# IPAS/IPPS

# Independent<br/>Inspection Report

Centre:	Glenvera
Inspector:	Shane Mac Loughlin
Date of Inspection:	30/3/21
Time of Arrival & Departure:	3pm- 5.30pm

# Part 1 General Information on Services

# **Independent Inspection Report**

Centre: Glenvera

Date of Inspection: 30/3/21

1. (	CENTRE	DETAILS

1. CENTRE DETAILS	T	
Name and address of Centre	Glenvera Hotel, Wellington Ro	oad,Cork
Contractor	Bideau Ltd.	
Manager	Martina Collins	
Who deputises for manager in his/her	Give Job Title only	
absence?	Assistant Manager	
Telephone Number	0214504104	
Current Contracted Capacity	131	
Current Occupancy (today)	97	
Current Centre Profile (e.g., singles, families etc.)	Single Males	
LICE A	Count	
HSE Area	South	
Public Health Nurse	Catherine Lynch & Margare	t Mulcahy
DSP / CWO name	Rosanne O' Donovan	
Environmental Health Officer name	Deirdre Anderson	
Local Fire Officer Name	John Ryan	
Local Fire Station	Cork	
Is the Centre certified by any Quality Manage (i.e. Q Mark, ISO)?:	ement System Yes No	
If yes, please give details:	2	
What was the date of the last certification		
Have you a copy of the Certification	Yes No	
2. Please provide a copy of the follow	wing	
	Ch	eck List
Official Register		
Menu Cycle		
Staffing Lists as follows:		
1. Full list of staff employed at the centre (indicating Names, Titles, Roles, etc.,)		
2. Indicate who is on duty at time of inspection (today)		
<b>3.</b> a separate list of Designated Liaison Pers		

3	<b>GENERAL SECURITY &amp; EMERGENCY DETAILS</b>

GENERAL SECURITY & EMERGENCY DE	TAILS	
Is 24 hour supervision provided?	(Y/N)	Yes 🛛 No 🗌
Give details of roster hours		24 hour cover. Management cover from 0830 to 1930. Night porters take over.
Is security provided by external company?	(Y/N)	Yes No 🖂
If yes, give name of company:		
Does the centre have CCTV?	(Y/N)	Yes 🔀 No 🗌
Is a list of emergency numbers available in the Manager's office?	9	Yes No 🗌
Does the list include the following numbers?  Local Garda station 24 hr number  Local hospital	(Y/N)	Yes No
Local fire station Duty Social Work Team Out of hours GP Service IPAS/IPPS out of hours number		If no, give details:
Are first aid kits available?	(Y/N)	Yes 🛛 No 🗌
Where and how many?		2. in kitchen and office
Who is responsible for first aid restocking?		Job title <u>only</u> (not name) of person responsible: <b>Manager</b>
Is there a defibrillator in the centre? How many staff been trained to use it?		Yes No 🖂

What type of heating is used in the centre?	Electricity (storage heaters)
Do residents have control of the heating in their own bedroom?	Yes 🛛 No 🗌
If no, what arrangements are in place?	
What are the heating 'ON' times?	24hours. Controlled by resident

#### 5 HOUSE RULES

Are residents provided with a copy of the House Rules on arrival?	Yes No 🗌
How does centre management explain house rules to residents on arrival?	New residents are given introduction to house rules and shown around the centre. House rules are also hung on the back of all bedroom doors.

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

Are residents issued with key for their bedroor	n?(Yes/No)	Yes	$\boxtimes$	No	
Are residents issued with key for main door?	(Yes/No)	Yes		No	$\boxtimes$

If no, give details	Code on door
Are there procedures to allow residents to receive	Yes
visitors? (Give details)	
Outline visiting times:	10 to 10
In what areas are visitors allowed in the centre?	In lounge and reception and pool room
Any other relevant information:	
Is there a facility for storage of residents' valuables*?	Lockers in bedrooms, extra luggage can
(Give details.) (* Storage is at resident's own risk)	be stored
What toiletries are provided to residents on arrival?	Toothpaste, shampoo, shower gel,
	toilet paper
What arrangements are in place to replenish these	Dispenser in room filled on request.
items?	Toilets paper from reception

#### 7 ARRANGEMENTS FOR MAINTENANCE

Does the centre have a written procedure in place	Yes 🛛 No 🗌	
for residents to report maintenance issues? (Yes/No)		
Is there a maintenance day book? (Yes/No)	Yes 🛛 No 🗌	
Describe the maintenance procedure at the centre:		
Day diary in mangers office		

#### 8 CHILD PROTECTION

Are measures in place to inform staff and visitors of	No ( no children at centre)
IPAS/IPPS 's Child Protection Policy?	
(Give details)	
Are visitors asked to sign a declaration agreeing to	No ( no children at centre)
adhere to the child protection policy?	
Where is declaration held?	Office
Is there a sign in book for visitors? Where?	Reception
Are there notices on public display giving name and	No ( no children at centre)
contact details of Designated Liaison Person? Where?	
Have Designated Liaison Persons received HSE training?	No ( no children at centre)
Are notices prominently displayed regarding parental	No ( no children at centre)
supervision of children? Where?	

#### 9 FOOD SAFETY

Has a HACCP system been implemented? (Yes/No)	Yes 🔀 No 🔝
Have the premises been inspected by an Environmental	Yes No
Health Officer? (Yes/No)	
Date of last visit:	7/9/19

10 NUTRITION / SCHOOL LUNCHES / BABY FORMULA (general arrangements)

Are residents consulted regarding menu /	Yes.
dietary requests? (Give details.)	
Provide details opposite:	No ( no children at centre)
Which of the following are provided for school	
children's packed lunches:	
<ul> <li>Sandwich? What sandwich fillings are</li> </ul>	
available: Cheese? Ham? Chicken?	
Tuna? Jam? Other?	
<ul><li>Drinks? Juice? Water?</li></ul>	
• Yogurt?	
• Fruit?	
Other	
Is infant formula kept out of public view?	No ( no children at centre)
What arrangements are in place for	No ( no children at centre)
distribution of infant formula?	

# 11 ARRANGEMENTS FOR REFRESHMENTS / MEALS OUTSIDE NORMAL MEAL TIMES

Are tea / coffee / drinking water / Snacks etc.	Yes 🛛 No 🗌
available outside mealtimes?	New shop system is now in place and has gereal
	opening time of 9-7pm daily but can also be
	opened on request,
What food/snacks are available after hours or when	Bread, butter, jam. Microwave available to heat
kitchen is closed?	up meals
Where are the snacks located and how are they	Communal room and dining room when open
accessed?	
Are meals available for residents who arrive late?	Yes No 🗌
(Give details.)	When pre advised
Are meals available for new arrivals?	When pre advised
(Give details)	
Are packed lunches available for residents	Yes No 🗌
travelling to Dublin on official business?	Sandwiches, yoghurts and juice
(Give details)	
If the inspection takes place during Ramadan this	
section <u>must</u> be completed.	
What arrangements are in place to facilitate	
residents observing a fast during Ramadan?	

#### 12 FACILITIES FOR FEEDING BABIES

Are the following available?	No ( no children or breast feeding mothers)			
Access to drinking water (for breastfeeding mothers	Yes No			
/ for preparation of infant formula)				
Sterilisers	Yes No			
Kettles	Yes No			
Fridge (for bottles of EBM* / formula) *Expressed	Yes No			
Breast Milk				
Bottle Warmer	Yes No			
Microwave	Yes No			
Are these facilities available 24 hours a day	Yes No			

Is there a dedicated room provided?		Yes No
Where?		
42 INDOOR FACULTIES		
13 INDOOR FACILITIES  Are the following are available to reside:	nts?	Yes/No
	11.5:	Yes No
Computers with Internet access WIFI	<del></del>	Yes No
	-+	
DVD player	<del></del>	Yes No X
Computer Games		Yes No No
Snooker Table	$\longrightarrow$	Yes No
Pool Table	$\longrightarrow$	Yes No
Table Tennis Table	$\longrightarrow$	Yes No
Board Games		Yes No
Newspapers		Yes No
Books		Yes 🛛 No 🗌
Toys / games for children		Yes No 🖂
Other		
Give details of any other arrangement or other	er	
comments:		
14 TRANSPORT ARRANGEMENTS		
Is there a bus service provided?	T	Yes No
(Yes/No):		res 📋 NO 🖂
	<del> </del>	
Where does the service go to?		
What is the frequency of the service? (List time table opposite)		
(List time tuble opposite)		
45 TV CVCTERA		
15 TV SYSTEM	T	V . M
Is there a specific TV system in place?	61	Yes No L
(give details)	-	lounge over 100 channels
An average, how many TV channels are	Bedroo	oms have 6 channels
provided to residents?	ļ	
Are residents allowed to erect satellite	No	
dishes?		
16 LAUNDRY FACILITIES (General Arra	ıngeme	nts)
Are Laundry facilities available in the centre?		Yes No
If No, what service is provided?		6 washing machines and 6 dryers
Who launders towels and bedlinen?		Residents
(e.g., residents, staff, other, etc)		
What procedures are in place for the exchange	ze of	Ask at reception
towels and bed linen at the centre?	, .	7 St. at 1 cccption
What procedures are in place for ironing boards		No ironing boards
and irons?	lus	No noning boards
How is washing powder / tablets supplied?		Ask at reception
Trovi is trasming potraci / tablets supplied.		7 tok at 1 deeption

Are there specific arrangements for access to the	700-2200
laundry (give details):	

17 CLEANING (General Arrangements)

Are there cleaning materials and equipment provided by management for residents?	Yes 🛛 No 🗌
What cleaning equipment is available to residents?	Vacuum, mops, brushes and detergents
What is the procedure for residents to access vacuum cleaners, brushes & other cleaning equipment?	In reception on request
What arrangements are in place if rooms are not cleaned sufficiently by residents?	Cleaned by staff

### PART 2

# Room by Room Inspection

# **Independent Inspection**

Centre: Glenvera Hotel

Date of Inspection: 30/2/21

#### **Section A- Administration / Communal areas**

#### 17 Have you seen the following?

		Location of display
Up to date House Rules	$\boxtimes$	In bedrooms not in reception
Complaint Forms	$\boxtimes$	In office
Accident/ Incident procedure		In office

HSE Breastfeeding Posters		No children
(if applicable)		
Designated Liaison Person details		No children
(Child Protection)		
Supervision of children notice		no children
Gym Notices (Child Safety – if applicable)		No gym
IOM Voluntary Return Posters	$\boxtimes$	In reception

#### 18 Staff Awareness

Did you see the IPAS/IPPS Code of Practice*?	
Are all staff aware of IPAS/IPPS Code & House Rules?	
How are staff made aware of IPAS/IPPS Code & House Rules?	
On joining	

<sup>\*</sup>A Code of Practice for persons working in accommodation centres

#### 19 FIRE SAFETY

You should record the last 2 entries on the fire register for each of the following sections:

#### 19a EMERGENCY LIGHTING INSPECTION SCHEDULE

<u>Date</u>	Inspected By (Company Name / Position)	<u>Comments</u>
29/3/21	Assistant Manager	
28/3/21	Assistant Manager	

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

Date	Inspected By	OK	Defect	Remedial Action	Sign Off
	(Company Name /			Taken (Y/N)	Y/N
	Position)				
29/3/21	Assistant Manager	$\boxtimes$	None	n/a	у
28/3/21	Assistant Manager	$\boxtimes$	None	N/a	Υ
18/1/21	Absolute fire	$\boxtimes$	None	N/a	Υ
	systems				

#### 19c FIRE FIGHTING EQUIPMENT INSPECTION SCHEDULE

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

<u> </u>	<u> </u>		,		
Date	Inspected By (Company	ОК	None	Remedial Action	Sign Off
	Name / Position)			Taken (Y/N)	Y/N

29/3/21	Assistant Manager	$\boxtimes$	None	Υ
28/3/21	Assistant Manager	$\boxtimes$	None	Υ
08/2020	Apex	$\boxtimes$	None	Υ

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

Date	Inspected By	ОК	Defect	Remedial	Sign Off
	(Company Name /			Action	Y/N
	Position)			Taken (Y/N)	
29/3/21	Assistant Manager		None		Υ
28/3/21	Assistant Manager		None		Υ

#### 19e FIRE DRILL PROCEDURE INSPECTION SCHEDULE

Date & Time	Numbers of staff involved in drill	No. of residents present / evacuated **	Evacuation Time	Comments
17/6/20	5	75	10 min	
11/1/21 9am	4	82	8min	No issues

<sup>\*\*</sup>Both numbers must be recorded

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

Job Description	Course	Instructor	Duration	Date	
All staff Fire training		Able fire	Half day	25/4/19	
	course				

#### 19g FIRE ASSEMBLY POINTS

Where are the Fire Assembly Points	Opposite building	
located?		
Are they marked?	Yes	
Are staff aware of locations?	Yes	
Comments:		

#### 19h FIRE ALARM SYSTEM

Is there a fire alarm system in place?	Yes
Are there smoke alarms throughout the	Yes
premises, inc bedrooms?	
Are all smoke alarms linked back to a	Yes
central control panel?	
Are there designated 'Smoking' areas?	Yes. In courtyard
Include locations	
Comments:	

#### 19i 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	Yes
building?	
Are all fire doors kept closed?	Yes
Are fire evacuation instructions clearly	Yes
displayed in the centre?	
Are fire extinguishers clearly visible?	Yes
Is there emergency lighting system in	Yes
place?	
Comments:	

## **Administration Area:**

Reception:		
Is the area generally clean?		Yes No
If no please give details:		
Visual Check: Have you noticed any issues re (e.g., fire exit signs, hazards, lighting, notices, dé		ention? Yes No
If yes please detail:	cor, etc.)	
ii yes piease detaii.		
Have you seen the following?		Location of display
Up to date House Rules		In each bedroom
Complaint Forms		In managers office
Accident/ Incident procedure		In office
		1 333 233 23
HSE Breastfeeding Posters (if applicable)		Not displayed No Children
Designated Liaison Person details	-	Not displayed No Children
(Child Protection)		rtot displayed to elimaten
Supervision of children notice		Not displayed No Children
Gym Notices (Child Safety – if applicable)	No gym	
IOM Voluntary Return Posters	$\overline{\square}$	In reception
Anti Human-Trafficking Posters		Not displayed
'NO to Violence & Harassment' Posters		Not displayed
Social Room / Tea Station (State Location What facilities are provided? Tea and coffee	•	ge
Is the area generally clean?		Yes 🛭 No 🗌
If no please give details:		
Visual Check: Have you noticed any issues re	equiring atte	ention? Yes No 🖂
If yes please detail:		
Pre-school Room:		
Is the area generally clean? Yes / No	N/a	
If no please give details:		
Visual Check: Have you noticed any issues re (observe whether the area is colourful, has sufficient to		<del>_</del> _
Other comments:		

#### **DINING AREA:**

#### Please outline the meal times:

Please outline the m	eal times	:								
	From				То					
Breakfast	7				10					
Lunch	12.45	12.45			13.30					
Dinner	5.15				1800	)				
					•					
Which is the main meal of the day: Lunc			Lunch		Dinn	er 🛭	<u> </u>			
Is menu cycle availabl		•		Yes	$\overline{\boxtimes}$	No				
If no, give details of a	ll menu c	ption	s on day	y of ins	spection	า:				
Lunch										
Dinner										
Is menu cycle on displ	ay?					Yes				
Does menu cycle corre	espond wi	th opti	ions ava	ilable?		Yes				
If no, ask manager for	explanati	on and	d provide	e detail	s:					
Please describe the meal in detail (e.g. was it hot / Mixed bean curry – very tasty and not too spicy			су	cold, bland / spicy etc.)						
Was there a vegetaria (note salad and veget	•	0 250 5	ant		Yes Mixed bean curry					
considered as vegetar			101	"	viixeu bi	ean cu	ııy			
Give details of this op		'/								
Were there ethnic dis		hla?			⁄es					
Were there ethnic dis	iics availa	DIC:		'						
Give details of this op	tion:			L	Lamb and basmati rice					
Was fresh foods availa		fants?		Y	es [		No		N/A	
(as per HSE Infant Fee	ding Guid	elines)						_		
In your opinion, does	the food o	n offe	r appear	r to Y	′es [	X	No			
provide a good variety	provide a good variety?									
Did inspection take place during Ramadan?			r	าด						
If yes, please outline a	ırrangeme	nts for	r provisio	on of m	neals out	tside o	f nor	mal n	nealtime	es,
(medical or other appoir	ntments, et	c.):								
Is there any damaged						Yes		No		
Is there enough seatir eat their lunch?	ng tor resid	dents p	oresent t	o sit do	own and	l Yes	$\bowtie$	No		
Comments:										

#### **KITCHEN AREA: Food Safety Critical Requirements**

#### **FOOD SAFETY**

Has the premises been inspected by an	Yes
Environmental Health Officer?	
Date of Visit?	7/9/19
Comments:	

Has a HACCP system been	Yes
implemented?	
Who designed the HACCP system?	Chef
Who is responsible for reviewing the	Chef
system?	
How frequently is the system reviewed?	Annually

#### **HACCP Records:**

Pest Control: no activity noted (ArrrestAPest 1-9-2020)
Induction and Ongoing Staff Training: in place
Time & Temperature Records: in place and up to date
Hygiene Audits: In place
List of Approved Suppliers: In place
Cleaning Schedules: In place
Procedures for accepting deliveries: in place
General Comments:

#### **HACCP** and Kitchen Evaluation

#### **General:**

Is the kitchen commercial or domestic?	Commercial and 4 new domestic hobs
	for resident use
What equipment is in place? Fridges, free	zer, hobs etc,
In what condition is the equipment? Good	d condition
Comments:	

#### STRUCTURAL HYGIENE

#### Kitchen:

Is the refuse area suitably located?	Yes				
Is the area tidy?	Yes				
Are all bins covered?	Yes				
Are signs displayed at all entrances in	Yes				
relation to access to kitchen for non					
kitchen staff?					
Are white coats, shoe covers and hats	Yes				
available for non kitchen staff?					
Comment of the structural hygiene of the	kitchen (i.e				
floors/walls/ceilings/doors/windows/world	k surfaces/ventilation, etc)				
Kitchen Lino needs replacing					
Are suitable hand washing and drying	Yes				
facilities provided?					
General Comments:					

#### Dry Goods:

Suitably equipped? Shelving/containers	yes
etc	
Condition and suitability of facilities: Facil	ities suitable
What evidence is there of stock rotation?	Labelled and dated

#### **Refrigerated Storage:**

What type of refrigerated storage is provided?	Freezer (walk in and chest), walk in cold store, fridges and new freezer and fridge in shop
Comment on the condition and suitability condition	of the refrigerated storage: good
Are thermostats provided and in working order?	Yes
Are food items date stamped?	No Turkey wings in shop freezer had no labels
Are samples of dishes being kept?	Yes

#### Other:

Is there appropriate storage for cleaning	Yes
agents and chemicals?	

#### **OPERERATIONAL HYGIENE**

Do residents use the main kitchen?	No
Is that use supervised to ensure safe &	n/a
hygienic practices are observed?	
By whom is it supervised?	n/a

Is the correct equipment provided? e.g. colour coded chopping boards	
yes	

Is the necessary holding equipment provided? e.g. bain maries, refridgerated units.

Yes, cleaned weekly

Condition and suitability of serving equipment and utensils: Good condition

What procedures are in place for unused/unserved food at the end of service?

Chilled and stored

Comments:		

STAFF FACILITIES AND HYGIENE	
Are designated staff facilities provided?	Yes
What facilities are in place?	Changing room and separate toilet
Are all areas clean and well maintained?	Yes
Are suitable hand washing & drying	Yes
facilities provided?	
Is storage provided for personal	yes
belongings?  Are showers provided? <i>Indicate</i>	Yes
cleanliness & suitability	res
cicariiness & saitabinty	<u> </u>
Is a designated area provided for staff	Yes, suitable
breaks? If yes, is it clean/suitable/well	
maintained.	
If no, outline arrangements for breaks	
Are uniforms provided for:	
Kitchen Staff?	yes
Serving Staff?	yes
Are uniforms clean and in good	Clean and in good condition
condition? (to include	
caps/hairnets/closed heel/toe shoes etc)	
Is personal grooming satisfactory?	yes
Are safe habits practiced?	yes
General Comments on staff facilities:	
23 Public Toilet - beside manage	ers office (used by residents)

1	Number	Soap	Toilet	Hand Towels /	Hot	Sanitary Bins
			Paper	Dryers	Water	
Unisex:	3 toilets	$\boxtimes$				
	showers					

Is there a	cleaning sch	edule d	lisplaye	d?				Yes		No	o 🛛
	ne last time e										
Is the are	ea clean? (pro	vide co	mment	:) yes							
	cilities workir							Yes		N	o *
Visual Ch	eck: Have yo	u notic	ed any	issues r	equiring attent	ion?		Yes*		N	o 🗵
If No, giv	e details:										
Yest Te	ilat and Ch										
otan 10	ilet and Sh Number	Soa	n   -	Γoilet	Hand Towels	7	Hot		San	itar	y Bins
	Number	30a	'	Paper	Dryers	<b>'</b>	Wate		Jaii	itai	y DIIIS
Unisex:	1			X				-			
	TOILET										
	& 1SHOWER										
Is there a	cleaning sch	edule d	lisplave	d?		1		Yes	П	No	
	ne last time e		- 12 17 0	-					_		
	a clean? (pro		mment	:) yes							
Are all fa	cilities workir	ıg?						Yes	$\boxtimes$	N	o *
Visual Ch	eck: Have yo	u notic	ed any	issues r	equiring attent	ion?		Yes*	: [	N	o 🖂
If No, giv			<u> </u>		<u>.                                    </u>						
Storage a	OMMUNAL Farea:	ROOM	(State	Location	on): Lou	ınge					
Is the wa	Ikway throug	h the a	rea clea	ır?			Yes	$\boxtimes$	No		]
Are the exit signs clearly marked? Yes No											
_											
	Seating Area		2				V		NI-	_	1
is the sea	ating in good	conditio	on?				Yes		No		J
What is t	he area gene	rally us	ed for?	Watchi	ng television		Yes	$\boxtimes$	No		1
		,			0		(				•
Compute	er room:										
Is the are	ea generally cl	ean?					Yes		No	$\boxtimes$	
	•	u notic	ed any	issues r	equiring attent	ion?	Yes		No	$\boxtimes$	
If yes ple	ase detail:										
A		\ .r	.1	J. 1 . 21							
Any other comments? If yes please detail:											
NITDOO	D CDOLINIDO	/ EAC	II ITIES								
OUTDOOR GROUNDS / FACILITIES Please rate the following:											
riease rai	te the follow	ing:	Von	Good	Adaguata	Pod	or*	Nec	ds ura	rent	attention <sup>3</sup>
Condition	of exterior of		very	Good	Adequate	700	7	1466	us ui g	Sent.	attention
centre	OI EXCEITOT OF		L	_		L	_				1
	of the centre					Г					

Maintenance standard of the grounds (e.g. grass cut, walkways clear etc.)  Cleanliness of the grounds (ie., evidence of rubbish etc.)  Where you have rated * please provide details and comments:  Are there any facilities available for children outdoors? Yes  No Na Comments  Available for children outdoors? Yes  No Na Comments  Available for children outdoors? Yes  No Na Comments  Aundry Room  Washing Machines Dryers  Number  6  6  Do they appear to be in working order? Yes  Comments:  CORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No If yes please detail:  STAIRWAY All stairways:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:						
Walkways clear etc.)  Cleanliness of the grounds (ie., evidence of rubbish etc.)  Where you have rated * please provide details and comments:  Are there any facilities available for children outdoors? Yes  No  N/a  Comments  AUNDRY ROOM  Washing Machines  Dryers  Number  6  6  Do they appear to be in working order? yes  Comments:  ORRIDOR:  Is the area generally clean?  Yes  No  If no please give details:  Visual Check: Have you noticed any issues requiring attention? No  If yes please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  If yes please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  If yes, fire exit signs, hazards, lighting, notices, décor, etc.)						
Cleanliness of the grounds (ie., evidence of rubbish etc.)  Where you have rated * please provide details and comments:  Are there any facilities available for children outdoors? Yes  No N/a  Comments  AUNDRY ROOM  Washing Machines Dryers  Number 6 6  Do they appear to be in working order? yes  Comments:  ORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No If yes please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)						
(ie., evidence of rubbish etc.)  Where you have rated * please provide details and comments:  Are there any facilities available for children outdoors? Yes						
Are there any facilities available for children outdoors? Yes  No N/a  Comments  AUNDRY ROOM  Washing Machines Dryers  Number 6 6  Do they appear to be in working order? yes  Comments:  CORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No If yes please detail:  TAIRWAY All stairways:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:	_					
AUNDRY ROOM  Washing Machines  Dryers  Number  6  Do they appear to be in working order? yes  Comments:  CORRIDOR:  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? No  If yes please detail:  TAIRWAY All stairways:  Is the area generally clean?  Yes  No  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	Where you have rated * plea	se provide deta	ails and comme	ents:		
AUNDRY ROOM    Washing Machines   Dryers	Are there any facilities availa	ble for children	outdoors? Ye	es 🗌	No [	N/a
Washing Machines   Dryers	Comments					
Number 6 6  Do they appear to be in working order? yes Comments:  CORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No If yes please detail:  TAIRWAY All stairways: Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	AUNDRY ROOM					
Do they appear to be in working order? yes  CORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No If yes please detail:  TAIRWAY All stairways:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)		Washing	Machines		Dryer	S
CORRIDOR:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? No  If yes please detail:  Is the area generally clean? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:	Number		6		6	
Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? No  If yes please detail:  IS the area generally clean?  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No Image: No Im	, , ,	ing order? <b>y</b>	es			
Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? No  If yes please detail:  TAIRWAY All stairways:  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	Comments:					
Visual Check: Have you noticed any issues requiring attention? No  If yes please detail:  TAIRWAY All stairways:  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)				Yes		No 🗌
If yes please detail:  TAIRWAY All stairways:  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	If no please give details:					
TAIRWAY All stairways:  Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	Visual Check: Have you notic	ed any issues r	equiring attent	ion? No		
Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	If yes please detail:					
Is the area generally clean?  If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes  No  (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)						
If no please give details:  Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	STAIRWAY All stairways	:				
Visual Check: Have you noticed any issues requiring attention? Yes No (e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	Is the area generally clean?			Yes		No 🗌
(e.g., fire exit signs, hazards, lighting, notices, décor, etc.)	If no please give details:					
it yes piease detail:	(e.g., fire exit signs, hazards, lig	•		ion? Yes		No 🛚
• •	if yes please detail:					

#### **Bedrooms:**

If \*, please give details:

**CLEANING (General Arrangements)** How often are bedrooms inspected? twice weekly Weekly Who cleans the bedrooms? Staff Residents How often do staff clean the bedrooms? Weekly fortnightly Monthly Other Are there cleaning materials and equipment provided by management for Yes  $\boxtimes$ No residents? What cleaning equipment is available to Vacuum, cleaning detergents, mops etc residents? Staff will clean What arrangements are in place if rooms are not cleaned sufficiently by residents? **Toilet and Shower** Number Soap Toilet Hand Towels / Hot Sanitary Bins Paper Water Dryers  $\boxtimes$ Unisex: M  $\bowtie$  $\bowtie$ Beside room 8 2 toilets and showers Is there a cleaning schedule displayed? Yes No  $\boxtimes$ Record the last time entry. Is the area clean? (provide comment) yes Are all facilities working? No \* Yes Visual Check: Have you noticed any issues requiring attention? Yes\* No If No, give details: ROOM NUMBER 1 Room Profile: Room Capacity: Room Occupancy: Shared 2 Ensuite **Shared Bathroom Smoke Alarm** Fire Notice TV  $\boxtimes$  $\boxtimes$  $\boxtimes$ XVery Good Adequate Poor \* Needs urgent attention \* Cleanliness No \* Is everything in working order? Yes 🔀

ROOM N	UMBFF	₹ 8								
Room Pro		<u>.                                     </u>			Roo	m Capa	citv:		Roor	m Occupancy:
Shared					3	оара	,.		32	с ссиринеј.
TV		Ensu	uite	Shared	d Bathı	room	Smok	e Ala		Fire Notice
								X		$\boxtimes$
		Ve	ry Good	l Ade	quate	Pc	or *	Ne	eeds ı	urgent attention *
Cleanline	SS				$\times$					
Is everyth	ning in v	workir	ng ordei	?		Υ	es			
If *, pleas	se give	details	5:							
ROOM N	UMBEF	R 7								
Room Pro	ofile:				Roo	m Capa	city:		Roor	m Occupancy:
Shared					5				0	
TV		Ensu	iite	Shared	Bathr	room	Smok	e Ala	rm	Fire Notice
		Ve	ry Good	l Ade	quate	Pc	or *	Ne	eeds ı	urgent attention *
Cleanliness										
Is everyth	ning in v	workir	ng ordei	?		Υ	'es 🔀	N	0 * [	
If *, pleas	se give	details	s:							
ROOM N	UMBER	₹ 2								
Room Pro					Roo	m Capa	city:		Roor	m Occupancy:
Shared					5	•	•		3	, ,
TV		Ensu	iite	Shared	d Bathı	room	Smok	e Ala	rm	Fire Notice
					$\boxtimes$			$\boxtimes$		
	•	Ve	ry Good	Ade	quate	Pc	or *	Ne	eeds ı	urgent attention *
Cleanline	SS				$\times$					
Is everyth	ning in v	workir	ng ordei	·		Υ	'es 🔀	N	o * [	
If *, pleas	se give	details	5:							
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Toilet a				7.11	a+	110	el- /		la±	Constant Divi
	Numb	per	Soap	Toil Pap		Hand To Dry			lot ater	Sanitary Bins
Unisex:	Besid	le		Ė		×			$\boxtimes$	
	room	2								
	4	.:1								
	_	oilet								
	and									
lc +b === -	show		مطیباء دا	iculava 42					V-	ns Ns M
Is there a Record th		_		ispiayed?					YE	es 📗 No 🖂
Is the are				mment) v	ves					
.5 c. /c arc	J.Cuii	. , , , , ,			,					

A 11 C 11111	11 2						<u> </u>	*D
Are all facilities	<del>-</del>						es 🗵	No *
	Have you notice	ed any issu	ies requ	uiring a	attention	1? Y	'es*	No 🖂
If No, give de	tails:							
ROOM NUMI	BER 3							
Room Profile	<u>:                                    </u>		Room	Capa	city:	Roo	m Occup	ancy:
Shared			3			3		
TV	Ensuite	Shared	Bathro	om	Smok	e Alarm	Fire	Notice
$\square$					r			$\square$
					L L			
	Very Good	d Adeq	uiate	Po	or *	Needs	urgent at	tention *
Cleanliness	Very door	Aucu		1		Necus		cention
	in working order	<u> </u>	<u> </u>	L	Voc N	No*		
	in working order	ı ŗ			Yes 2	7 110.		
If *, please gi	ive details:							
ROOM NUMI	BER 4							
Room Profile	•		Room	Capa	city:	Roo	m Occup	ancy:
			4		,	3		<u> </u>
TV	Ensuite	Shared	Bathro	om	Smok	e Alarm	Fire	Notice
$\square$					<u> </u>	$\overline{A}$		$\square$
					L			
	Very Good	d Adeq	uate	Po	or *	Needs	urgent at	tention *
Cleanliness			<u> </u>					
Is everything	in working order	r?			Yes 🔀	No *		
If *, please gi	ive details:							
ROOM NUMI	DED E							
Room Profile			Doom	Cana	oit.	Doo	m Ossun	2004
	•		KOOIII	Capa	city.	KOO	m Occup <b>2</b>	aricy.
Shared	Encuito	Shared	Dathra	_	Cmak	e Alarm		Notice
TV	Ensuite	Shared	ваино	OIII	SHOK	e Alarm	Fire	Notice
$\square$			$\boxtimes$			$\boxtimes$		$\boxtimes$
	Very Good	d Adeq	ulate	Do	or *	Needs	urgent at	tention *
Cleanliness	very Good	Aueq	uale 	٦		iveeus	uigeiil dl	.tention
		<u> </u>	7	<u> </u>		N - * -	<u> </u>	
	in working order				′es 🔀	No *		
It *, please gi	ve details: wall	around he	ater ne	eds pa	ainting			
ROOM NUMI	BFR 214							
Room Profile			Room	Capa	citv.	Roo	m Occup	ancv.
Shared	•		3	Capa	C1 C y .	3	Occup	aricy.
TV	Ensuite	Shared	_	om	Smoke	e Alarm	Fire	Notice
, v	Liisaite	Jilaica	Datino	J111	Jilloki	c / tidi i i i	1116	110000
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						- · ¥		1.				• *
Cleanline	NCC	Very Goo	a Adec	quate	POO	or *	INE	eas	urge	ent a	attent	ion "
		vorking orde	<u> </u> r2		<u>L</u>	 es ⊠	No *					
If *, plea			1:		11	es 🔼	INC					
ii , piea	se give c	ictalis.										
Toilet a	1		1				1					
İ	Numb	er Soar			land To			lot		Sai	nitary	Bins
I I a la a	D '-1	- 🔽	Pape	er	Drye	rs		ater	+		$\overline{}$	
Unisex:	Besid	e   🖂						$\boxtimes$			Ш	
ı	room											
	office											
	1 toi	lata										
		iets										
	and											
	with I	_										
Is there a cleaning schedule displayed? Yes No							$\square$					
Record the last time entry.												
		? (provide co	mment) v	ves								
Are all fa				,				Y	es	X	No	*
		ve you notic	ed any issi	ies rea	uiring a	ttentio	n?		es*		No	
If No, giv				200.09	<u></u>						- 110	
11 140, 814	c actans											
ROOM N	UMBER	211										
Room Pr	ofile:			Roon	n Capac	ity:		Roo	m O	ccu	pancy	<b>':</b>
shared				3	•			2				
TV		Ensuite	Shared	Bathro	oom	Smok	e Alaı	rm		Fir	e Not	ice
		$\boxtimes$				[						
	I	Very Goo	d Adec	quate	Po	or *	Ne	eds	urge	ent a	attent	ion *
Cleanline	ess											
Is everyt	hing in v	vorking orde	r?	_	Y	es 🖂	No	*				
If *, plea	se give c	letails:										
ROOM N	UMRFR	214										
Room Pr				Roon	n Capac	itv:		Roo	m O	CCU	pancy	<u>':</u>
Shared				3				2				
TV		Ensuite	Shared	Bathro	oom	Smok	e Alaı	rm		Fir	e Not	ice
		$\boxtimes$				[						
	I	Very Goo	d Adec	quate	Pod	or *	Ne	eds	urge	ent a	attent	ion *
Cleanline	ess				Γ							
Is everyt	hing in v	vorking orde	r?		Y	es 🖂	No	*				
If *, plea												
	-											

$\sim$	ш	Int
u	4	ICL

ronet										
	Numb	er	Soap	Toile	t H	and To	owels /	Но	ot	Sanitary Bins
				Pape	r	Dry	ers	Wat	ter	
Unisex:	Besid	е	$\boxtimes$			$\geq$				
	room									
	215bl	(								
Is there a	cleanin	g sche	dule disp	olayed?					Yes	No 🖂
Record th	ie last ti	me en	try.							
Is the are	a clean	? (prov	ide com	ment) y	es					
Are all fac	cilities v	vorking	ξ?						Yes	S
Visual Ch	eck: Ha	ve you	noticed	any issu	es requ	uiring a	attentio	n?	Yes	s* No
If No, give	e details	5:								
ROOM N		215	a							
Room Pro	ofile:					Capa	city:			Occupancy:
Single			. 1		3			2		
TV		Ensui	te	Shared	Bathro	om	Smok	e Alarn	n	Fire Notice
					$\times$					$\boxtimes$
		Very	y Good	Adeq	uate	Pc	or *	Needs urge		gent attention *
Cleanline	SS			$\geq$						
Is everyth	ning in v	vorking	g order?				Yes 🔀	] N	lo *	
If *, pleas	se give (	details	:							
ROOM N	UMBER	215								
Room Pro	ofile:				Room	Capa	city:	F	Room	Occupancy:
Shared					2			2	2	
TV		Ensui	te	Shared	Bathro	om	Smok	e Alarn	n	Fire Notice
								$\boxtimes$		$\boxtimes$
		Ver	y Good	Adeq	uate	Po	or *	Nee	ods ur	gent attention *
Cleanline	SS	VCI		/ Aucq	7	1		1100	us ui	
Is everyth		vorking	order?		<u> </u>	<u> </u>	es 🖂	No	*	7
If *, pleas								110		
ii , picus		- Ctans.								
ROOM N		216			_		•			_
Room Pro	ofile:					Capa	city:			Occupancy:
Shared		F		Charrie	3		2			Fine Nietter
TV		Ensui <sup>-</sup>	te	Shared	Bathro	om	n Smoke Alarm Fire Not		Fire Notice	
$\boxtimes$		$\boxtimes$						$\boxtimes$		$\boxtimes$
		Ver	y Good	Adeq	uate	Pc	or *	Nee	eds ur	gent attention *
Cleanline	SS				7	<u> </u>				

Is everything	in working orde	r?		\	es/es		
If *, please gi		-1 ;		'			
ii , piease gi	ve details.						
DOOM NUMBER	DED 217						
ROOM NUMI			Poor	Capa	city	Por	om Occupancy:
Shared	•		3	Сара	city.	2	on Occupancy.
TV	Ensuite	Shared	_	om	Smok	e Alarm	Fire Notice
	Ensuite	Snarea			Sillok		THE NOTICE
$\boxtimes$					[	$\times$	
	Very Goo	d Adec	quate	Pc	or *	Needs	urgent attention *
Cleanliness			$\overline{\Box}$	[			
Is everything	in working orde	er?		١	⁄es		
If *, please gi	ve details:						
ROOM NUMI	DED 310						
Room Profile			Room	п Сара	city	Roc	om Occupancy:
Shared	•		2	Сара	city.	2	on Occupancy.
TV	Ensuite	Shared		om	Smok	e Alarm	Fire Notice
		3114164					
					l l	$\boxtimes$	
	Very Goo	d Adec	quate	Pc	or *	Needs	urgent attention *
Cleanliness							
Is everything	in working orde	er?		١	es 🗌	No *	$\boxtimes$
If *, please gi	ve details:						
ROOM NUMI	RFR 219						
Room Profile			Room	Capa	citv.	Roc	om Occupancy:
NOOM FORME	•		2	Сара	city.	2	on occupancy.
TV	Ensuite	Shared		om	Smok	e Alarm	Fire Notice
· · ·					F		N
$\boxtimes$					[	$\times$	
	Very Goo	d Adec	quate	Pc	or *	Needs	urgent attention *
Cleanliness				[			
Is everything	in working orde	er?		1	No		
If *, please gi	ve details: <b>fan</b>	cover need	ed and	show	er door i	is off its r	ail
ROOM NUMI	BFR 220						
Room Profile			Room	Сара	citv.	Roo	om Occupancy:
Shared	•		3	. capa	city.	2	on occupancy.
TV	Ensuite	Shared		om	Smok	e Alarm	Fire Notice
$\square$		1			 		
			$\square$			$\triangle$	

	Very Good	Adaguat	o Do	or*	Noods	urgent attention *
Cleanliness	very Good	Adequat	e Po		neeus	urgent attention '
	in working order	<u> </u>		es No	*	
If *, please giv		:	ı	<u>es 140</u>		
ii , piease giv	re details.					
ROOM NUME	BER 221					
Room Profile:		R	oom Capa	city:	Roo	m Occupancy:
Shared		3		· ·	2	, ,
TV	Ensuite	Shared Ba	throom	Smoke A	larm	Fire Notice
	$\boxtimes$					
		Adaguata	Poor *		ode ur	gent attention *
Cleanliness	Very Good	Adequate 🔀	7001	INE	eus ul	gent attention *
	in working order	<u>                                     </u>		'es 🖂 🗌	No	* 🗍
If *, please giv		•	<u>'</u>		140	
, piedse gi.	- C details:					
ROOM NUME			Como	-i+	Doo	O
Room Profile: Shared		3	oom Capac	city:	2	m Occupancy:
TV	Ensuite	Shared Bat	hroom	Smoke A		Fire Notice
	<u> </u>					
	Very Good	Adequat	e Po	or *	Needs	urgent attention *
Cleanliness						
	in working order	·?	Y	'es 🔀	No *	
If *, please giv	e details:					
ROOM NUME		ı			T _	
Room Profile:			oom Capa	city:	_	m Occupancy:
<b>Shared</b> TV	Encuito	Shared Ba	throom	Smoke A	3 Jarm	Fire Notice
	Ensuite	Silatea Ba	LIIIOOM	эпоке А	ıdıIII	rii e Notice
	Very Good	Adequate	Poor	r* N	eeds u	irgent attention *
Cleanliness						
Is everything	in working order	?	Y	'es 🔀 🛮 1	No *	
If *, please giv	ve details:					

ROOM NUME			1					
Room Profile:			Room	Capa	city:		Roo	m Occupancy:
Shared			4		ı		3	
TV	Ensuite	Shared	Bathro	om	Smok	e Alar	rm	Fire Notice
						$\boxtimes$		$\boxtimes$
	Very Good	l Adeq	ıuate	Pc	or *	Ne	eds	urgent attention *
Cleanliness								
Is everything	in working order	·?		١	′es 🔀	No	) *	
If *, please giv	ve details:							
ROOM NUME	BER 224a							
Room Profile:			Room	Capa	city:		Roo	m Occupancy:
Single 1 1								
TV	Ensuite	Shared	Bathro	om	Smok	e Alar	rm	Fire Notice
						$\boxtimes$		
	Very Good	l Adeq	uate	Po	or *	Ne	eds	urgent attention *
Cleanliness								
Is everything	in working order	· .		1	No			
If *, please giv	ve details: <b>wind</b>	ow not clo	sing pr	operly	/			
ROOM NUME	BER 225							
Room Profile:			Room	Capa	city:		Roo	m Occupancy:
Shared			2				1	
TV	Ensuite	Shared	Bathro	om	Smok	e Alar	rm	Fire Notice
						$\boxtimes$		$\boxtimes$
	Very Good	l Adeq	ıuate	Pc	or *	Ne	eds	urgent attention *
Cleanliness		)	(					
	in working order	·		Υ	'es 🛚	No	*	
If *, please giv	ve details:							

ROOM NUM	BER 226					
Room Profile			Room Capa	city:	Roo	m Occupancy:
Shared			2		2	
TV	TV Ensuite Shared		Bathroom Smoke A		Alarm Fire Notice	

$\boxtimes$	$\boxtimes$			$\boxtimes$	$\boxtimes$
,	Very Good	Adequate	Poor *	Needs	urgent attention *
Cleanliness					
	n working orde	·?	Yes 🔀	No *	
If *, please giv	ve details:				
ROOM NUMB				1	
Room Profile:			n Capacity:		m Occupancy:
Single TV	Ensuite	Shared Bathr	oom Smok	e Alarm	Fire Notice
1 V		Shared Bathir	OOM SHOK	e Alarm	Fire Notice
					$\boxtimes$
	Very Good	I Adequate	Poor *	Needs	urgent attention *
Cleanliness					
	n working order	.,	Yes 🔀	No *	
If *, please give	ve details:				
ROOM NUME Room Profile: Shared		Roor 2	n Capacity:	Roo 2	m Occupancy:
TV	Ensuite	Shared Bathr	oom Smok	e Alarm	Fire Notice
					$\boxtimes$
	Very Good	l Adequate	Poor *	Needs	urgent attention *
Cleanliness					
	n working orde		Yes		
If *, please giv	e details: <b>TV ne</b>	eeds to be fixed	to wall		
ROOM NUMB	BER 229			T.	
Room Profile:			n Capacity:		m Occupancy:
Shared		3		2	
TV	Ensuite	Shared Bathr	oom Smok	ke Alarm	Fire Notice
Cleanliness	Very Good	Adequate	Poor *	Needs	urgent attention *
		-2	<u> </u>	No *	
ις ριγρηντηίησι	n working ardai	٠,	YACIXI	INIO "	
If *, please giv	n working order	7	Yes 🔀	No *	

ROOM NUMI						
Room Profile	•		om Capa	city:	Roo	m Occupancy:
Shared		2		_	2	
TV	Ensuite	Shared Bath	nroom	Smoke	e Alarm	Fire Notice
$\boxtimes$	$\boxtimes$					$\boxtimes$
	Very Good	Adequate	e Po	or *	Needs	urgent attention *
Cleanliness						
Is everything	in working orde	r?	,	res 🖂	No *	
If *, please gi	ve details:					
ROOM NUMI	BER 231					
Room Profile	•	Ro	om Capa	city:	Roo	m Occupancy:
Shared		3			2	
TV	Ensuite	Shared Bath	nroom	Smoke	e Alarm	Fire Notice
					$\boxtimes$	$\boxtimes$
	Very Good	d Adequate	e Po	or *	Needs	urgent attention *
Cleanliness						
Is everything	in working orde	r?	`	res 🖂	No *	
If *, please gi	ve details:					
ROOM NUMI	BER 232					
Room Profile		Ro	om Capa	citv:	Roo	m Occupancy:
Shared		2	·		2	, ,
TV	Ensuite	Shared Bath	room	Smoke	e Alarm	Fire Notice
	$\boxtimes$				$\overline{\mathbf{X}}$	
	Very Good	Adequate	Po	or *	Needs	urgent attention *
Cleanliness						
Is everything	in working orde	r?	,	res 🖂	No *	
If *, please gi	ve details:					
ROOM NUMI				••	1_	
Room Profile			om Capa	city:		m Occupancy:
Shared	Facilita	Chanad Dati		Consta	2	Fine Notice
TV	Ensuite	Shared Bath	nroom	Smoke	e Alarm	Fire Notice
$\boxtimes$	$\boxtimes$					$\boxtimes$
	Very Good	Adequate	e Po	or *	Needs	urgent attention *
Cleanliness						
Is everything	in working orde	r?	`	res 🖂	No *	
If *, please gi	ve details:					

DOOM NUMA	DED 224									
ROOM NUMI				Doom	Cana	city.		Poo	m Occupancy:	
Shared				_	Capa	city:		<b>2</b>	m Occupancy:	
TV	Ensuite	!	Shared	<b>2</b> Bathro	om	Smok	e Alar		Fire Notice	
							$\boxtimes$			
	Very	Good	Adeq	ıııate	Po	or *	Ne	eds	urgent attention *	
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TV	Ensuite	!	Shared	Bathro	om	Smok	e Alar	rm	Fire Notice	
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Is everything	everything in working order? Yes No *								
If *, please give details:									
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Is everything	in working order	?		Υ	'es 🛚	No *	:		
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ROOM NUM					•				
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IC AVARVEDING	in working orde	er?			<u>Yes</u>				
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	Very Good	Adeq	uate	Poor	*	Nee	ds ι	rgent attention *	
Cleanliness									
Is everything in working order? Yes No *									
If *, please g	give details:								

# **General Representations**

If you were approached by any <u>residents</u> regarding general issues
while in the centre please outline the details below:
none
If you were approached by any members of staff regarding general
issues while in the centre please outline the details below:
If you were approached by any other persons regarding general
issues while in the centre please outline the details below:

Please ensure that no personal information or information that could lead to the identification of an individual is recorded in this section.

Personal representations should be recorded in Part 3.

#### **Summary Sheet**

Name of Centre:		Glenvera
Address:		Wellington Road, Cork
Contractor:		Bideau
Manager:		Martina Collins
<b>Contact Name:</b>		Martina Collins
<b>Capacity Per MOA</b>	(Current	131 (129)
Occupancy):		
Date of	30/3/21	
Inspection:		

Fire Safety: No issues

#### Food Safety:

Turkey wings in shop freezer not labelled.

Temperatures are not documented for shop fridge and freezer.

#### Bedroom:

219 fan cover needed and shower door off rail

237 bathroom lock not working correctly

235 shower filter missing

5 wall around heater needs painting

224a window not closing properly

228 TV to be fixed to wall

235 hole in bathroom door

Note: all above maintenance issues are captured in maintenance log for follow-up General

It is evident that substantial investment has been put into the premises with new front office and reception area, new staff laundry for linens etc., new windows throughout, extensive painting and replacement of en suite fittings in bedrooms.

In addition there are four new cooking hob station s for residents and a new on-site shop.

Attention: David Tracy,

Contracts and Inspection Unit,

International Protection Procurement Unit.

In reply to inspection carried out in Glenvera by QTS on 30-03-21.

Food Safety:

Turkey Wings labelled on 01-04-21[not stocking at present due to residents asking us to remove from shop]

Temperatures Documented for Fridge and Freezer

Bedrooms:

219: Fan replaced /Shower door fixed

237: Bathroom door lock replaced

235: Filter replaced

5: Wall around heater painted

224A: Part for window ordered from Senator windows

228: T/V fixed to wall 235: Door repaired

Regards, Martina Collins, Manager, Glenvera.