

# RIA

## Inspection Report

<b>Centre:</b>	<b>Carroll Village Accommodation Centre</b>
<b>RIA Inspector:</b>	<b>Stephen Walsh</b>
<b>Date of Inspection:</b>	<b>9<sup>th</sup> September 2015</b>
<b>Time of Arrival &amp; Departure:</b>	<b>10:45am - 12:30pm</b>

*Part 1*  
*General Information on Services*

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

*Date of Inspection:* **9<sup>th</sup> September 2015**

**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	60
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 Woolfe
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: <b>EIQA member</b>	
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"/>

**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: 9<sup>th</sup> September 2015*

## 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

<u>Date</u>	<u>Inspected By</u> (Company Name / Position)	<u>Comments</u>
7/9/2015	Independent Fire Services	Full Inspection
8/9/2015	Independent Fire Services	Full Inspection

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

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken ( Y/N)	Sign Off Y/N
7/9/2015	Independent Fire Services	<input checked="" type="checkbox"/>	None.	No	Yes
8/9/2015	Independent Fire Services	<input checked="" type="checkbox"/>	None.	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
7/9/2015	<b>Independent Fire Services</b>	<input checked="" type="checkbox"/>	<b>1 extinguisher for refill</b>	<b>y</b>	<b>Yes</b>
8/9/2015	<b>Independent Fire Services</b>	<input checked="" type="checkbox"/>	<b>4 extinguishers to be fitted</b>	<b>y</b>	<b>Yes</b>

**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
7/9/2015	<b>Manager</b>	<input checked="" type="checkbox"/>	<b>None</b>	<b>No</b>	<b>Yes</b>
8/9/2015	<b>Manager</b>	<input checked="" type="checkbox"/>	<b>None</b>	<b>No</b>	<b>Yes</b>

**19e FIRE DRILL PROCEDURE INSPECTION SCHEDULE**

Date & Time	Numbers of staff involved in drill	No. of residents present / evacuated **	Evacuation Time	Comments
<b>13/08/2014</b>		<b>This drill was held in conjunction with the new management company of the apartment block who have retained all the details.</b>		<b>Centre manager still waiting to get details from the building management company, to get a copy of the details of the fire drill.</b>
<b>7/6/2012</b>	<b>3</b>	<b>65 accommodated/ 45 present &amp; evacuated</b>	<b>8 mins</b>	<b>All residents present at the time of the drill were evacuated from the building.</b>

**\*\*Both numbers must be recorded.****19f STAFF INSTRUCTION AND TRAINING (Fire Safety)**

Job Description	Course	Instructor	Duration	Date
<b>Centre Manager</b>	<b>Fire Safety training, alarm &amp; evacuation training</b>	<b>Brian Byrne, Regional Manager</b>	<b>2 hours</b>	<b>25/2 2014</b>

**19g FIRE EXITS, EMERGENCY LIGHTING, SMOKE ALARMS, FIRE NOTICES**

(in corridors & common areas)

Are fire exits clear from obstruction?	Yes
Are they unlocked?	Yes
Are fire exits clearly posted throughout the building?	Yes
Are all fire doors kept closed?	Yes
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 checked="" 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>APT 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 Battery in Fire Alarm to be replaced. Small chip in ceiling paint				

<b>APT NUMBER 42</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 checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: <b>Still the case that the room needs painting but this family have their papers and are actively looking for accommodation</b>				

<b>APT NUMBER 60</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		7		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 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>Paint on wall in bathroom still peeling.</b>				

<b>APT NUMBER 25</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		5		2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details: <b>The whole apartment was still untidy. No fire notice.</b>				

<b>APT NUMBER 12</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		5		3
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 type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details:				

<b>APT NUMBER 58</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		7		Vacant
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>Being renovated. Hole in wall at door handle.</b>				

<b>APT NUMBER 59</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 checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: <b>Battery in smoke alarm in bedroom needs replacing.</b>				

<b>APT NUMBER 41</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		1 adult
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>APT NUMBER 61</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		2
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>APT NUMBER 62</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		0
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>APT NUMBER 63</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		0
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>APT NUMBER 64</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		0
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>APT NUMBER 65</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		0
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>APT NUMBER 66</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		0
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>APT NUMBER 67</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		0
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>APT NUMBER 68</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		0
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:				

**Manager should be asked to sign this declaration.**

This inspection, by a RIA official, is primarily to examine how the terms of the Contract are being complied with in the centre.

The manager accepts that the person carrying out the inspection is not charged with certifying the centre is in compliance with all fire safety regulations. The manager agrees that the information provided above is correct.

Signed: Robert Hyatt

Position: Manager

Date: 9/Sept/15





DEPARTMENT OF JUSTICE, EQUALITY AND LAW REFORM  
AN ROINN DLÍ AGUS CIRT, COMHIONANNAIS AGUS ATHCHÓIRITHE DLÍ

RECEPTION AND INTEGRATION AGENCY  
ÁISINEACHT FHÁILTE AGUS COMHTHÁITE

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

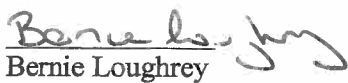
12<sup>th</sup> November 2015

The Reception and Integration Agency carried out an inspection at Carroll Village on 9<sup>th</sup> September 2015. A copy of the inspection report is enclosed for your attention and I apologise for the delay in forwarding this report to you. 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 27<sup>th</sup> November 2015 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,  
Inspection Unit,  
Reception & Integration Agency,  
P.O. Box 11487,  
Dublin 2.

26<sup>th</sup> November 2015.

Re: RIA Inspection Carroll Village 9<sup>th</sup> September 2015

Dear Ms Loughrey,

Further to your inspection at Carroll Village on 9<sup>th</sup> September herewith our reply outlining the steps taken/proposed to address the hazards on issues detailed in the report.

We would like to thank Stephen Walsh for his helpful comments and courtesy during the inspection and wish him well in his future placement.

As you are aware we now have a limited number of apartments at Carroll Village and we have to cooperate with the general management of the apartment block regarding fire drills etc. However, all these aspects are fully covered by our resident manager, Mr Robert Hyslop, and individual instruction is given to each apartment.

As always, we endeavour to keep our accommodation at the highest standard possible.

Yours faithfully,

Robert Hyslop

Centre Manager

Brian Byrne

General Manager

List of repairs/Action

Apartment Number	Details	Action
28	Battery in smoke alarm	Battery replaced 9 <sup>th</sup> September.
	Small chip in ceiling paint	To be repainted on vacation of apartment.
42	Requires painting	Apartment currently under major renovation. Due for completion 4 <sup>th</sup> December.
60	Paint peeling	Major renovation completed 6 <sup>th</sup> October.
25	No fire notice	Fire notice remounted (had been removed by resident).
	Very untidy	Repeated requests by management to tidy apartment were ignored by resident.
58	Hole in wall	Repaired 10 <sup>th</sup> October.
59	Battery in smoke alarm	Replaced 9 <sup>th</sup> September.