling.

Where refresher training was due, there was evidence that refresher training had been scheduled.

Judgment: Compliant

### Regulation 23: Governance and management

High levels of compliance with the regulations reviewed were observed on the day of inspection. There were clear management structures and lines of accountability.

A social care leader was in place to supervise and manage this designated centre. Good levels of professional oversight were demonstrated. For example, audits, reviews, management meetings, team meetings, consultative engagement with residents and families were reviewed.

The inspector found a safe and good quality of care delivered in this centre that was well managed.

Judgment: Compliant

## Regulation 24: Admissions and contract for the provision of services

The provider has a policy on admissions which details the process for admission into the centre in order to avail of respite. The provider and person in charge attend referral meetings and the criteria for admission are clearly identified and adhered to.

The provider had detailed admission documents that were completed prior to each admission to ensure that the information available to guide staff is as up-to-date as possible. Systems are in place to gain consent from residents and their representatives prior to a stay to ensure that the resident can fully participate in all activities that are important to them. This also ensures that each resident is provided with good quality health or social supports as per their assessed needs.

Judgment: Compliant

## Regulation 31: Notification of incidents

A record was maintained of all incidents occurring in the centre and the person in charge was aware of the requirement to notify specific incidents to the Chief Inspector of Social Services in line with the requirement of the regulations.

The inspector had completed a review of notifications received in advance of this inspection and also completed a review of the provider's accident, incident and near miss records and found that all incidents that required notification had been completed in line with the Regulation.

Judgment: Compliant

## Regulation 34: Complaints procedure

The registered provider had prepared an effective complaints procedure. The procedure was underpinned by a written policy, which included information on how complaints were to be managed.

Information was available to residents about how to complain and when spoken to they were aware of and felt comfortable to raise any complaints.

Judgment: Compliant

## Quality and safety

The inspector found that the quality and safety of care provided for residents was to a high standard. The centre presented as a comfortable home and provided person-centred care to the residents.

A number of key areas were reviewed to determine if the care and support provided to residents was safe and effective. These included meeting residents and the staff team, a review of residents' personal plans, risk documentation and fire safety documentation. The inspector found good evidence of residents being well supported in the areas of care and support.

The inspector reviewed residents' personal files. Each resident had an up to date comprehensive assessment of their personal, social and health needs. Personal support plans were found to be person-centred, reviewed prior to respite stays and suitably guiding the staff team in supporting the residents with their needs. The residents were supported to access health and social care professionals as appropriate and appointments were facilitated in respite to ensure continuity.

The inspector reviewed the fire management arrangements and found the provider ensured that appropriate fire precautions were in place and that these were well maintained.

There were effective systems in place for the safeguarding of residents. The inspector reviewed a sample of incidents occurring in the centre which demonstrated that incidents were reviewed and appropriately responded to. The residents were observed to appear comfortable and content in their home.

## Regulation 13: General welfare and development

Residents were found to be very well supported to be active and engage in meaningful activities while on respite stays.

The inspector spoke with residents and reviewed documentation and found that residents participated in a multitude of activities of their own choosing. Some residents chose not to participate in planned activities on the day however, staff ensured that a number of alternative recreational and social activities were made available to them.

Residents also engaged in activities such as:

- visits to garden centres
- cinema

- bowling
- visits to local waterways
- visits to coffee shops
- shopping

Residents were also supported to maintain community links and participate in important community events while on respite.

Judgment: Compliant

### Regulation 17: Premises

The centre had been decorated to ensure it was homely in presentation, warm and well maintained. The inspector completed a walk around of the premises and found that there was adequate communal and private space for residents.

The centre included four large bedrooms with en-suite facilities, kitchen/ dining room, utility room, two sitting rooms, and office. The centre had a large garden, and adequate parking facilities. The person in charge spoke with the inspector about plans to further develop the garden with planting and the purchase of garden furniture.

Judgment: Compliant

### Regulation 26: Risk management procedures

The safety of residents was promoted through risk assessment, learning from adverse events and the implementation of policies and procedures. It was evident that incidents were reviewed and that there were systems in place to enhance learning from such incidents and informed practice.

There were systems in place for the assessment, management and ongoing review of risks in the designated centre. For example, risks were managed and reviewed through a centre specific risk register and individual risk assessments. The individual risk assessments were up to date and reflective of the controls in place to mitigate the risks.

Judgment: Compliant

### Regulation 28: Fire precautions

There were effective fire safety management systems in place in the centre. The inspector observed fire fighting equipment, detection systems, and emergency lighting all in working order around the centre. Staff and residents were completing fire safety evacuation drills at the beginning of their respite stay.

Records demonstrated that residents could be evacuated from the centre in the event of a fire in an efficient manner. Staff were completing daily checks on fire safety systems and equipment was regularly checked and service by a fire specialist.

Judgment: Compliant

### Regulation 29: Medicines and pharmaceutical services

The provider had policy and procedures in place to guide best practice in relation to medication management. The centre had centre specific guidelines in relation to respite and implementation of same was observed on the day of the inspection.

The provider ensured that all residents had an up-to-date record of prescriptions in place prior to each stay. There were systems in place to ensure medicines arrive to the centre that were for the duration of the stay and that they were returned to the resident or their representative at the end of a stay.

Judgment: Compliant

### Regulation 8: Protection

Residents were protected by the policies, procedures and practices relating to safeguarding and protection. Staff had completed training in relation to safeguarding and protection and were found to be knowledgeable in relation to their responsibilities should there be a suspicion or allegation of abuse.

Judgment: Compliant

### Regulation 9: Residents' rights

In line with the statement of purpose for the centre, the inspector found that the rights and diversity of residents was being respected and promoted in the centre.

Residents were very complimentary towards how staff respected their wishes and listened to what they had to say. They talked about choices they were making every

day in relation to areas such as where and how they spent their time, what they ate and drank, and how involved they were in the day-to-day planning 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
<b>Capacity and capability</b>	
Regulation 14: Persons in charge	Compliant
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
Regulation 31: Notification of incidents	Compliant
Regulation 34: Complaints procedure	Compliant
<b>Quality and safety</b>	
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 8: Protection	Compliant
Regulation 9: Residents' rights	Compliant

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