

# 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>13<sup>th</sup> June, 2016</b>
<b>Time of Arrival &amp; Departure:</b>	<b>9:30 – 11:30</b>



*Part 1*  
*General Information on Services*

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

*Date of Inspection:* **13<sup>th</sup> June, 2016**

### 1. CENTRE DETAILS

Name and address of Centre	Carroll Village Apartments, Clonbrassil Street, Dundalk, Co. Louth.
----------------------------	--

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
------------------	-------------

Current Contracted Capacity	78
Current Occupancy (today)	56
Current Centre Profile (e.g., singles, families etc.)	Families/singles

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 Fire Station

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
What was the date of the last certification?	2014
Have you a copy of the Certification	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

	Check List
Official Register	<input checked="" type="checkbox"/>
Staffing Lists as follows:	
1. Full list of staff employed at the centre (indicating Names, Titles, Roles, etc.,)	<input type="checkbox"/>
2. Indicate who is on duty at time of inspection (today)	<input type="checkbox"/>
3. a separate list of Designated Liaison Persons (child protection)	<input type="checkbox"/>
<b>The manager, who lives on site, is the sole member of staff and is the Designated Liaison Person</b>	

### 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	Manager lives on site
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: Manager
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 - Manager

### 4 HEATING ARRANGEMENTS

What type of heating is used in the centre?	Electric storage heating
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?	Manager explains the House Rules to new arrivals

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

Are residents issued with key for their bedroom?(Yes/No)	Yes <input checked="" type="checkbox"/> No <input 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	
Are there procedures to allow residents to receive visitors? (Give details)	Visitors generally allowed between 8:00am and 11:00pm – residents notify the manager of guests arrival

Outline visiting times :	08:00am – 11:00pm
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 the issues as soon as practicable	

## 8 CHILD PROTECTION

Are measures in place to inform staff and visitors of RIA's Child Protection Policy? (Give details)	Yes, the information is displayed on the notice boards outside the manager's office
Are visitors asked to sign a declaration agreeing to adhere to the child protection policy?	Yes
Where is declaration held?	In the manager's apartment
Is there a sign in book for visitors? Where?	Yes, in the manager's apartment
Are there notices on public display giving name and contact details of Designated Liaison Person? Where?	Yes, on the notice board outside the manager's 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 manager's office

## 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: 13<sup>th</sup> June, 2016*

## 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 manager's apartment
Accident/ Incident procedure	<input checked="" type="checkbox"/>	In manager's apartment

HSE Breastfeeding Posters (if applicable)	<input checked="" type="checkbox"/>	On notice board outside manager's office.
Designated Liaison Person details (Child Protection)	<input checked="" type="checkbox"/>	Yes, on notice board outside manager's office
Supervision of children notice	<input checked="" type="checkbox"/>	On notice board outside manager's office.
Human trafficking awareness poster		Copy of poster send to manager for display in centre
IOM Voluntary Return Posters	<input type="checkbox"/>	Copy of poster send to manager for display in centre

### 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? <b>Staff are given instruction on the Rules and sign off on them.</b>	

*\*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>
28/5/2016	Manager	Ok
5/6/2016	Manager	OK

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

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
28/5/20016 & 5/6/2016	Manager	<input checked="" type="checkbox"/>	None.	No	Yes
1/4/2016	Independent Fire Services	<input checked="" type="checkbox"/>	Service and test	Yes	Yes

### 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
28/5/2016 & 5/6/2016	Manager	<input checked="" type="checkbox"/>	None	No	Yes
8/9/2015	Independent Fire Services	<input type="checkbox"/>	No certificate viewed		

### 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
28/5/2016	Manager	<input checked="" type="checkbox"/>	None	No	Yes
6/6/2016	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
<b>8/10/15 11:00am</b>	<b>4 (including 3 from management company)</b>	<b>Drill held in conjunction with the centre management company – 12 RIA residents present and all 12 evacuated</b>	<b>15 mins</b>	<b>All ok</b>
<b>13/08/14 (no time)</b>	<b>Centre manager, plus staff from management company</b>	<b>Drill held in conjunction with the centre management company (numbers not available)</b>	<b>8 mins</b>	<b>Ok</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>23/5/2016</b>

**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:	

## Administration Area:

### Reception:

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention? (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail:		

## 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 purchase their own cleaning equipment	
What arrangements are in place if rooms are not cleaned sufficiently by residents?	Manager will encourage residents to clean their apartments, if they are untidy.	

<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 checked="" type="checkbox"/>	No <input type="checkbox"/>
If *, please give details :Fridge sitting directly on carpet. No map included in fire notice				

<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 checked="" 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>Apartment untidy. Luggage to be put into storage. Walls require painting and apt requires airing</b>				

<b>APT NUMBER 28</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		6		6
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 40</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		5		4
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 41</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Single		3		1
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 42</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		5		5
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 52</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		5		5
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 57</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		6		6
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>Bathroom ceiling damp</b>				

<b>APT NUMBER 58</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		7		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 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 59</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		7		4
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>Bath panel cracked</b>				

<b>APT NUMBER 60</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		6		VACANT
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input 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 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: Being renovated.				

<b>APT NUMBER 61</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		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 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 62</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		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 checked="" type="checkbox"/> No * <input type="checkbox"/>				
If *, please give details:				

<b>APT NUMBER 63</b>				
Room Profile:		Room Capacity:		Room Occupancy:
<b>Family</b>		<b>4</b>		<b>4</b>
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:
<b>Single</b>		<b>2</b>		<b>1</b>
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 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 fire notice</b>				

<b>APT NUMBER 65</b>				
Room Profile:		Room Capacity:		Room Occupancy:
<b>Family</b>		<b>2</b>		<b>Vacant</b>
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 66</b>				
Room Profile:		Room Capacity:		Room Occupancy:
<b>Family</b>		<b>5</b>		<b>5</b>
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 67</b>				
Room Profile:		Room Capacity:		Room Occupancy:
Family		4		4
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		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 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:				





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


5<sup>th</sup> July, 2016

The Reception and Integration Agency carried out an inspection at Carroll Village on 13<sup>th</sup> June, 2016. A copy of the inspection report is enclosed for your attention and I apologise for the delay in forwarding this 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 22<sup>nd</sup> July, 2016 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

21<sup>th</sup> July 2016

**Re: RIA Inspection - Carroll Village**

Dear Ms Walker


Further to the inspection by RIA at Carroll Village on 13<sup>th</sup> June 2016, 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 she showed and the helpful comments she 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 12	<ul style="list-style-type: none"> <li>a. Fridge sitting on the carpet</li> <li>b. No map included in fire notice</li> </ul>	<ul style="list-style-type: none"> <li>a. Personal Fridge- requested to move into kitchen</li> <li>b. Fire notice as required in apartment complex</li> </ul>
2	Apt 25	<ul style="list-style-type: none"> <li>a. Apartment untidy</li> <li>b. Luggage to be put in storage</li> <li>c. Walls require painting – apartment needs airing</li> </ul>	The resident in this apartment has been spoken to about the state of her residence. However she refuses to make any significant changes. RIA are aware of the difficulties in dealing with this lady.
3	Apt 57	Bathroom ceiling damp	No dampness found but wall and ceiling needed to be cleaned-completed 18 <sup>th</sup> June
4	Apt 59	Bath panel cracked	Replaced 20 <sup>th</sup> June
5	Apt 64	No fire notice	Notice now in place
6	General	No fire certificate notice for Fire Fighting Equipment	Copy of certificate now in place in the Fire Register.

