



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

Issued by the Chief Inspector

Name of designated centre:	Hillview Lodge
Name of provider:	Resilience Healthcare Limited
Address of centre:	Kilkenny
Type of inspection:	Announced
Date of inspection:	24 February 2026
Centre ID:	OSV-0008598
Fieldwork ID:	MON-0041082

About the designated centre

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

This centre comprises a large detached two storey house set in a rural location with a large garden. It is registered to provide a home for four children over the age of six years and under the age of 18 years both male and female. The centre can provide either a full time residential service or shared care both on a planned or emergency basis. The premises comprises a large kitchen-dining room, and sunroom with communal living room. In addition each child has their own bedroom, all of which are en-suite with a staff bedroom and office area. The Hillview staff team comprises of a Person in Charge (PIC), Service Manager, a team lead, support Workers and assistant support workers. The staff team also have the support of the MDT team, where required.

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
Tuesday 24 February 2026	09:00hrs to 17:00hrs	Sarah Mockler	Lead

What residents told us and what inspectors observed

This was an announced inspection completed to review the designated centre's level of compliance with regulatory requirements and to aid in the decision to inform a registration renewal decision. Overall, the findings of the inspection indicated that the four children in the centre were receiving care and support in a child-centered manner that was resulting in a very positive lived experience for each of the individual children within the centre. Full compliance was achieved in the relevant areas reviewed on inspection.

The centre is registered for a maximum of four young people under the age of 18 years at any one time. Some of the young people availed of a shared care arrangement and other children in the centre received care under a full-time residential placement arrangement. That meant that a total of five children were admitted to the centre but there was never more than four children present at the one time. On the day of inspection there were four children in the centre.

On arrival at the centre the inspector was greeted by the team lead and the person in charge. One child was in the centre at this time. They had remained off school that day as they were a little unwell and had an appointment arranged with the general practitioner (GP), later that morning. There were three staff present at this time.

The inspector met the child in the sitting room. They primarily used non-speaking forms of communication. They were watching a preferred television program and smiled when spoken too. In the morning the inspector observed the child move freely around the home both up-stairs and downstairs. They were seen to ask for snacks and communicate effectively on their likes and dislikes in terms of food preferences. The staff were seen to offer choices and interact with the child in a kind manner. The staff told the inspector about the child's favourite items in the home, such as their preferred soft toys. They were well aware of the child's sensory preferences such as the child requiring lots of movement across the day. The inspector observed the staff giving the child time and space to move around the centre. The inspector saw the staff get the child ready for their appointment and leave the centre for the morning. Later in the afternoon the inspector observed the child on the swing with two staff members supporting and playing with them.

In the afternoon the inspector met with the other three children in the centre. They had all been in school for the full day and returned back to the centre in the afternoon. The inspector spent time with one child in their room with a staff member present. They were watching television and holding the television remote and freely choosing clips to watch. They frequently got up to jump on their trampoline and approached the staff member to engage with them. The staff member was very interactive in their approach and clearly knew the child and their preferences very well. As this child also used non-speaking means to communicate

the staff member helped the inspector interpret their communication requests. The child was seen to go to the kitchen and request a snack which was brought into their room when it was ready. The child was very at ease in the company of the staff member and was seen to freely move around the home.

Another child was upstairs engaging in water play in their bathroom. They had a basin of warm water filled with bubbles and toys. They were seen to happily play and request more water as they required it and approached the staff member and inspector to engage in their requests. They frequently smiled and used vocalisations to indicate they were happy. The staff member present spoke about the child's love of water and how they also enjoyed swimming on a frequent basis.

The fourth young person was in their room and had access to items they loved and were seen to be engaging in this activity at the time of inspection. The young person was slightly dysregulated and this was evidenced by their pacing around their room and home. The staff members provided kind and caring support and were seen to provide access to the young person's Augmentative Communication Device at this time to focus them on requesting what they needed at this time. The young person indicated that they wanted to leave the centre to go for a walk and this was immediately facilitated by the staff. The young person waved good bye to the inspector and the two staff members brought the young person to a beach for a walk.

The inspector completed a full walk around of all aspects of the premises. The centre comprises a large detached dormer bungalow in a rural area in Co. Kilkenny. Downstairs there was a kitchen area, dining area, sun room, an arts and crafts room, sitting room, two children's bedrooms and a main bathroom. One bedroom downstairs had a small seating area located off the bedroom and access to an ensuite. Upstairs there was a staff office, two children's en suite bedrooms and very well equipped and decorated sensory room. All areas of the home were clean, bright and decorated in child centered manner. Bright pictures and photographs were on display throughout the home. There were toys and other children's equipment located in the communal and bedroom areas of the home.

The inspector met and spoke with three staff in the morning and four staff members in the afternoon, as well as spending time speaking with the local management team which consisted of the person in charge and team leader. All staff spoken with were very knowledgeable around the children's specific needs including communication needs, sensory needs and behavioural needs. They also spoke about what was important to the children such as maintaining strong family connections and access activities in the community. All children attended school five days a week and staff reported that all the children enjoyed their time at school.

As part of the inspection process all children's parents were contacted. The inspector had the opportunity to speak with four family representatives as well as a Guardian ad Litem (GAL). The overarching feedback in relation to the service provided to the children was extremely positive. All people spoken too were complimentary of the staff team's approach, their communication style and how the children were getting the best care and support possible. Family representative used comments such as

calling the service 'Fantastic'; 'Couldn't be run any better' ; 'the individualised attention to the child is amazing'. One family representative gave a very detailed example of how well looked after their child was. They told the inspector about a party that was hosted for their child. They stated the staff had gone 'above and beyond' to ensure that this celebration day was made special, with staff that were off duty coming to attend the event.

The next two sections of the report present the findings of this inspection in relation to the governance and management arrangements in place in the centre and how these arrangements impacted the quality and safety of the service being delivered.

Capacity and capability

Overall, the provider's systems for oversight were proving to be effective and driving quality improvement within the centre. This was positively impacting on the care and support being delivered ensuring the young people in the centre were well cared for and that their assessed needs were met.

There were clear lines of accountability and authority within the centre with all staff aware of their roles and responsibilities. The person in charge was in a full-time role and was supported by a team leader. There were a suite of audits both at provider and local level to ensure that care within the centre was of a good standard and in line with the assessed needs of the children.

The inspector found this service to be appropriately resourced, with suitable recruitment, vetting, staffing and supervision arrangements to ensure oversight and accountability of the performance and quality of the staff team. All staff had suitable training in place to enable them to complete their roles effectively.

Registration Regulation 5: Application for registration or renewal of registration

The registered provider had submitted an application seeking to renew the registration of the designated centre to the Chief Inspector of Social Services. The provider had ensured information and documentation on matters set out in Schedule 2 and Schedule 3 were included in the application. For example, the provider had ensured that updated floor plans that represented the layout of the centre were submitted in line with the Regulations.

Judgment: Compliant

Regulation 15: Staffing

On the day of the inspection the provider had ensured that there were enough staff with the right skills, qualifications and experience to meet the assessed needs of the young people at all times in line with the statement of purpose and size and layout the designated centre.

There was one part-time staff vacancy at the time of the inspection and recruitment was underway to fill this position. The inspector reviewed actual and planned rosters from December 2025 up until the inspection day. The inspector saw that all rosters were well maintained and sufficient staff had been put in place. There was strong evidence of continuity of care with familiar staff in place across all rosters. There was no use of agency staff and there was a panel of relief staff utilised to fill any gaps on the roster.

The inspector spoke to all staff members that were on duty on the day of inspection. They found that all staff were knowledgeable around the children's needs, preferences, likes and dislikes. They were warm, kind and patient in their interactions with the children. They were interactive and engaged in play with the children if this was their preference and also gave them space if the children needed time to regulate.

The inspector reviewed four staff file records and found that they contained all the required information in line with Schedule 2 including evidence of up-to-date vetting by An Garda Síochána.

Judgment: Compliant

Regulation 16: Training and staff development

There was a very good level of compliance with mandatory and refresher training maintained in the centre. The inspector reviewed the training records for 20 staff and saw that all staff were up-to-date in training in key areas including Children's First, Fire Safety, First Aid and managing behaviour that is challenging.

Additionally, staff were up-to-date in trainings required by children's specific needs. For example, all staff had received training in Feeding, Eating, Drinking and Swallowing needs, Autism awareness and Trauma informed care. In addition, the inspector reviewed documentation and spoke to staff in relation to training they received from an occupational therapist around the use of the sensory room.

Staff were in receipt of regular support and supervision. There was a supervision schedule in place and a process for regular review and check-in's with staff on probation. The inspector saw that 14 staff had completed supervision in January 2026, one staff member who was on the relief panel was due supervision in March

and the other four staff members were going through their probation period and had relevant documentation in relation to the same. Staff spoken too stated they felt very supported in their roles.

Judgment: Compliant

Regulation 23: Governance and management

Overall, it was found that the systems in place were being well utilised to ensure the quality of care was centred around the needs of the children living in the centre. The centre was well run and managed by a suitably qualified, skilled and experienced person in charge who had support from a team lead. Both these staff members were present to facilitate the inspection process and both were very knowledgeable around the needs of the children and the requirements of ensuring the service was striving for continuous quality improvement. There was a clearly defined management structure that identified lines of authority and accountability and staff who spoke with the inspector were aware of their roles and responsibilities.

The provider had comprehensive systems to monitor care and support which included a range of audits. The six-monthly provider audit and annual review had been completed in the centre. The inspector reviewed both the annual review and the most recent six-monthly provider-led audit. Both these documents had actions in place to achieve and rectify identified areas of improvement. For example, the six-monthly provider audit dated January 2026 identified the need for minor improvements in aspects of incident recording. This had been completed on the day of inspection.

There was suite of local audits in place including weekly environmental checks, hand hygiene audits, individual support plan audits, medication audits, vehicle audits and money management audits, demonstrating good oversight of everyday care and support.

The provider had responded comprehensively to a serious incident in the centre that had been notified to the Chief Inspector of Social Services via the notifications process. This incident involved a young person who had been missing from the centre without staff support for a period of time. The provider's response and action plan had been very detailed with all relevant actions completed on the day of inspection. Clear learning had been identified through this process which indicated the process for review of serious incidents was effective and meaningful.

Judgment: Compliant

Regulation 3: Statement of purpose

As per the requirements of the renewal process, the provider had submitted an up-to-date statement of purpose which clearly outlined the service that was to be provided to the children. This document had all the required information in place as set out in Schedule 1 including information and arrangements on visits with family members and appointed social workers.

Judgment: Compliant

Regulation 31: Notification of incidents

Documentation in relation to notifications, which the provider must submit to the Chief Inspector under the regulation, was reviewed during this inspection. Such notifications are important in order to provide information around the running of a designated centre and matters which could impact children. All notifications had been submitted as required. For example, the provider had submitted notifications in relation to the use of restrictive practices with the centre within the relevant time frames.

Judgment: Compliant

Quality and safety

The inspector found that the centre presented as a comfortable home and care was provided in line with each child's assessed needs. A number of key areas were reviewed to determine if the care and support provided to children was safe and effective. These included meeting and spending time with each of the children and staff, a review of risk documentation, fire safety documentation, Children's First documentation and documentation around care and support needs. It was found that child-centered care was evident in all areas of service provision which was accounting for positive outcomes for each of the children that lived in the service.

The children were all attending school five days a week in a full-time capacity and their educational needs were being well met. The children were engaged in activities they enjoyed both in house and out in the community. Families were regularly consulted and involved in ensuring their needs were met in a comprehensive manner. Families spoken with were very complimentary of the care and support and access to activities.

There were numerous effective systems in place to keep the children safe including risk management, child protection and fire safety measures. All staff were familiar with these systems.

Regulation 13: General welfare and development

The designated centre promoted the overall welfare and development of each child in a warm and child-centered manner.

As previously stated all children attended school. On the day of inspection three of the four children were attending school and arrived back to the centre later in the afternoon. One child remained at home as they were feeling a little unwell but were due to re-attend school once they were feeling better. Staff reported that the children overall enjoyed going to school on a daily basis. The inspector saw different documentation that evidenced good communication between the school and the centre. For example, the inspector saw a personal plan meeting that had occurred with one school. This meeting was facilitated with the school to share information in relation to the child's placement in the centre. In addition there were copies individual education plans from school present in the children's files so that staff were aware of each child's specific educational needs.

The designated centre was warm and homely and families were facilitated to visit at any stage if they so wished. Family relationships were a key component in the children's life and the staff team recognised the importance of this aspect of care and support. Family members were very complimentary of the range of activities available to the children and spoke about children going to places of interest, playground, arranging parties for the children, swimming and other such type of activities. One family member spoke about how their child was engaging in more activities since they transitioned to the centre and that is was a positive improvement in relation to their quality of life.

The centre also provided facilities for the children to relax and play. The back garden contained various playground equipment. This included a trampoline and swing. Within the centre, there were rooms designed as relaxing sensory spaces with various sensory equipment and media for watching preferred video clips.

Judgment: Compliant

Regulation 17: Premises

As part of the inspection process the inspector completed a full walk around of all aspects of the premises with the person in charge. It was found that the centre was well maintained, decorated in a child friendly manner, clean, warm and homely. It

was designed and laid out to meet the assessed needs of the children living in the centre.

Downstairs there was a sitting room, a dining room, sun room, kitchen, utility room, large bathroom and two children's bedrooms and a art room. Both bedrooms had en-suite facilities. One bedroom also had a separate seating area. Bedrooms had lots of toys and personal items present. Visuals were on display on wardrobes and chest of drawers to help children find and sort their clothes. There was storage in place for children's toys and belongings. The inspector also noted toys and other children's items in place in communal areas in the home.

Upstairs there were two other children's bedrooms again decorated in a very child-centred manner. For example, one bedroom had a large cartoon based mural painted on the wall. Both bedrooms had en-suite facilities available to both children. There was also a staff office and sensory room located in this part of the home. The sensory room was filled with appropriate equipments such as soft mats, a dark den, bean bags, bubble machine, peanut balls, different textures on the ground and walls and different types of lighting. There was guidance on display on how to use the equipment with the children if they so wished.

There were systems in place to ensure the maintenance of the premises was kept up -to -date. Any minor premises works had been logged and there was a schedule of works in place to complete the minor improvements. For example, it was identified that a hinge on a wardrobe required replacing so it closed more effectively. This had been logged on the maintenance work list. This demonstrated very good oversight of premises condition.

Judgment: Compliant

Regulation 20: Information for residents

The provider had devised a guide for children that contained all the required information as set out by the Regulations. The inspector reviewed this document and found it had information in relation to visits, complaints and terms and conditions in relation to residency.

Judgment: Compliant

Regulation 26: Risk management procedures

The provider's risk management policy contained information as required by Regulation. The provider and local management team were identifying safety issues

and putting risk assessments and appropriate control measures in place. Risk assessments considered each child's needs and the need to promote their safety.

As previously described a serious incident had occurred in the centre in July 2025. The inspector reviewed the critical incident investigation reports following this event. A comprehensive approach from a senior manager level was taken to respond to the incident in a robust manner and ensure suitable measures were put in place to prevent similar events occurring in the future. Suitable control measures were immediately put in place and regularly reviewed for their effectiveness. All relevant documentation had been updated accordingly to ensure staff were aware of all measures in place. On review of the response the inspector noted that the following had been considered, initial responses and actions, operational oversight, resources needed, initial learnings and key actions and next steps. Overall it demonstrated a comprehensive approach to managing the incident.

The inspector reviewed the local risk register which contained 48 risks which all had been updated in February 2026. The inspector reviewed three of the risk assessments in place which accurately reflected the control measures in place. The inspector also reviewed the children's individual risk assessments for three of the children. Risk assessments were in place in relation to absconscion, medication administration, choking, challenging behaviours, swimming, use of transport and child protection. Risk assessments were also in place for all restrictive practices that were utilised. Again all individual risk assessments had been recently updated.

The inspector found that incidents were identified and managed in a timely and effective manner. Overall, a robust approach to risk management was evident in this centre.

Judgment: Compliant

Regulation 28: Fire precautions

The inspector reviewed the fire safety measures in place in the designated centre. Overall, the measures in place were in line with best practice in relation to fire safety.

On the walk around of the premises the inspector saw fire safety measures such as suitable fire containment measures, emergency lighting, fire extinguishers, a fire alarm, smoke detectors and a fire blanket. All equipment has been regularly serviced. For example, the fire alarm had been serviced on 23 January 2026 and there was corresponding documentation in place to evidence this.

A staff member went through all the fire safety measures in place and confirmed that all children could evacuate in a timely manner. The inspector reviewed six fire drills that had occurred over the last six months and saw that all children had been evacuated successfully.

All children had personal emergency evacuation plans in place which reflected the supports needed for each child. This included the staffing levels required. There was risk assessment specifically developed to ensure that fire risks were suitably accounted for and monitored.

Judgment: Compliant

Regulation 29: Medicines and pharmaceutical services

There were safe practices in relation to the receipt and storage of medicines. The provider had appropriate lockable storage in place for medicinal products and a review of two children's medicine administration records indicated that medicines were administered as prescribed.

Medicine administration records reviewed by the inspector clearly outlined all the required details including; known diagnosed allergies, dosage, doctors details and signature and method of administration. Staff spoken with on the day of inspection were knowledgeable on medicine management procedures, and on the reasons medicines were prescribed. Staff were competent in the administration of medicines and were in receipt of training and on-going education in relation to medicine management.

All prescribed as necessary (PRN) medicines had corresponding protocols in place to guide staff on dosage of the medication.

In addition, the inspector observed there were regular medicine audits being completed in order to provide appropriate oversight over medicine management. There were systems in place to return out of date or unused medications which had to be signed off by the pharmacy on the return of the medicines.

Judgment: Compliant

Regulation 7: Positive behavioural support

The inspector found that there were arrangements in place to provide positive behaviour support to children with an assessed need in this area. For example, two positive behaviour support plans reviewed by the inspector were detailed, comprehensive and developed by an appropriately qualified person. In addition, each plan included antecedent and setting events, proactive and reactive strategies in order to reduce the risk of behaviours that challenge from occurring. The plans were also centered around the child's specific likes and dislikes and took into consideration their unique sensory needs.

The provider had ensured that staff received training in the management of behaviour that is challenging and received regular refresher training in line with best practice.

There were a number of restrictive practices used in the designated centre which had been notified to the Chief Inspector of Social Services in line with regulations. The inspector completed a review of these and found they were the least restrictive possible and used for the least duration possible. For example, some restrictions had recently been reduced in line with the children's assessed needs. It was found that a measured and considered response had been taken in reducing the restrictions. There was a restrictive practice review meeting on a regular basis that reviewed the use of all restrictive practices and discussions on how restrictions were reduced were evidenced in the notes. If restrictive practices were in place they were risk assessed and also accounted for in the child's behaviour support plan. Overall, good practices were noted in relation to the use of these measures.

Judgment: Compliant

Regulation 8: Protection

There were clear systems in place for reporting child protection and welfare concerns in line with Children First: National Guidance for the Protection and Welfare of Children (2017). The centre had a safeguarding statement in place and on display in the hallway of the centre. There was the designated liaison person (DLP) appointed. The staff who inspector spoke with had a clear understanding of the role and responsibilities of both the DLP. Centre staff worked in partnership with parents and clinicians to safeguard children.

There had been one notification of a child protection incident in the last 12 months. The inspector saw evidence that this had been reported to the Child and Family Agency (Tusla) as required under the legislation. In addition, a safeguarding plan had been developed to mitigate the risks associated with this concern. Overall, the approach taken in the centre was in line with best practice in relation to child protection issues.

The inspector also saw documentation in relation to how compatibility was considered when there was a new admission to the centre. A comprehensive approach to assessing this need was completed to ensure that the children living together were safe and happy in their home.

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	
Registration Regulation 5: Application for registration or renewal of registration	Compliant
Regulation 15: Staffing	Compliant
Regulation 16: Training and staff development	Compliant
Regulation 23: Governance and management	Compliant
Regulation 3: Statement of purpose	Compliant
Regulation 31: Notification of incidents	Compliant
Quality and safety	
Regulation 13: General welfare and development	Compliant
Regulation 17: Premises	Compliant
Regulation 20: Information for residents	Compliant
Regulation 26: Risk management procedures	Compliant
Regulation 28: Fire precautions	Compliant
Regulation 29: Medicines and pharmaceutical services	Compliant
Regulation 7: Positive behavioural support	Compliant
Regulation 8: Protection	Compliant