

# RIA

## Inspection Report

<b>Centre:</b>	<b>Carroll Village Accommodation Centre</b>
<b>RIA Inspector:</b>	<b>Siobhan O'Higgins</b>
<b>Date of Inspection:</b>	<b>20<sup>th</sup> May 2014</b>
<b>Time of Arrival &amp; Departure:</b>	<b>10:00 - 11:15 am</b>



*Part 1*  
*General Information on Services*

*Centre:* **Carroll Village Accommodation  
Centre**

*Date of Inspection:* **20<sup>th</sup> May, 2014**



**1. CENTRE DETAILS**

Name and address of Centre	Carroll Village Apartments, Clonbrassil Street, Dundalk, Co Louth
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Contractor	East Coast Catering
Manager	Robert Hyslop
Who deputises for manager in his/her absence?	Give Job Title only Area Manager

Telephone Number	042-9386351
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Current Contracted Capacity	24
Current Occupancy (today)	24
Current Centre Profile (e.g., singles, families etc.)	Families

HSE Area	NEHB
Public Health Nurse	Julie McEvoy
DSP / CWO name	Anne Mathews
Environmental Health Officer name	N/A
Local Fire Officer Name	Inspector Woolffe
Local Fire Station	Dundalk

Is the Centre certified by any Quality Management System (i.e. Q Mark, ISO)?:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, please give details: EIQA member	
What was the date of the last certification?	2014
Have you a copy of the Certification	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

**2. Please provide a copy of the following**

	Check List
Official Register	<input checked="" type="checkbox"/>
Menu Cycle	<input type="checkbox"/>
Latest EHO Report	<input type="checkbox"/>
Staffing Lists as follows:	
1. Full list of staff employed at the centre (indicating Names, Titles, Roles, etc.,)	<input checked="" type="checkbox"/>
2. Indicate who is on duty at time of inspection (today)	<input checked="" type="checkbox"/>



3. a separate list of Designated Liaison Persons (child protection)	<input checked="" type="checkbox"/>
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**3 GENERAL SECURITY & EMERGENCY DETAILS**

Is 24 hour supervision provided? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Give details of roster hours	<b>Manager lives on site</b>
Is security provided by external company? (Y/N)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, give name of company:	
Does the centre have CCTV? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is a list of emergency numbers available in the Manager's office?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the list include the following numbers? (Y/N) Local Garda station 24 hr number Local hospital Local fire station Duty Social Work Team Out of hours GP Service RIA out of hours number	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>  If no, give details:
Are first aid kits available? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Where and how many?	Two in manager's office
Who is responsible for first aid restocking?	Job title <b>only</b> (not name) of person responsible: <b>Manager</b>
Is there a defibrillator in the centre? How many staff been trained to use it?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>  1

**4 HEATING ARRANGEMENTS**

What type of heating is used in the centre?	<b>Electric storage heating</b>
Do residents have control of the heating in their own bedroom?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no, what arrangements are in place?	
What are the heating 'ON' times?	

**5 HOUSE RULES**

Are residents provided with a copy of the House Rules on arrival?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
How does centre management explain house rules to residents on arrival?	<b>Manager sits down with new residents and goes through the house rules with them.</b>

**6 ARRANGEMENTS FOR RESIDENTS & VISITORS (keys / storage / toiletries)**

Are residents issued with key for their bedroom?(Yes/No)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Are residents issued with key for main door? (Yes/No)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>



If no, give details	There is a swipe card system for the main door and each resident has keys to their own apartment.
Are there procedures to allow residents to receive visitors? (Give details)	Visitors generally allowed between 8am and 11pm and residents notify the manager of guests arrival.
Outline visiting times :	8am and 11pm
In what areas are visitors allowed in the centre?	No designated areas as residents have their own apartments.
Any other relevant information:	
Is there a facility for storage of residents' valuables*? (Give details.) (* Storage is at resident's own risk)	No storage available other than the storage available in each apartment.

**7 ARRANGEMENTS FOR MAINTENANCE**

Does the centre have a written procedure in place for residents to report maintenance issues? (Yes/No)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there a maintenance day book? (Yes/No)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Describe the maintenance procedure at the centre: Residents can outline their maintenance concerns verbally or submit them in writing to the manager who will attend to their issues	

**8 CHILD PROTECTION**

Are measures in place to inform staff and visitors of RIA's Child Protection Policy? (Give details)	Yes, this information is displayed on the notice boards outside the managers apartment.
Are visitors asked to sign a declaration agreeing to adhere to the child protection policy?	Yes
Where is declaration held?	In the managers apartment
Is there a sign in book for visitors? Where?	Yes, in the managers apartment no. 1
Are there notices on public display giving name and contact details of Designated Liaison Person? Where?	Yes on the notice board outside the managers apartment
Have Designated Liaison Persons received HSE training?	Yes
Are notices prominently displayed regarding parental supervision of children? Where?	Yes on the notice board outside the managers apartment



**16 LAUNDRY FACILITIES (General Arrangements)**

Are Laundry facilities available in the centre? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If No, what service is provided?	Washing machines in all apartments



## *PART 2*

### *Room by Room Inspection*

*Centre: Carroll Village Accommodation  
Centre*

*Date of Inspection: 20<sup>th</sup> May, 2014*





## Section A- Administration / Communal areas

### 17 Have you seen the following?

		Location of display
Up to date House Rules	<input checked="" type="checkbox"/>	On notice board outside manager's office.
Complaint Forms	<input checked="" type="checkbox"/>	In managers apartment
Accident/ Incident procedure	<input checked="" type="checkbox"/>	In managers apartment

HSE Breastfeeding Posters (if applicable)	<input checked="" type="checkbox"/>	On notice boards outside manager's office.
Designated Liaison Person details (Child Protection)	<input checked="" type="checkbox"/>	Yes. Robbie Hyslop
Supervision of children notice	<input checked="" type="checkbox"/>	On notice boards outside manager's office.
IOM Voluntary Return Posters	<input checked="" type="checkbox"/>	On notice board outside manager's office.

### 18 Staff Awareness

Did you see the RIA Code of Practice*?	<input checked="" type="checkbox"/>
Are all staff aware of RIA Code & House Rules?	<input checked="" type="checkbox"/>
How are staff made aware of RIA Code & House Rules? Staff have been given instruction on these and sign agreement to adhering to them.	

\*A Code of Practice for persons working in accommodation centres

### 19 FIRE SAFETY

#### 19a EMERGENCY LIGHTING INSPECTION SCHEDULE

Date	Inspected By (Company Name / Position)	Comments
4/4/2014	Independent Fire Services	Service
9/5/2014 & 14/5/2014	Manager	Weekly checks by manager

#### 19b FIRE ALARM & DETECTION SYSTEM INSPECTION SCHEDULE

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken ( Y/N)	Sign Off Y/N
5/2/2014	Independent Fire Services	<input checked="" type="checkbox"/>	None. 25% service	No	Yes
4/4/2014	Independent Fire Services	<input checked="" type="checkbox"/>	None. 25% service	No	Yes

Staff checks carried out on 9/5/2014 & 14/5/2014



**19c FIRE FIGHTING EQUIPMENT INSPECTION SCHEDULE**

(Include all fire extinguishers, hose reels and fire blankets.)

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken ( Y/N)	Sign Off Y/N
4/4/2014	Independent Fire Services	<input checked="" type="checkbox"/>	All extinguishers serviced and checked	No	Yes
9/5/2014 & 14/5/2014	Manager	<input checked="" type="checkbox"/>	Fine, no issues	No	Yes

**19d FIRE EXIT DOORS / MEANS OF ESCAPE INSPECTION SCHEDULE**

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken ( Y/N)	Sign Off Y/N
9/5/2014	Manager	<input checked="" type="checkbox"/>	None	No	Yes
14/5/2014	Manager	<input checked="" type="checkbox"/>	None	No	Yes

**19e FIRE DRILL PROCEDURE INSPECTION SCHEDULE**

Date & Time	Numbers of staff involved in drill	No. of residents present / evacuated **	Evacuation Time	Comments
23/2/2014		This drill was held in conjunction with the new management company of the apartment block who have retained all the details.		Centre manager will be in touch with the management company to get a copy of the details of the fire drill.
7/6/2012	3	65 accommodated/ 45 present & evacuated	8 mins	All residents present at the time of the drill were evacuated from the building.

**\*\*Both numbers must be recorded.**

**19f STAFF INSTRUCTION AND TRAINING (Fire Safety)**

Job Description	Course	Instructor	Duration	Date
Centre Manager	Fire Safety training, alarm & evacuation training	Brain Byrne, Regional Manager	2 hours	25/2 2014



**19g FIRE EXITS, EMERGENCY LIGHTING, SMOKE ALARMS, FIRE NOTICES**  
(in corridors & common areas)

Are fire exits clear from obstruction?	<b>Yes</b>
Are they unlocked?	<b>Yes</b>
Are fire exits clearly posted throughout the building?	<b>Yes</b>
Are all fire doors kept closed?	<b>Yes</b>
Comments: A new management company has taken over the apartment complex, fire extinguishers checked by new fire safety company, the copy of certificate now being given to the manager.	



## Administration Area:

### Reception:

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
<i>Visual Check: Have you noticed any issues requiring attention? (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)</i>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail: <b>As this is a self catering centre each family live in their own self contained apartment. There is no need for a reception area per se, the reception area of the apartment complex was clean and tidy</b>		

## Bedrooms:

### CLEANING (General Arrangements)

How often are bedrooms inspected?	twice weekly <input type="checkbox"/>	Weekly <input checked="" type="checkbox"/>
Who cleans the bedrooms?	Staff <input type="checkbox"/>	Residents <input checked="" type="checkbox"/>
How often do staff clean the bedrooms?	Weekly <input type="checkbox"/>	fortnightly <input type="checkbox"/>
	Monthly <input type="checkbox"/>	Other <input type="checkbox"/>
Are there cleaning materials and equipment provided by management for residents?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
What cleaning equipment is available to residents?	Residents buy their own cleaning equipment	
What arrangements are in place if rooms are not cleaned sufficiently by residents?	The manager speaks to them and encourages them to clean their apartment.	

<b>ROOM NUMBER 28</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		6		2 Adults & 4 Children
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details: <b>Ensuite shower not working. Manager confirmed that to rectify this issue would be a major job and accordingly there were no immediate plans to fix it. However the main bathroom is in full working order.</b>				

**ROOM NUMBER 42**





Room Profile:		Room Capacity:		Room Occupancy:	
Family		6		2 Adults & 4 Children	
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>	
If *, please give details: <b>No fire extinguisher visible in this apartment. Bath panel broken. Grouting in main bathroom requires cleaning</b>					

<b>ROOM NUMBER 60</b>					
Room Profile:		Room Capacity:		Room Occupancy:	
Family		6		2 Adults & 2 Children	
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>	
If *, please give details: <b>Adaptor plugged into adaptor ( removed during inspection)</b>					

<b>ROOM NUMBER 30 (same family as apartment 58)</b>					
Room Profile:		Room Capacity:		Room Occupancy:	
Family		6		1 Adult & 3 Children	
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>	
If *, please give details: <b>No extinguisher on wall in kitchen</b>					

<b>ROOM NUMBER 58 (same family as apartment 30)</b>					
Room Profile:		Room Capacity:		Room Occupancy:	
Family		6		1 Adult & 3 Children	
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>	
If *, please give details:					



Mr. Brian Byrne  
East Coast Catering (Ireland) Ltd  
Block 2  
Quayside Business Park  
Millstreet  
Dundalk  
Co. Louth

12 June, 2014

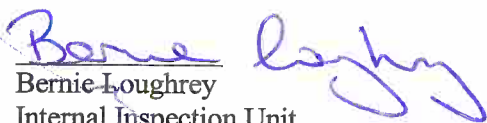
Dear Mr. Byrne,

The Reception and Integration Agency carried out an inspection at Carroll Village on 20 May, 2014. A copy of the inspection report is enclosed for your attention. Please read this report carefully and do not hesitate to contact me if it contains any discrepancies.

During the course of the inspection some issues were highlighted and you are required to deal with any hazards or risks detailed in this report.

Please reply in writing on or before Friday 4 July, 2014 outlining the steps you have taken/propose to take to address each of the issues raised.

Yours sincerely,

  
Bernie Loughrey  
Internal Inspection Unit  
RIA





east coast catering (ireland)

Balseskin Reception Centre, St. Margaret's Road, Finglas, Dublin 11.

Tel: (01) 8646291 / 8646292 Fax: (01) 8110729

Ms Bernie Loughrey  
Reception and Integration  
PO Box 11487  
Dublin 2

3<sup>rd</sup> July 2014

**Re: RIA Inspection - Carroll Village**

Dear Ms Walker

Further to the inspection by RIA at Carroll Village on 20<sup>th</sup> May 2014, please find attached list of issues raised, actions either undertaken or proposed in the near future.

We have a detailed maintenance programme in place and it should 'pick up' on most of the issues raised.

We were very pleased with the findings of the audit as it is always satisfying to find that the "systems in place" are actually working. Also, we would like to thank the Auditor, Siobhan O'Higgins for the courtesy they showed and the helpful comments they made during the audit.

Again, we would re-iterate our aim to maintain our Centres to the highest standard possible and to have this monitored by both internal and external audits.

Yours sincerely

Robbie Hyslop  
Duty Manager

Brian W Byrne  
General Manager



## Maintenance Items in Carroll Village

No.	Room No.	Issues	Outcome
1	Apt 30	No extinguisher on wall in kitchen.	Extinguisher fitted 30/06
2	Apt 42	<ul style="list-style-type: none"> <li>a. No extinguisher visible in kitchen</li> <li>b. Bath panel broken</li> <li>c. Grouting requires cleaning.</li> </ul>	Extinguisher was in hot press – now displayed Replaced Grouting will be redone when vacated.
3	Apt 60	Adaptor plugged into adaptor	This was rectified on inspection and has been monitored since.

Fire Drill Due – As outlined no formal drill carried out as ECC only manage 6 out of the 60 apartments. Residents are individually instructed on all aspects of fire safety, exits, assembly points, etc.

