# IPAS/IPPS

# Independent<br/>Inspection Report

Centre:	Atlantic Lodge, Kenmare, Co.Kerry
Inspector:	Fergal Duane
Date of Inspection:	14/07/2022
Time of Arrival & Departure:	9.00-11.30

# Part 1 General Information on Services

# **Independent Inspection Report**

Centre: Atlantic Lodge, Kenmare

*Date of Inspection:* **14/07/2022** 

#### 1. CENTRE DETAILS

1. CENTRE DETAILS		
Name and address of Centre	Atlantic Lodge	
Contractor	Millstreet Equestrian services	
Manager	Vlad Alhimovics	
Who deputises for manager in his/her	Assistant manager	
absence?		
Telephone Number	089 2002271	
Current Contracted Capacity	78 DOWN FROM 90	
Current Occupancy (today)	66	
Current Centre Profile (e.g., singles, families etc.)	Singles and Families	
HSE Area	Kerry – HSE South West	
Public Health Nurse	Caroline Doyle	
DSP / CWO name	Nora Deane	
Environmental Health Officer name	Anne Hussey	
Local Fire Officer Name	Joe Crowley	
Local Fire Station	Kenmare	
,		
Is the Centre certified by any Quality Management System Yes Nox		
(i.e. Q Mark, ISO)?:		
If yes, please give details:		

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

What was the date of the last certification?

Have you a copy of the Certification

	Check List
Official Register	Х
Menu Cycle	n/a
Staffing Lists as follows:	
<b>1.</b> Full list of staff employed at the centre (indicating Names, Titles, Roles, etc.,)	x
2. Indicate who is on duty at time of inspection (today)	x
<b>3.</b> a separate list of Designated Liaison Persons (child protection)	yes

Yes No

#### **3 GENERAL SECURITY & EMERGENCY DETAILS**

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

#### 4 **HEATING ARRANGEMENTS**

What type of heating is used in the centre?	Oil
Do residents have control of the heatingin their own	No
bedroom?	
If no, what arrangements are in place?	On timer and thermostat
What are the heating 'ON' times?	Automatic from themostat

#### 5 HOUSE RULES

Are residents provided with a copy of the House Rules on arrival?	Yes
How does centre management explain house rules to residents on arrival?	Sit down discussion

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

Are residents issued with key for their bedroom?(Yes/No)	Yes
Are residents issued with key for main door?(Yes/No)	NO
If no, give details	Door remains open until 10pm
Are there procedures to allow residents to receive	Yes – visitor log in and can meet in
visitors? (Give details)	lounge
Outline visiting times:	9am-10pm
In what areas are visitors allowed in the centre?	Front lounge

Any other relevant information:	
Is there a facility for storage of residents' valuables*?	In bedrooms & Cabin at back of lodge
(Give details.)(*Storage is at resident's own risk)	
What toiletries are provided to residents on arrival?	Shop system in place – on arrival soap,
	toothpaste, shampoo initially issued
What arrangements are in place to replenish these	Shop system
items?	

#### 7 ARRANGEMENTS FOR MAINTENANCE

Does the centre have a written procedure in place	Yes	
for residents to report maintenance issues? (Yes/No)		
Is there a maintenance day book? (Yes/No)	Yes	
Describe the maintenance procedure at the centre:		
Logged into day book and reviewed by manager		

#### 8 CHILD PROTECTION

Are measures in place to inform staff and visitors of RIA's	yes
Child Protection Policy?	
(Give details)	
Are visitors asked to sign a declaration agreeing to	yes
adhere to the child protection policy?	
Where is declaration held?	
Is there a sign in book for visitors? Where?	yes
Are there notices on public display giving name and	yes
contact details of Designated Liaison Person? Where?	
Have Designated Liaison Persons received HSE training?	Yes
Are notices prominently displayed regarding parental	Yes – at reception notice board
supervision of children? Where?	

#### 9 FOOD SAFETY

Has a HACCP system been implemented? (Yes/No)	n/a – centre provides kitchen for residents to cook their own meals. Shop deliveries from Millstreet on Mondays, Wednesday & Fridays
Have the premises been inspected by an Environmental	no
Health Officer? (Yes/No)	
Date of last visit:	

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

Are residents consulted regarding menu / dietary	n/a - residents buy their own food from
requests? (Give details.)	shop and cook their own meals.
Provide details opposite:	
Which of the following are provided for school	
children's packed lunches:	
<ul> <li>Sandwich? What sandwich fillings are available: Cheese? Ham? Chicken? Tuna? Jam? Other?</li> <li>Drinks? Juice? Water?</li> <li>Yogurt?</li> </ul>	Please also provide details of the system for distribution of school lunches:
• Fruit?	
• Other	
Is infant formula kept out of public view?	In shop
What arrangements are in place for distribution	Purchase in shop
of infant formula?	

# 11 ARRANGEMENTS FOR REFRESHMENTS / MEALS OUTSIDE NORMAL MEAL TIMES

Are tea / coffee / drinking water / Snacks etc.	Yes
available outside mealtimes?	
What food/snacks are available after hours or when	Kitchen open 24/7
kitchen is closed?	
Where are the snacks located and how are they	Residents purchase their own foods in shop
accessed?	
Are meals available for residents who arrive late?	Yes- prepared by management on prior notice
(Give details.)	
Are meals available for new arrivals?	Yes - prepared by management on prior
(Give details)	notice
Are packed lunches available for residents	No - Residents purchase their own foods in shop
travelling to Dublin on official business?	
(Give details)	
If the inspection takes place during Ramadan this	n/a
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?	Yes/No	
Access to drinking water (for breastfeeding mothers	yes	
/ for preparation of infant formula)		
Sterilisers	yes	
Kettles	yes	
Fridge (for bottles of EBM* / formula)*Expressed	yes	
Breast Milk		
Bottle Warmer	yes	
Microwave	yes	
Are these facilities available 24 hours a day	yes	
Is there a dedicated room provided?	ves	

#### 13 INDOOR FACILITIES

Are the following are available to residents?	Yes/No
Computers with Internet access	Yes
WIFI	Yes
DVD player	No
Computer Games	Yes
Snooker Table	No
Pool Table	Yes
Table Tennis Table	Yes
Board Games	Yes
Newspapers	No
Books	Yes
Toys / games for children	Yes
Other	
Give details of any other arrangement or other comments:	Dedicated games rooms with toys.

#### 14 TRANSPORT ARRANGEMENTS

Is there a bus service provided? (Yes/No):	Yes
Where does the service go to?	Killarney
What is the frequency of the service?	Twice a week
(List time table opposite)	

#### 15 TV SYSTEM

Is there a specific TV system in place?	Yes
(give details)	Saorview
An average, how many TV channels are provided to residents?	15
Are residents allowed to erect satellite dishes?	no

#### 16 LAUNDRY FACILITIES (General Arrangements)

Are Laundry facilities available in the centre? (Y/N)	Yes
, , , , , , , , , , , , , , , , , , , ,	
If No, what service is provided?	
Who launders towels and bedlinen?	Residents
(e.g., residents, staff, other, etc)	
What procedures are in place for the exchange of	Arrange with manager
towels and bed linen at the centre?	
What procedures are in place for ironing boards	Freely available in laundry
and irons?	
How is washing powder / tablets supplied?	Shop points system
Are there specific arrangements for access to the	Open 24/7
laundry (give details):	

#### 17 CLEANING (General Arrangements)

Are there cleaning materials and equipment provided by management for residents?	Yes
What cleaning equipment is available to residents?	Detergents, brushes, m ops and vacuum
What is the procedure for residents to access vacuum cleaners, brushes & other cleaning equipment?	Freely available
What arrangements are in place if rooms are not cleaned sufficiently by residents?	Assisted by house-keeping

# PART 2

# Room by Room Inspection

**Independent Inspection** 

Centre: Atlantic Lodge, Kenmare

Date of Inspection: 14/07/22

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

#### 17 Have you seen the following?

		Location of display
Up to date House Rules	у	Reception
Complaint Forms	У	Office
Accident/ Incident procedure	У	Office

HSE Breastfeeding Posters	у	Dining room
(if applicable)		
Designated Liaison Person details		Not displayed
(Child Protection)		
Supervision of children notice		Not displayed
Gym Notices(Child Safety – if applicable)	n/a	
IOM Voluntary Return Posters		Reception

#### 18 Staff Awareness

Did you see the RIA Code of Practice*?	yes
Are all staff aware of RIA Code & House Rules?	yes
How are staff made aware of RIA Code & House Rules? Induction and sign-off	

<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>
13/07/22	Internal	OK
02/02/22	Keltron	OK

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

Date	Inspected By (Company Name / Position)	ОК	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
13/07/22	Internal	у			
02/02/22	Keltron	у			

#### 19c FIRE FIGHTING EQUIPMENT INSPECTION SCHEDULE

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

(melade all the extinguishers, hose reels and the blankers.)					
Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
25/05/22	Internal	у			
14/06/22	Munster Fire	у			

#### 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
12/07/22	Internal	у			
13/07/22	internal	у			

#### 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	2	42	5 mins	
18/12/20	2	27	5 mins	

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

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

Job Description	Course	Instructor	Duration	Date
All staff	Fire Safety	MFS	½ day	7/12/20

#### 19g FIRE ASSEMBLY POINTS

Where are the Fire Assembly Points located?	Front car park
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 central	yes
control panel?	
Are there designated 'Smoking' areas?	Outside only
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?	doors wedged open in main hall and on
	stairwell due to cv-19 requirements , these
	are closed at night
Are fire evacuation instructions clearly	yes
displayed in the centre?	
Are fire extinguishers clearly visible?	yes
Is there emergency lighting system in place?	yes
Comments:	

# **Administration Area:**

Reception: inside fron door

Is the area generally clean?	Yes
If no please give details:	
Visual Check: Have you noticed any issues requiring (e.g., fire exit signs, hazards, lighting, notices, décor, etc.) If yes please detail:	•

#### Have you seen the following?

		Location of display
Up to date House Rules	yes	Reception
Complaint Forms	yes	Office
Accident/ Incident procedure	yes	Office

HSE Breastfeeding Posters (if applicable)	yes	Dining room
Designated Liaison Person details (Child Protection)	no	
Supervision of children notice	no	
Gym Notices (Child Safety – if applicable)	N/a	

IOM Voluntary Return Posters	yes	Reception
Anti Human-Trafficking Posters	yes	Reception
'NO to Violence & Harassment' Posters	yes	reception

#### Social Room / Tea Station (State Location): dining room off reception

What facilities are provided? Kettles, toasters, microwave		
Is the area generally clean?	Yes	
If no please give details:		
Visual Check: Have you noticed any issues requiring attention? No		
If yes please detail:		

#### **Pre-school Room:**

Is thearea generally clean? Yes
If no please give details:
Visual Check: Have you noticed any issues requiring attention? Yes – Cracked TV in the
childrens play room need to be removed and placed in skip.
(observe whether the area is colourful, has sufficient toys, changing areas, toilets in working order, etc)
Other comments:

#### **DINING AREA:**

Please outline the meal times: N/A -cookers and ovens are provide for residents to cook their own meals using food purchased in shop which is operated on points system.

	From To		То			
Breakfast	n/a					
Lunch						
Dinner						
	ı			•		
Which is the main meal	of the	day:	Lunch		Dinner	
Is menu cycle available?		•	Yes		No	
			•			
If no, give details of al	l meni	u options on da	ay of ins	spection	n:	
Breakfast		•	<u> </u>			
Lunch						
Dinner						
	•					
Is menu cycle on display	?				n/a	
Does menu cycle corres	pond v	with options ava	ilable?			
If no, ask manager for ex	kplana	tion and provide	e details:	:		
		•				
Which meal was sample	d?	Breakf	ast		Lunch	Dinner 🗌
Please describe the mea	l in de	tail (e.g. was it h	not / cold	d, bland	/ spicy etc.)	<u> </u>
Was there a vegetarian	•		r	n/a		
(note salad and vegetab						
considered as vegetaria		on)				
Give details of this option						
Were there ethnic dishe		lable?				
Give details of this optio						
Was fresh foods availab						
(as per HSE Infant Feeding Guidelines)						
In your opinion, does the food on offer appear to						
provide a good variety?  Did inspection take place during Pamadan?						
Did inspection take place during Ramadan?  If yes, please outline arrangements for provision of meals outside of normal mealtimes,						
(medical or other appointments, etc.):						
(medical of other appointments, etc.).						
Is there any damaged seating or tables in dining room?			No			
Is there enough seating for residents present to sit down and			Yes			
eat their lunch?						
Comments:						

## KITCHEN AREA:Food Safety Critical Requirements

#### **FOOD SAFETY**

Has the premises been inspected by an	
Environmental Health Officer?	
Date of Visit?	no
Comments:	

Has a HACCP system been implemented?	N/A -cookers and ovens are provide for residents to cook their own meals using food purchased in shop which is operated on points system.
Who designed the HACCP system?	
Who is responsible for reviewing the system?	
How frequently is the system reviewed?	

# **Food Hall - Shop**online ordering system operated from Millstreet with multiple deliveries each week.

#### **HACCP Records:**

Pest Control: Prevent A Pest 7/7/2022 – no activity noted
Induction and Ongoing Staff Training: n/a
Time & Temperature Records: Fridge and freezer records in shop maintained
Hygiene Audits:
n/a
List of Approved Suppliers: yes
Cleaning Schedules: yes
Procedures for accepting deliveries: yes
General Comments:

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

#### **General:**

Is the kitchen commercial or domestic?	domestic		
What equipment is in place? 6 domestic cooker/ovens			
In what condition is the equipment? All equipment in good 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	Kitchen open for residents		
relation to access to kitchen for non			
kitchen staff?			
Are white coats, shoe covers and hats	n/a		
available for non kitchen staff?			
Comment of the structural hygiene of the kitchen (i.e			
floors/walls/ceilings/doors/windows/work surfaces/ventilation, etc)			
Are suitable hand washing and drying	Yes		
facilities provided?			
General Comments:	6 domestic cooker/ovens		

#### **Dry Goods:**

Suitably equipped? Shelving/containers	Dry goods store in shop
etc	
Condition and suitability of facilities:	
What evidence is there of stock rotation?	Yes – deliveries a number of times a
	week

**Refrigerated Storage:** 

What type of refrigerated storage is provided?	Retail display fridge and freezers in shop
Comment on the condition and suitability of Very clean	of the refrigerated storage:
Are thermostats provided and in working order?	yes
Are food items date stamped?	yes
Are samples of dishes being kept?	n/a

#### Other:

Is there appropriate storage for cleaning	yes
agents and chemicals?	

#### **OPERERATIONAL HYGIENE**

Do residents use the main kitchen?	yes
Is that use supervised to ensure safe &	Kitchen is purpose built for residents
hygienic practices are observed?	own use
By whom is it supervised?	n/a

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

Is the necessary holding equipment provided? *e.g.bainmaries, refridgerated units.* n/a

Condition and suitability of serving equipment and utensils:
good

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

Comments:			

#### **STAFF FACILITIES AND HYGIENE**

Are designated staff facilities provided?	Yes
What facilities are in place?	Toilets and changing room

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? Indicate	no
cleanliness & suitability	

Is a designated area provided for staff	Use main dining room or staff office
breaks? If yes, is it clean/suitable/well	
maintained.	
If no, outline arrangements for breaks	

Are uniforms provided for:	
Kitchen Staff?	n/a
Serving Staff?	n/a

Are uniforms clean and in good	n/a
condition? (to include	
caps/hairnets/closed heel/toe shoes etc)	
Is personal grooming satisfactory?	
Are safe habits practiced?	
General Comments on staff facilities:	

**PUBLIC TOILET (State Location):** 

	Number	Soap	Toilet	Hand Towels /	Hot	Sanitary Bins
			Paper	Dryers	Water	
Unisex:						
Ladies:	1	у	У	У	у	У
Gents:	1	у	у	У	у	
Is there a cleaning schedule displayed?no						
Record the last time entry.						
Is the area clean? (provide comment) yes – very clean						
Are all facilities working? Yes						
Visual Check: Have you noticed any issues requiring attention? No						
If No, give details:						

#### 24 COMMUNAL ROOM (State Location): main lobby off reception Storage area: Is the walkway through the area clear? Yes Are the exit signs clearly marked? Yes **General Seating Area** Is the seating in good condition? Yes Yes - lounging What is the area generally used for? **Computer room:** Is the area generally clean? Yes Visual Check: Have you noticed any issues requiring attention? NO If yes please detail: Any other comments? If yes please detail:

#### **OUTDOOR GROUNDS / FACILITIES**

Please rate the following:

	Very Good	Adequate	Poor*	Needs urgent attention*
Condition of exterior of centre	Х			
Paintwork of the centre	Х			
Maintenance standard of the grounds (e.g. grass cut, walkways clear etc.)	х			
Cleanliness of the grounds (ie., evidence of rubbish etc.)	Х			
Where you have rated * plea	ise provide deta	ails and comm	ents:	

Are there any facilities available for children outdoors?	Large green play are
Comments	

#### **LAUNDRY ROOM**

	Washing Machines Dryers				
Number 8 8					
Do they appear to be in worki	ng order? <b>yes</b>				
Comments:					

CORRIDOR (State Location): all corridors

Is the area generally clean?	Yes					
If no please give details:						
Visual Check: Have you noticed any issues requiring attention? Yes						
If yes please detail: Carpet to be	relayed outside Room 201					

STAIRWAY (State Location): Main stairwell

STAINTAL (State Escation).	wan stan wen				
Is the area generally clean?	Yes				
If no please give details:					
Visual Check: Have you noticed any issues requiring attention? Yes					
(e.g., fire exit signs, hazards, lighting, not	ices, aecor, etc.)				
If yes please detail:					

# **Bedrooms:**

**CLEANING (General Arrangements)** 

CLEANING (	<u>uei</u>	ierai Arrang	eme	:11 <b>.</b> 5]								
How often are	e be	drooms inspe	ected	<del>]</del> ?		weekly						
Who cleans th	ne b	edrooms?				residents						
How often do	sta	ff clean the b	edro	oms?		As needed if residents need assisstance						
Are there cleaning materials and equipment				ent								
provided by management for residents?						Yes						
What cleaning	g ec	uipment is av	/ailak	ole to		Brushe	es, vacuu	ıms,	mops	etc.		
residents?		•					,	,	•			
What arrange	me	nts are in plac	ce if r	rooms	are	Assiste	ed by ho	usek	epin	g staff		
not cleaned si		•					•		•	Ü		
		, , ,										
ROOM NUME	RFR'	102										
Room Profile:					Roon	n Capac	ritv:		Roo	m Occi	upancy:	
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TV		Ensuite	SI	hared	Bathro	om	Smok	دا۸ م	-		ire Notice	
1 V		Liisuite	31	ilaieu	Datilit	50111	JIIIOK	C Ala	1111	<b>'</b>	iie Notice	
Х		Х						Х	Х			
	<u> </u>	Very Good		Adeq	uate	Po	Poor * N			urgeni	t attention *	:
Cleanliness		X		/ tacq		1 .			ccus	ui gein		
Is everything i	in w		 }			Ye	es X I	No *				
If *, please giv				throo	m			•••	<u> </u>			
ii , picase giv	/C u	Ctans.modia	50		····							
ROOM NUME	BER:	103										
Room Profile:	Fan	nily			Roon	oom Capacity:				Room Occupancy:		
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TV		Ensuite	SI	hared	Bathro	oom	Smok	e Ala	Alarm Fire Notice			
								· · ·				
Х		Х						Х			Х	
		Very Good		Adeq	luate	Pc	or *	N	eeds	urgent	t attention *	:
Cleanliness		X										
Is everything i	in w	orking order	?			Υe	es X	No *				
If *, please giv	∕e d	etails:										
, , , , , , ,												
ROOM NUME	BER	104										
Room Profile:	Fan	nily			Roon	n Capad	city:		Roo	m Occ	upancy:	
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TV		Ensuite	SI	hared	Bathro	oom	Smok	e Ala	rm	F	ire Notice	
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Х		Х			Ш			Х	X			
		Very Good		Adeq	uate	Po	or *	N	leeds urgent attention *			
Cleanliness		Y					- 1	1				

	n working order?	1		Ye	s X	No *			
If *, please giv	e details:								
ROOM NUMB	ER106								
Room Profile:			Room	Capac	ity:		Roo	m Occupancy:	
Family			5				5		
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice	
х	х					Х		x	
^		Adag		Do	or *		o o d o		
Cleanliness	Very Good	Adeq	uate T	РО	or ·	IN	eeas	urgent attention *	
	X n working order?	<u>L</u>		l L No		1			
				INC	,				
ii ', piease giv	e details: <b>showe</b> i	r noider bi	oken						
ROOM NUMB	ER107		Γ_			Т			
Room Profile:			_	Capac	ity:			m Occupancy:	
Family	F:	Clarana	A Dathur		Connell		0	Fine Notice	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice	
Х	Х	П х				Х		х	
<u>.</u>	Very Good	Adeq	uate	Ро	or *	Needs		urgent attention *	
Cleanliness	Х								
Is everything i	n working order?	)		Ye	s <b>X</b>	No *			
If *, please giv	e details:								
ROOM NUMB	ER108								
Room Profile:			Room	Capac	ity:		Roo	m Occupancy:	
Family			4	•		0		особраној.	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice	
х	Х					Х		х	
I.	Very Good	Adeq	uate	Ро	or *	N	eeds	urgent attention *	
Cleanliness	Х								
Is everything i	n working order?	1		Ye	s X	No *			
If *, please giv									
ROOM NUMB	FR109								
Room Profile:	LINIUJ		Room	Capac	·itv·		Roo	m Occupancy:	
Family			4	. Сарас			2	5 55 6 5 6 1 6 7 1	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice	
Х	Х					Х		x	
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *	
Cleanliness	X		1	<u> </u>		<u> </u>			
Is everything i	n working order?	<u> </u>		Ye	s <b>X</b>	No *	П		

If *, please giv	ve details:							
ROOM NUM	3ER200							
Room Profile:			Room	Capac	city:		Roo	m Occupancy:
Family			4		Ī		2	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice
X	X					X		X
Cleanliness	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *
Is everything in working order?  Yes X No *								
If *, please give	ve details:							
ROOM NUM	3ER201							
Room Profile:			Room	Capac	city:		Roo	m Occupancy:
Family			4				1	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice
Х	Х		Note			Х		х
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *
Cleanliness	х							
Is everything in working order? Yes X No *								
If *, please give details: Ceiling in bathroom needs attention.								
ROOM NUMI	BER202							
ROOM NUME			Room	. Сарас	citv:		Roo	m Occupancy:
Room Profile:			Room	ı Capad	city:		Roo 2	m Occupancy:
		Shared	4	·	city: Smok	e Ala	2	m Occupancy: Fire Notice
Room Profile: Family		Shared	4	·	•	e Ala	2	
Room Profile: Family TV	Ensuite		<b>4</b> Bathro	om	•	Х	<b>2</b> rm	Fire Notice
Room Profile: Family TV	Ensuite X		<b>4</b> Bathro	om	Smok	Х	<b>2</b> rm	Fire Notice
Room Profile: Family TV X Cleanliness	Ensuite  X  Very Good	Adeq	<b>4</b> Bathro	om Po	Smok	Х	<b>2</b> rm	Fire Notice
Room Profile: Family TV X Cleanliness Is everything	Ensuite  X  Very Good  X	Adeq	Bathro uate	om Po	Smok	X	<b>2</b> rm	Fire Notice
Room Profile: Family TV X Cleanliness Is everything	Ensuite  X  Very Good  X  in working order	Adeq	Bathro uate	om Po	Smok	X	<b>2</b> rm	Fire Notice
Room Profile: Family TV X Cleanliness Is everything	Ensuite  X  Very Good  X  in working order  ve details:bathroo	Adeq	Bathro uate	om Po	Smok	X	<b>2</b> rm	Fire Notice
Room Profile: Family TV  X  Cleanliness Is everything If *, please given	Ensuite  X  Very Good  X  in working order  ve details: bathroo	Adeq	4 Bathro uate refurbi	om Po	Smok	X	rm eeds	Fire Notice
Room Profile: Family TV X Cleanliness Is everything If *, please given	Ensuite  X  Very Good  X  in working order  ve details: bathroo	Adeq	4 Bathro uate refurbi	om Pc [ Yeshmen	Smok	X	rm eeds	Fire Notice  X  urgent attention *
Room Profile: Family TV X Cleanliness Is everything If *, please given ROOM NUMI Room Profile:	Ensuite  X  Very Good  X  in working order  ve details: bathroo	Adeq	4 Bathro uate refurbi Room 4	om Pc Ye shmen	Smok	X No *	eeds Roo 2	Fire Notice  X  urgent attention *
Room Profile: Family TV  X Cleanliness Is everything If *, please given ROOM NUMB Room Profile: Family	Ensuite  X  Very Good  X  in working order  ve details:bathroo	Adeq	4 Bathro uate refurbi Room 4	om Pc Ye shmen	Smok	X No *	eeds Roo 2	Fire Notice  X  urgent attention *   m Occupancy:
Room Profile: Family TV X Cleanliness Is everything If *, please given ROOM NUMI Room Profile: Family TV	Ensuite  X  Very Good  X  in working order  ve details:bathrood  BER203  Ensuite	Adeq	4 Bathro uate refurbi Room 4 Bathro	om Pc Ye shmen	Smok	X No *	eeds Roo 2 rm	Fire Notice  X  urgent attention *   M Occupancy:  Fire Notice
Room Profile: Family TV X Cleanliness Is everything If *, please given ROOM NUMI Room Profile: Family TV	Ensuite  X  Very Good  X  in working order  ve details:bathroo  BER203  Ensuite  X	Adeq	4 Bathro uate refurbi Room 4 Bathro	om Pc Ye shmen	Smok	X No *	eeds Roo 2 rm	Fire Notice  X  urgent attention *  m Occupancy:  Fire Notice  X

If *, please giv	ve details									
ROOM NUME	BER204									
Room Profile:	Family		Room	Сарас	city:		Roo	Room Occupancy:		
	Γ	Г	4		ı		3			
TV	Ensuite	Shared	Bathro	athroom Smoke			rm	Fi	ire Notice	
Х	X					X			Х	
	Very Good	l Adeq	uate	Pc	or *	N	eeds	urgent	attention *	
Cleanliness	Х									
	in working order	?		ye	es .					
If *, please give	ve details:									
ROOM NUME			T							
Room Profile:				Capac	city:			m Occu	ipancy:	
Family	Francita	Chanad	A Dathus		Smok	- Ala	2	Г:	ino Nation	
TV	Ensuite	Shared	Васпго	om	Smok		rm	FI	ire Notice	
Х	X					Х		X		
	Very Good	l Adeq	uate	Pc	or *	N	eeds	urgent	attention *	
Cleanliness	Х									
Is everything in working order?  Yes X  No *										
If *, please give details:										
ROOM NUME	3ER206									
Room Profile:			Room	Сарас	city:		Roo	m Occı	ıpancy:	
Family	T		4		1		2			
TV	Ensuite	Shared	Bathro	om	Smok	e Alaı	rm	Fi	ire Notice	
Х	X		Note			X			χ	
	Very Good	Adeq	luate	Pc	or *	N	eeds	urgent	attention *	
Cleanliness	х									
	in working order					Vo *				
	ve details: <mark>Showe</mark>	_		<mark>plate t</mark>	o be ren	noved	d. Ma	nager s	<mark>spoke with</mark>	
<mark>resident durir</mark>	ng visit regarding	cooking in	room.							
DOOM NUMBER	250207									
ROOM NUME Room Profile:			Poor	Сарас	rity:		Pool	m Occi	ipancy:	
Family			4	Сарас	Jity.		2	iii Occc	iparicy.	
TV	Ensuite	Shared		om	Smok	e Alaı		Fi	ire Notice	
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	Very Good	l Adeq	— IIIate	Do	or *	NI.	ppdc	urgent	attention *	
Cleanliness	X	- Aueu		FC		111	ceus	urgent		
		1 1	1	i l						

Is everything i	in working order?	?		no	)					
If *, please giv	e details: <b>remov</b>	e hot place	е							
ROOM NUME			•				ı			
Room Profile:			Room	Capac	city:		Roo	m Occu	pancy:	
Family	amily 4 0									
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	ırm	n Fire Notice		
X	Х			1		X			Х	
	Very Good	Adeq	uate	Po	or *	N	leeds	urgent	attention	*
Cleanliness	Х									
Is everything i	in working order?	?		Υe	es <b>X</b> l	No *				
If *, please giv	ve details:									
ROOM NUME	PED200									
Room Profile:			Poor	n Capad	~itv:		Poo	m Occu	nancvi	
Family			4	Сарас	Jity.		0	III Occu	paricy.	
TV	Ensuite	Shared		om	Smok	e Ala	_	Fi	re Notice	
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	Very Good	Adeq	uate	Pc	or *	N	leeds	urgent	attention	*
Cleanliness	X									
Is everything in working order?  Yes X No *										
If *, please give details:										
ROOM NUME	BER210									
Room Profile:			Room	Capac	city:		Roo	m Occu	pancy:	
Family			4	•	•		3		, ,	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	irm	Fi	re Notice	
Х	Х					X			Х	
	Very Good	Adeq	uate	Pc	or *	N	leeds	urgent	attention	*
Cleanliness	X									
Is everything i	in working order?	?		Υe	es X l	No *				
If *, please giv	ve details: <mark>remov</mark>	e hot plate	2							
2001411111										
ROOM NUME					. • •					
Room Profile:				Capac	city:			m Occu	pancy:	
<b>Family</b> TV	Ensuite	Shared	Rathro	om	Smok	e Δla	2 rm	Fi	re Notice	
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Х	X			1		Х			Х	
	Very Good	Adeq	uate	Pc	or *	N	leeds	urgent	attention	*
Cleanliness	х									
Is everything i	in working order?	?		ye	es					_
If *, please giv	ve details:									

ROOM NUME	BER212									
Room Profile:			Room	n Capad	city:		Room Occupancy:			
Family			4				1			
TV	Ensuite	Shared	Bathroom		Smok	Smoke Ala		Fi	Fire Notice	
Х	Х				Х				X	
	Very Good	Adeq	luate	Po	or *	Ν	leeds	urgent	attention *	
Cleanliness	Х									
Is everything	in working order?	?		Ye	es <b>X</b> l	No *				
If *, please giv	ve details:									
DOOM NUMBER	NED 242									
ROOM NUME			Daam	. Cana	.:4		Daa	0		
Room Profile:			_	n Capac	city:		_	m Occu	pancy:	
<b>Family</b> TV	Ensuite	Shared	Pathro		Smok	o Ala	1		re Notice	
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X	Х					X			X	
	Very Good	Adeq	luate	Po	or *	N	leeds	urgent	attention *	
Cleanliness	X									
Is everything	everything in working order? Yes X No *									
If *, please give details:										
ROOM NUME							1			
Room Profile:				n Capac	city:			m Occu	pancy:	
Family			4				4			
TV	Ensuite	Shared	Bathro	om	Smoke Ala		Alarm		re Notice	
Х	Х					Х			Х	
	Very Good	Adeq	<u>uate</u>	Po	or *	Ν	leeds	urgent	attention *	
Cleanliness	Х									
Is everything	in working order?	?		Ye	es <b>X</b> 1	No *				
If *, please given	ve details:									
ROOM NUME							_			
Room Profile:				n Capac	city:			m Occu	pancy:	
Family	Enquito	Charad	A Dathra		Cmak	o A la	3	Г:	ro Notico	
TV	Ensuite	Shared	васпго	orn	Smok	e Ala	ırm	FII	re Notice	
Х	Х					Х			Х	
	Very Good	Adeq	uate	Po	or *	١	leeds	urgent	attention *	
Cleanliness	X									
	in working order	?		Ye	es <b>X</b>	No *				
If *, please give	ve details:									

ROOM NUME	ROOM NUMBER216									
Room Profile:			Room	Сарас	ity:		Roo	Room Occupancy:		
Family			4				3			
TV	Ensuite	Shared	Bathro	om	om Smoke Ala			Fire Notice		
Х	Х					Х		Х		
	Very Good	Adeq	uate	Po	or *	Ν	eeds	urgent attention *		
Cleanliness	Х									
Is everything in working order?  Yes X No *										
If *, please give details:										
Use this space for any comments or other information not covered in this form:										

# **General Representations**

If you were approached by any <u>residents</u> regarding general issues while in the centre please outline the details below:
in the centre please outline the details below.
If you were approached by any members of staff regarding general
issues while in the centre please outline the details below:
16
If you were approached by any <u>other persons</u> 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:		Atlantic Lodge				
Address:		Kenmare, Co. Kerry				
Proprietor:		Millstreet Equestrian services				
Manager:		Vlad Alhimovics				
Contact Name:		Thomas Duggan				
<b>Capacity Per MOA</b>	(Current	78 (66)				
Occupancy):						
Date of	14/07/2022					
Inspection:						

Fire Safety:

No Fire Drill Completed since 2020

Food Safety: No Issues

Bedrooms:

201 – Ceiling in bathroom needs attention 206 Shower leaking & hot plate to be removed 207 Remove hot plate 210 Remove Hot Plate

Play Room Requires painting.

Outside Room 201 replace carpet that has been removed.

Other issues: Purchase new First Aid Box.

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# Atlantic Lodge, Kenmare Inspection Report. 14.07.22

## **Bedrooms:**

102: Mould in bathroom	Done
106: Shower holder broken	Done
201: Ceiling in bathroom needs attention .	Done
202: Bathroom needs refurbishment.	Done
207: Remove hot plate.	Done
210: Remove hot plate.	Done
201: Replace carpet that has been removed.	Done
Other issues: Purchase new Frist aid box.	Done

# IPAS/IPPS

# Independent<br/>Inspection Report

Centre:	Atlantic Lodge, Kenmare, Co.Kerry
Inspector:	Fergal Duane
Date of Inspection:	6/10/2022
Time of Arrival & Departure:	9.00-11.30

# Part 1 General Information on Services

# **Independent Inspection Report**

Centre: Atlantic Lodge, Kenmare

Date of Inspection: 6/10/2022

#### 1. CENTRE DETAILS

1. CENTRE DETAILS		
Name and address of Centre	Atlantic Lodge	
Contractor	Millstreet Equestrian services	
Manager	Vlad Alhimovics	
Who deputises for manager in his/her absence?	Assistant manager	
Telephone Number	089 2002271	
Current Contracted Capacity	78 DOWN FROM 90 due to Covid	
Current Occupancy (today)	67	
Current Centre Profile (e.g., singles, families etc.)	Singles and Families	
HSE Area	Kerry – HSE South West	
Public Health Nurse	Caroline Doyle	
DSP / CWO name	Nora Deane	
Environmental Health Officer name	Anne Hussey	
Local Fire Officer Name	Joe Crowley	
Local Fire Station	Kenmare	
Is the Centre certified by any Quality Manager	ment System Yes Nox	
(i.e. Q Mark, ISO)?:		
If yes, please give details:		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

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

What was the date of the last certification?

Have you a copy of the Certification

	Check List
Official Register	Х
Menu Cycle	n/a
Staffing Lists as follows:	
<b>1.</b> Full list of staff employed at the centre (indicating Names, Titles, Roles, etc.,)	x
2. Indicate who is on duty at time of inspection (today)	x
<b>3.</b> a separate list of Designated Liaison Persons (child protection)	yes

Yes No

#### **3 GENERAL SECURITY & EMERGENCY DETAILS**

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

#### 4 HEATING ARRANGEMENTS

What type of heating is used in the centre?	Gas
Do residents have control of the heatingin their own bedroom?	No
If no, what arrangements are in place?	On timer and thermostat
What are the heating 'ON' times?	Automatic from themostat

#### 5 HOUSE RULES

Are residents provided with a copy of the House Rules on arrival?	Yes
How does centre management explain house rules to residents on arrival?	Sit down discussion

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

Are residents issued with key for their bedroom?(Yes/No)	Yes
Are residents issued with key for main door?(Yes/No)	NO
If no, give details	Door remains open until 10pm
Are there procedures to allow residents to receive	Yes – visitor log in and can meet in
visitors? (Give details)	lounge
Outline visiting times:	9am-10pm
In what areas are visitors allowed in the centre?	Front lounge, Meeting room at back.

Any other relevant information:	
Is there a facility for storage of residents' valuables*?	In bedrooms & Cabin at back of lodge
(Give details.)(*Storage is at resident's own risk)	
What toiletries are provided to residents on arrival?	Shop system in place – on arrival soap,
	toothpaste, shampoo initially issued
What arrangements are in place to replenish these	Shop system
items?	

#### 7 ARRANGEMENTS FOR MAINTENANCE

Does the centre have a written procedure in place	Yes
for residents to report maintenance issues? (Yes/No)	
Is there a maintenance day book? (Yes/No)	Yes
Describe the maintenance procedure at the centre:	
Logged into day book and reviewed by manager	

#### 8 CHILD PROTECTION

Are measures in place to inform staff and visitors of RIA's	yes
Child Protection Policy?	
(Give details)	
Are visitors asked to sign a declaration agreeing to	yes
adhere to the child protection policy?	
Where is declaration held?	
Is there a sign in book for visitors? Where?	yes
Are there notices on public display giving name and	yes
contact details of Designated Liaison Person? Where?	
Have Designated Liaison Persons received HSE training?	Yes – but needs to be uodated
Are notices prominently displayed regarding parental	Yes – at reception notice board
supervision of children? Where?	

#### 9 FOOD SAFETY

Has a HACCP system been implemented? (Yes/No)	n/a – centre provides kitchen for residents to cook their own meals. Shop deliveries from Millstreet on Mondays, Wednesday & Fridays
Have the premises been inspected by an Environmental	no
Health Officer? (Yes/No)	
Date of last visit:	

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

	<u></u> .
Are residents consulted regarding menu / dietary	n/a - residents buy their own food from
requests? (Give details.)	shop and cook their own meals.
Provide details opposite:	
Which of the following are provided for school	
children's packed lunches:	
<ul> <li>Sandwich? What sandwich fillings are available: Cheese? Ham? Chicken? Tuna? Jam? Other?</li> <li>Drinks? Juice? Water?</li> <li>Yogurt?</li> </ul>	Please also provide details of the system for distribution of school lunches:
• Fruit?	
Other	
Is infant formula kept out of public view?	In shop
What arrangements are in place for distribution	Purchase in shop
of infant formula?	

# 11 ARRANGEMENTS FOR REFRESHMENTS / MEALS OUTSIDE NORMAL MEAL TIMES

Are tea / coffee / drinking water / Snacks etc.	Yes
available outside mealtimes?	
What food/snacks are available after hours or when	Kitchen open 24/7
kitchen is closed?	
Where are the snacks located and how are they	Residents purchase their own foods in shop
accessed?	
Are meals available for residents who arrive late?	Yes- prepared by management on prior notice
(Give details.)	
Are meals available for new arrivals?	Yes - prepared by management on prior
(Give details)	notice
Are packed lunches available for residents	No - Residents purchase their own foods in shop
travelling to Dublin on official business?	
(Give details)	
If the inspection takes place during Ramadan this	n/a
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?	Yes/No
Access to drinking water (for breastfeeding mothers	yes
/ for preparation of infant formula)	
Sterilisers	yes
Kettles	yes
Fridge (for bottles of EBM* / formula)*Expressed	yes
Breast Milk	
Bottle Warmer	yes
Microwave	yes
Are these facilities available 24 hours a day	yes
Is there a dedicated room provided?	ves

### 13 INDOOR FACILITIES

Are the following are available to residents?	Yes/No
Computers with Internet access	Yes
WIFI	Yes
DVD player	No
Computer Games	Yes
Snooker Table	No
Pool Table	Yes
Table Tennis Table	Yes
Board Games	Yes
Newspapers	No
Books	Yes
Toys / games for children	Yes
Other	
Give details of any other arrangement or other comments:	Dedicated games rooms with toys.

### 14 TRANSPORT ARRANGEMENTS

Is there a bus service provided? (Yes/No):	Yes
Where does the service go to?	Killarney
What is the frequency of the service?	Twice a week
(List time table opposite)	

### 15 TV SYSTEM

Is there a specific TV system in place?	Yes
(give details)	Saorview
An average, how many TV channels are provided to residents?	15
Are residents allowed to erect satellite dishes?	no

### 16 LAUNDRY FACILITIES (General Arrangements)

Are Laundry facilities available in the centre? (Y/N)	Yes
If No, what service is provided?	
Who launders towels and bedlinen? (e.g., residents, staff, other, etc)	Residents
What procedures are in place for the exchange of towels and bed linen at the centre?	Arrange with manager
What procedures are in place for ironing boards and irons?	Freely available in laundry
How is washing powder / tablets supplied?	Shop points system
Are there specific arrangements for access to the laundry (give details):	Open 24/7

### 17 CLEANING (General Arrangements)

Are there cleaning materials and equipment provided by management for residents?	Yes
What cleaning equipment is available to residents?	Detergents, brushes, m ops and vacuum
What is the procedure for residents to access vacuum cleaners, brushes & other cleaning equipment?	Freely available
What arrangements are in place if rooms are not cleaned sufficiently by residents?	Assisted by house-keeping

## PART 2

# Room by Room Inspection

**Independent Inspection** 

Centre: Atlantic Lodge, Kenmare

Date of Inspection: 6/10/22

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

### 17 Have you seen the following?

		Location of display
Up to date House Rules	у	Reception
Complaint Forms	У	Office
Accident/ Incident procedure	У	Office

HSE Breastfeeding Posters	у	Dining room
(if applicable)		
Designated Liaison Person details		Displayed
(Child Protection)		
Supervision of children notice		Displayed
Gym Notices(Child Safety – if applicable)	Υ	On door into Gym
IOM Voluntary Return Posters		Reception

### 18 Staff Awareness

Did you see the RIA Code of Practice*?	yes
Are all staff aware of RIA Code & House Rules?	yes
How are staff made aware of RIA Code & House Rules? Induction and	d sign-off

<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>
04/10/22	Internal	OK
02/02/22	Keltron	OK

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

Date	Inspected By (Company Name / Position)	ОК	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
04/10/22	Internal	у			
02/02/22	Keltron	у			

#### 19c FIRE FIGHTING EQUIPMENT INSPECTION SCHEDULE

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

(melade all me extinguishers, hose reels and me blankets.)					
Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
21/08/22	Internal	у			
14/06/22	Munster Fire	у			

### 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
03/10/22	Internal	у			
04/10/22	internal	у			

### 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	2	42	5 mins	
18/12/20	2	27	5 mins	

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

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

Job Description	Course	Instructor	Duration	Date
All staff	Fire Safety	MFS	½ day	7/12/20

### 19g FIRE ASSEMBLY POINTS

Where are the Fire Assembly Points located?	Front car park
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 central	yes
control panel?	
Are there designated 'Smoking' areas?	Outside only
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?	doors wedged open in main hall and on
	stairwell during the day , these are closed at
	night
Are fire evacuation instructions clearly	yes
displayed in the centre?	
Are fire extinguishers clearly visible?	yes
Is there emergency lighting system in place?	yes
Comments:	

# **Administration Area:**

Reception: inside fron door

Is the area generally clean?	Yes
If no please give details:	
Visual Check: Have you noticed any issues requiring (e.g., fire exit signs, hazards, lighting, notices, décor, etc.) If yes please detail:	•

### Have you seen the following?

		Location of display
Up to date House Rules	yes	Reception
Complaint Forms	yes	Office
Accident/ Incident procedure	yes	Office

HSE Breastfeeding Posters (if applicable)	yes	Dining room
Designated Liaison Person details (Child Protection)	Yes	
Supervision of children notice	Yes	
Gym Notices (Child Safety – if applicable)	N/a	

IOM Voluntary Return Posters	yes	Reception
Anti Human-Trafficking Posters	yes	Reception
'NO to Violence & Harassment' Posters	yes	reception

### Social Room / Tea Station (State Location): dining room off reception

What facilities are provided? Kettles, toasters,	microwave	
Is the area generally clean?	Yes	
If no please give details:		
Visual Check: Have you noticed any issues requiring attention? No		
If yes please detail:		

### Pre-school Room: No – Changed to Room

Is thearea generally clean? N/A
If no please give details:
Visual Check: Have you noticed any issues requiring attention?
(observe whether the area is colourful, has sufficient toys, changing areas, toilets in working order, etc)
Other comments:

### **DINING AREA:**

Please outline the meal times: N/A -cookers and ovens are provide for residents to cook their own meals using food purchased in shop which is operated on points system.

	From	า		То	
Breakfast	n/a				
Lunch					
Dinner					
Which is the main meal	of the	day:	Lunch		Dinner
Is menu cycle available?			Yes		No 🗌
If no, give details of all	l men	u options on da	ay of in	spection	on:
Breakfast					
Lunch					
Dinner					
Is menu cycle on display	?				n/a
Does menu cycle corres	ond v	with options ava	ilable?		
If no, ask manager for ex	kplana	tion and provide	e details	5:	
Which meal was sample	d?	Breakf	ast		Lunch Dinner
Please describe the mea	l in de	etail (e.g. was it h	not / co	ld, blan	d / spicy etc.)
Was there a vegetarian	•			n/a	
(note salad and vegetab					
considered as vegetarias Give details of this option		(ווט			
Were there ethnic dishe		lahla?			
Give details of this optio		idbic:			
Was fresh foods available		Infants?			
(as per HSE Infant Feeding Guidelines)					
In your opinion, does the food on offer appear to			r to		
provide a good variety?					
Did inspection take place during Ramadan?					
If yes, please outline arrangements for provision of meals outside of normal mealtimes,					
(medical or other appointn	nents, i	etc.):			
Is there any damaged seating or tables in dining room?			No		
Is there enough seating for residents present to sit dow			wn and	d Yes	
eat their lunch?					
Comments:					

### KITCHEN AREA:Food Safety Critical Requirements

### **FOOD SAFETY**

Has the premises been inspected by an Environmental Health Officer?	
Date of Visit?	no
Comments:	

Has a HACCP system been implemented?	N/A -cookers and ovens are provide for residents to cook their own meals using food purchased in shop which is operated on points system.
Who designed the HACCP system?	
Who is responsible for reviewing the system?	
How frequently is the system reviewed?	

# **Food Hall - Shop**online ordering system operated from Millstreet with multiple deliveries each week.

### **HACCP Records:**

Pest Control: Prevent A Pest 7/7/2022 – no activity noted
Induction and Ongoing Staff Training: n/a
Time & Temperature Records: Fridge and freezer maintained
Hygiene Audits:
n/a
List of Approved Suppliers: yes
Cleaning Schedules: yes
Procedures for accepting deliveries: yes
General Comments:

### **HACCP and Kitchen Evaluation**

### General:

Is the kitchen commercial or domestic?	domestic	
What equipment is in place? 6 domestic cooker/ovens		
In what condition is the equipment? All equipment in good 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	Kitchen open for residents	
relation to access to kitchen for non		
kitchen staff?		
Are white coats, shoe covers and hats	n/a	
available for non kitchen staff?		
Comment of the structural hygiene of the kitchen (i.e		
floors/walls/ceilings/doors/windows/work surfaces/ventilation, etc)		
Are suitable hand washing and drying	Yes	
facilities provided?		
General Comments:	6 domestic cooker/ovens	

### **Dry Goods:**

Suitably equipped? Shelving/containers	Dry goods store in shop/pickup area
etc	
Condition and suitability of facilities:	
What evidence is there of stock rotation?	Yes – deliveries a number of times a
	week

**Refrigerated Storage:** 

What type of refrigerated storage is provided?	Retail display fridge and freezers in shop/pickup area
Comment on the condition and suitability of Very clean	of the refrigerated storage:
Are thermostats provided and in working order?	N/A
Are food items date stamped?	N/A
Are samples of dishes being kept?	N/A

### Other:

Is there appropriate storage for cleaning	yes
agents and chemicals?	

### **OPERERATIONAL HYGIENE**

Do residents use the main kitchen?	yes
Is that use supervised to ensure safe &	Kitchen is purpose built for residents
hygienic practices are observed?	own use
By whom is it supervised?	n/a

Is the correct equipment provided?	e.g. colour coded chopping boards
n/a	

Is the necessary holding equipment provided? *e.g.bainmaries, refridgerated units.* n/a

Condition and suitability of serving equipment and utensils:	
good	

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

Comments:			

### **STAFF FACILITIES AND HYGIENE**

Are designated staff facilities provided?	Yes
What facilities are in place?	Toilets and changing room

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? Indicate	no
cleanliness & suitability	

Is a designated area provided for staff	Use main dining room or staff office
breaks? If yes, is it clean/suitable/well	
maintained.	
If no, outline arrangements for breaks	

Are uniforms provided for:	
Kitchen Staff?	n/a
Serving Staff?	n/a

Are uniforms clean and in good	n/a
condition? (to include	
caps/hairnets/closed heel/toe shoes etc)	
Is personal grooming satisfactory?	
Are safe habits practiced?	
General Comments on staff facilities:	

**23** PUBLIC TOILET (State Location):

	Number	Soap	Toilet	Hand Towels /	Hot	Sanitary Bins			
			Paper	Dryers	Water				
Unisex:									
Ladies:	1	у	у	У	у	У			
Gents:	1 y y y y								
Is there a cleaning schedule displayed?no									
Record th	ne last time	entry.							
Is the are	a clean? (p	rovide com	ment) yes	– very clean					
Are all fa	cilities worl	king? Yes							
Visual Check: Have you noticed any issues requiring attention? No									
If No, give details:									

### 24 COMMUNAL ROOM (State Location): main lobby off reception Storage area: Is the walkway through the area clear? Yes Are the exit signs clearly marked? Yes **General Seating Area** Is the seating in good condition? Yes Yes - lounging What is the area generally used for? **Computer room:** Is the area generally clean? Yes Visual Check: Have you noticed any issues requiring attention? NO If yes please detail: Any other comments? If yes please detail:

### **OUTDOOR GROUNDS / FACILITIES**

Please rate the following:

	Very Good	Adequate	Poor*	Needs urgent attention*
Condition of exterior of centre	Х			
Paintwork of the centre	Х			
Maintenance standard of the grounds (e.g. grass cut, walkways clear etc.)	х			
Cleanliness of the grounds (ie., evidence of rubbish etc.)	Х			
Where you have rated * plea	ise provide deta	ails and comm	ents:	

Are there any facilities availab	le for children outdoors? Large {	green play are					
Comments							
LAUNDRY ROOM							
	Washing Machines	Dryers					
Number	7	7					
Do they appear to be in worki	ng order? <b>yes</b>						
Comments:							
CORRIDOR (State Locati	on): all corridors						
Is the area generally clean?		Yes					
If no please give details:							
Visual Check: Have you notice	ed any issues requiring attention?	No					
If yes please detail:							
STAIRWAY (State Locati	on): Main stairwell						
Is the area generally clean? Yes							
If no please give details:							
Visual Check: Have you notice	ed any issues requiring attention?	Yes					
(e.g., fire exit signs, hazards, ligh	ting, notices, décor, etc.)						
If yes please detail:							

ı

# **Bedrooms:**

<u>CLEANING (</u>	<u>Ger</u>	<u>ieral Arrang</u>	<u>ements</u>	<u>)</u>						
How often are	e be	drooms inspe	cted?		weekly					
Who cleans th	ne b	edrooms?			residents					
How often do	sta	ff clean the b	edrooms	5?	As needed if residents need assisstance					
Are there clea	nin	g materials ar	nd equip	ment						
provided by management for residents?					Yes					
What cleaning	0	Brushes, vacuums, mops etc.								
residents?										
What arrange		•		ns are	Assiste	ed by ho	usek	eepin	g staff	
not cleaned s	uttic	iently by resi	aents?							
ROOM NUME	BER1	.02								
Room Profile:	Fan	nily		Roc	m Capa	city:		Roo	m Occupancy:	
				4				1		
TV		Ensuite	Share	d Bath	room	Smok	e Ala	rm	Fire Notice	
Х		X				X		x		
		Very Good	Ad	equate	Po	or *	N	leeds	urgent attention *	
Cleanliness		X								
Is everything	in w	orking order?	)		Υe	es X I	No *			
If *, please giv	/e d	etails:								
ROOM NUME	BER1	.03								
Room Profile:				Roc	m Capa	citv:		Roo	m Occupancy:	
		,		5	· ·			4	,	
TV		Ensuite	Share	d Bath	room	Smok	e Ala	rm	Fire Notice	
Х		Х					Х		х	
		Very Good	Ad	equate	Po	or *	N	leeds	urgent attention *	
Cleanliness		X								
Is everything	in w	orking order?	)		Yε	es <b>X</b> l	No *			
If *, please giv	/e d	etails:								
ROOM NUME	BER	104								
Room Profile:Family Roo				m Capa	city:		Roo	m Occupancy:		
4							0	<b>.</b>		
TV		Ensuite	Share	ed Bath	room	Smok	ke Alarm		Fire Notice	
Х		X					Х		x	
		Very Good	Ad	equate	Po	or *	١	leeds	urgent attention *	
Cleanliness		X								

Is everything	in working order?	<u> </u>		Vo	es <b>X</b>	No *	П		
Is everything in working order? Yes X No *  If *, please give details: Smoking in the room									
in , please give details. Smoking in the room									
ROOM NUME	BER 105								
Room Profile:	Family		Room	Room Capacity: Room Occupancy:					
			3				3		
TV	Ensuite	Shared	Shared Bathroom				rm	Fire Notice	
X	X			T		Х		х	
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *	
Cleanliness	X								
Is everything	in working order?	P		Ye	es <b>X</b>	No *			
If *, please giv	ve details: 2 tiles	starting to	come	off the	wall.				
ROOM NUMI	3FR106								
Room Profile:			Room	Capac	rity:		Roo	m Occupancy:	
Family	•		5	Сарас	orcy.		5	in occupancy.	
TV	Ensuite	Shared	_	om	Smok	e Ala		Fire Notice	
Х	х					Х		х	
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *	
Cleanliness	Х								
Is everything	in working order?	<del></del>		No	<u>—</u>				
	ve details: <b>showe</b>		roken						
, , , , , , ,									
ROOM NUMI			I _			I			
Room Profile:			Room Capacity:				Room Occupancy:		
Family	1		4		0			Т	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice	
Х	X					Х		х	
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *	
Cleanliness	Х								
Is everything	in working order?	•		Ye	s X	No *			
If *, please giv	ve details:								
ROOM NUME	RFR108								
Room Profile:			Room	Capac	rity:		Roo	m Occupancy:	
Family	•		4	. capat	y.		0	Occupancy.	
TV	Ensuite	Shared		om	Smoke Alarm			Fire Notice	
Х	X				Х			х	
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *	
Cleanliness	X	Г	7	Γ	<u> </u>	1	220.0		
	^			L					

Is everything	in working order?	· · · · · · · · · · · · · · · · · · ·		Ve	es X I	No *	7	
	e details: Smokir		oom	- 10	.3 A I	10 <u> </u>		
ii , piease giv	re details. Sillokii	ig iii tile it	70111					
ROOM NUME								
Room Profile:				Capac	city:		om Occi	upancy:
Family	Г		4			2		
TV	Ensuite	Shared	Bathro	om	Smok	e Alarm	F	ire Notice
X	Х					X		X
	Very Good	Adeo	Juate	Po	or *	Need	ds urgent	attention *
Cleanliness	Х							
Is everything i	in working order?	?		Ye	es <b>X</b>	No * 🗌		
If *, please giv	ve details:							
DOOR A NU IN A	2500							
ROOM NUME			Dear	Carac	si+		20m 02==	10000
Room Profile:			Room 4	Capac	aty:	2	om Occi	ирапсу:
<b>Family</b> TV	Ensuite	Shared	•	om	Smak	e Alarm		ira Notica
1 V	Elisuite	Silaieu	Бастис	10111	SITION	e Alailli	Alarm Fire Notic	
X	X			1		Х		Х
	Very Good	Adeo	uate	Po	or *	Need	ds urgent	attention *
Cleanliness	Х							
Is everything	in working order?	?		Ye	es <b>X</b> l	No * _		
If *, please given	ve details:							
ROOM NUME	3FR201							
Room Profile:			Room	n Capad	citv:	Ro	om Occi	ipancy:
Family			4	. сарас	,.	1	70111 0 000	араноу.
TV	Ensuite	Shared	Bathro	om	Smok	e Alarm	F	ire Notice
		0.10.00						
X	X		Note			X		Х
	Very Good	Adeo	uate	Po	or *	Need	ds urgent	attention *
Cleanliness	Х			[				
Is everything	in working order?	?		Ye	s <b>X</b>	No *		
If *, please giv	e details: Ceiling	in bathro	om nee	eds att	ention.			
ROOM NUME	BER202							
Room Profile:			Room	Capac	ity:	Ro	om Occi	upancy:
Family			4			2		
TV	Ensuite	Shared	d Bathroom		Smok	e Alarm	F	ire Notice
Х	Х					Х		Х
	Very Good	Adeo	ıuate	Po	or *	Need	s urgent	attention *
Cleanliness	X	Γ.α.Ε.	7		<del></del>	.,		
Cicariiiicaa	^			L				

Is everything i	in working order?	?		Υe	es <b>X</b> l	No *		
If *, please giv	ve details: <b>bathro</b>	om needs	refurbi	shmen	it			
ROOM NUME	BER203							
Room Profile:			Room	n Capad	city:		Roo	m Occupancy:
Family			4				2	
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice
Х	Х					Х		X
	Very Good	Adeq	uate	Pc	or *	N	eeds	urgent attention *
Cleanliness	X							
Is everything i	in working order?	?		Υe	es <b>X</b> l	No *		
If *, please giv	e details fix bulb	in bathroo	om & sl	hower	head ho	lder		
ROOM NUME	PED204							
Room Profile:			Poor	n Capad	rity:		Poo	m Occupancy:
ROOM FIOME.	i aiiiiiy		4	Сарас	JILY.		3	in Occupancy.
TV	Ensuite	Shared	Bathro	om	Smok	e Ala		Fire Notice
Х	Х					Х		x
	Very Good	Adeq	luate	Po	or *	N	eeds	urgent attention *
Cleanliness	Х							
Is everything i	n working order	?		ye	es			
If *, please giv	ve details:							
ROOM NUME						1		
Room Profile:				n Capad	city:			m Occupancy:
Family		<u> </u>	4				2	F: N
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice
Х	Х		Ш			X		Х
	Very Good	Adeq	luate	Pc	or *	N	eeds	urgent attention *
Cleanliness	Х							
Is everything i	in working order			Υe	es <b>X</b> l	No *		<del></del>
	ve details: showe		der					
ROOM NUME	BER206							
Room Profile:			Room	n Capad	city:		Roo	m Occupancy:
Family		4			2			
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice
Х	Х		Note			Х		Х
	Very Good	Adeq	luate	Pc	or *	N	eeds	urgent attention *
Cleanliness								
Is everything i	in working order			Υe	es <b>X</b>	No *		
	ve details: Replac		oom ar	nd cove	r vent ir	n bath	nroon	n
, p.case 811	- actanor replac	_ ~~	ul				551	

ROOM NUME	BER207												
Room Profile:				Room Capacity:					Room Occupancy:				
Family					4					2			
TV	Ensuite	Shared	Bathro	Bathroom		Smoke Ala			Fire Notice				
Х	Х				Х		X		х				
ol I	Very Good	Adeq	uate	Po	or *	N	leeds	urge	nt	attention *			
Cleanliness	<u> </u>												
Is everything in working order?													
If *, please giv	ve details: <b>Cover o</b>	over fire a	larm										
ROOM NUME	BER208												
Room Profile:			Room	Capac	city:		Roo	m O	ccu	pancy:			
Family			4				0						
TV	Ensuite	Shared	Bathro	om	Smok	ke Ala	ırm		Fi	re Notice			
Х	Х					Х				Х			
	Very Good	Adeq	uate	Ро	or *	N	leeds	urge	nt	attention *			
Cleanliness	Х												
Is everything i	n working order?	)		Ye	es <b>X</b>	No *							
If *, please giv	e details: fix tap	in bathroo	om, cor	nstantl	y on.								
ROOM NUME	PED200												
Room Profile:	DERZUS		Poor	n Capac	sitve		Poo	m O	2011	pancy:			
Family			4	Сарас	JILY.		0	111 00	JCu	рапсу.			
TV	Ensuite	Shared		om	Smok	ce Ala	•		Fi	re Notice			
Х	Х					Х		х					
	Very Good	Adeq	uate	Ро	or *	N	Needs urgent attention *			attention *			
Cleanliness	Х												
Is everything i	n working order?	)		Ye	es <b>X</b>	No *							
If *, please giv	ve details:												
ROOM NUME	BER210												
Room Profile:			Room	Capac	city:		Roo	m O	ccu	pancy:			
Family			4	•	•		3			·			
TV	Ensuite	Shared Bathroom			Smoke Alarm			Fire Notice					
Х	Х				Х			х		Х			
	Very Good	Adeq	uate	Ро	or *	N	leeds	urge	nt	attention *			
Cleanliness	X												
Is everything i	n working order?	, <u> </u>		Ye	es X	No *							
If *, please giv													

ROOM NUME	3ER211										
Room Profile:				Capac	ity:		Room Occupancy:				
Family					•		2				
TV	Ensuite	Shared Bathroom			Smoke Alarm			Fire Notice			
Х	Х					X		х			
	Very Good	Adeq	uate	Ро	or *	N	eeds	urgent attention *			
Cleanliness	X										
Is everything i	in working order?	)		ye	S						
If *, please giv	ve details:										
ROOM NUMB			Ι								
Room Profile:			<b>†</b>	Capac	ity:			m Occupancy:			
Family	Francisco	Cla a sa al	A Dathara		C l-	- 41-	1	Fine Notice			
TV	Ensuite	Shared	ватпго	om	Smok	е Аіа	rm	Fire Notice			
X	X					X		X			
	Very Good	Adeq	uate	Po	or *	N	Needs urgent attention *				
Cleanliness	Х										
Is everything i	in working order?	)		Ye	s <b>X</b> l	No *					
	de details: <b>Smoki</b> r	ng in Roon	n, and v	wine sp	olattered	d on	walls	and door. Water			
ROOM NUME	BER 213										
Room Profile:			Room	n Capac	ity:		Room Occupancy:				
Family			4				1				
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice			
X	X					X		X			
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *			
Cleanliness	X										
Is everything i	in working order?	)		Ye	s <b>X</b> l	No *					
If *, please giv	ve details:										
ROOM NUMB								•			
Room Profile:	Room Capacity:				Room Occupancy:						
Family	Financia a	Cla a sa al	A Dathara		C l-	- 41-	4	Fine Notice			
TV	Ensuite	Shared	Bathro	om	Smok	e Ala	rm	Fire Notice			
X	Х				Х			X			
	Very Good	Adeq	uate	Po	or *	N	eeds	urgent attention *			
OL !!	,										
Cleanliness	X										
	-	)		Ye	s <b>X</b> [	No *					

ROOM NUME	BER215								
Room Profile:				Сарас	ity:	Ro	Room Occupancy:		
Family			4			3			
TV	Ensuite	Shared	Bathro	om	Smoke Alarm			Fire Notice	
X	Х					X		X	
	Very Good	Adeq	uate	Ро	or *	Nee	ds u	rgent attention *	
Cleanliness	X								
Is everything i	n working order?	1		Ye	s <b>X</b> 1	No * [			
If *, please giv	e details: Clean r	nould aroเ	ınd the	vent i	n bathro	om			
ROOM NUME	BER216		1						
Room Profile:			Room Capacity:			Ro	Room Occupancy:		
Family			4			3			
TV	Ensuite	Shared	Shared Bathroom		Smoke Alarn		n Fire Notice		
X	Х					X		X	
	Very Good	Adeq	juate Poor *			Nee	Needs urgent attention *		
Cleanliness	Х								
Is everything i	n working order?	)		Ye	s <b>X</b>	No * [			
If *, please giv	e details:								
Use this space	ce for any comm	nents or o	ther in	ıforma	tion no	t cover	ed i	n this form:	

# **General Representations**

If you were approached by any <u>residents</u> regarding general issues while in the centre please outline the details below:
in the centre please outline the details below.
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 <u>other persons</u> 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:		Atlantic Lodge					
Address:		Kenmare, Co. Kerry					
Proprietor:		Millstreet Equestrian services					
Manager:		Vlad Alhimovics					
Contact Name:		Vlad Alhimovics					
<b>Capacity Per MOA</b>	(Current	78 (67)					
Occupancy):							
Date of	06/10/2022						
Inspection:							

#### Fire Safety:

No Fire Drill Completed since 2020

Rm 104, 112 & 108 Smoking in the room

Rm 207 Cover over smoke detector

### Food Safety:

No Issues

#### Bedrooms:

Rm 105 - 2 Tiles coming off the wall in the bathroom

Rm 201 – Ceiling in Bathroom requires attention

Rm 203 – Fix bulb in bedroom and shower head holder in bathroom.

Rm 205 - Repair shower head holder

Rm 206 – Replace bulb in bedroom and cover on vent in bathroom

Rm 208 – Constant water running in bathroom tap

Rm 212 – Leak around window and wine on walls in room

Rm 214 – Bathroom require painting on walls and ceiling however resident doesn't want due to smell of paint in room with children.

Rm 215 – Clean mould around vent in bathroom..

# Atlantic Lodge, Kenmare, Inspection Report: 06.10.2022

### **Bedrooms:**

105 – 2 Tiles coming off the wall in the bathroom	Done
201 – Ceiling in Bathroom requires attention	Done
203 – Fix bulb in bedroom and shower head holder in bathroom.	Done
205 - Repair shower head holder	Done
206 – Replace bulb in bedroom and cover on vent in bathroom	Done
208 – Constant water running in bathroom tap	Done
212 – Leak around window and wine on walls in room	Done
214 – Bathroom require painting on walls and ceiling however resident doesn't	Done
215 – Clean mould around vent in bathroom.	Done