

RIA

Inspection Report

Centre:	Davis Lane Apartments, Mallow
RIA Inspector:	Siobhan O'Higgins
Date of Inspection:	11TH December, 2018.
Time of Arrival & Departure:	10:30 = 12:15

Part 1
General Information on Services

Centre: Davis Lane Apartments, Mallow,
Co Cork

*Date of Inspection: 11th December, **2018.***

1. CENTRE DETAILS

Name and address of Centre	Davis Lane Apartments 73-75 Davis Street, Mallow, Cop Cork.
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Contractor	Millstreet, Equestrian Services
Manager	Karol Smeich
Who deputises for manager in his/her absence?	Area Manager

Telephone Number	029-71008
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Current Contracted Capacity	52
Current Occupancy (today)	54
Current Centre Profile (e.g., singles, families etc.)	Families/singles

HSE Area	Southern HB
Public Health Nurse	Ceddia Roche (RPN)
DSP / CWO name	Brenda Lynch
Environmental Health Officer name	N/A
Local Fire Officer Name	David O'Donoghue/ Aaron Fahy
Local Fire Station	Mallow Fire Station

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

2. Please provide a copy of the following

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

3 GENERAL SECURITY & EMERGENCY DETAILS

Is 24 hour supervision provided? (Y/N)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Give details of roster hours	
Is security provided by external company? (Y/N)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, give name of company:	
Does the centre have CCTV? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is a list of emergency numbers available in the Manager's office?	Yes <input checked="" type="checkbox"/> in reception hall
Does the list include the following numbers? (Y/N) Local Garda station 24 hr number Local hospital Local fire station Duty Social Work Team Out of hours GP Service RIA out of hours number	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If no, give details:
Are first aid kits available? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Where and how many?	In reception area
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? How many staff been trained to use it?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

4 HEATING ARRANGEMENTS

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

5 HOUSE RULES

Are residents provided with a copy of the House Rules on arrival?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
How does centre management explain house rules to residents on arrival?	Manager explains the House Rules to new arrivals

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

Are residents issued with key for their bedroom?(Yes/No)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are residents issued with key for main door? (Yes/No)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no, give details	
Are there procedures to allow residents to receive visitors? (Give details)	Visitors generally allowed between 8:00am and 11:00pm – residents notify the manager of guests arrival
Outline visiting times :	08:00am – 11:00pm
In what areas are visitors allowed in the centre?	No designated areas as residents have their own apartments
Any other relevant information:	
Is there a facility for storage of residents' valuables*? (Give details.) (* Storage is at resident's own risk)	No storage available other than the storage available in each apartment

7 ARRANGEMENTS FOR MAINTENANCE

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

8 CHILD PROTECTION

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

9 LAUNDRY FACILITIES (General Arrangements)

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

PART 2

Room by Room Inspection

Centre: Davis Lane Apartments

Date of Inspection: 11th December, 2018.

Section A- Administration / Communal areas

10 Have you seen the following?

		Location of display
Up to date House Rules	<input type="checkbox"/>	In Drishane Castle
Complaint Forms	<input type="checkbox"/>	In Drishane Castle
Accident/ Incident procedure	<input type="checkbox"/>	In Drishane Castle
HSE Breastfeeding Posters (if applicable)	<input type="checkbox"/>	No In Drishane Castle,
Designated Liaison Person details (Child Protection)	<input type="checkbox"/>	No In Drishane Castle,
Supervision of children notice	<input type="checkbox"/>	No In Drishane Castle
Human trafficking awareness poster	<input type="checkbox"/>	No In Drishane Castle
IOM Voluntary Return Posters	<input type="checkbox"/>	No In Drishane Castle

11 Staff Awareness

Did you see the RIA Code of Practice*?	<input type="checkbox"/>
Are all staff aware of RIA Code & House Rules?	<input type="checkbox"/>
How are staff made aware of RIA Code & House Rules?	

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

No such notices on site. Informed by Deputy Manager that they are available in Drishane Castle.

Bus takes residents from Davis Lane to Drishane Castle every Tuesday, Thursday and Saturday to collect provisions and to carry out all necessary business and request assistance from management at the centre.

12 FIRE SAFETY

12a EMERGENCY LIGHTING INSPECTION SCHEDULE

<u>Date</u>	<u>Inspected By</u> (Company Name / Position)	<u>Comments</u>

12b FIRE ALARM & DETECTION SYSTEM INSPECTION SCHEDULE

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N

12c FIRE FIGHTING EQUIPMENT INSPECTION SCHEDULE

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

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
		<input checked="" type="checkbox"/>			
		<input checked="" type="checkbox"/>			

12d 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
		<input checked="" type="checkbox"/>			
		<input checked="" type="checkbox"/>			

12e FIRE DRILL PROCEDURE INSPECTION SCHEDULE

Date & Time	Numbers of staff involved in drill	No. of residents present / evacuated **	Evacuation Time	Comments

12f STAFF INSTRUCTION AND TRAINING (Fire Safety)

Job Description	Course	Instructor	Duration	Date

12g FIRE EXITS, EMERGENCY LIGHTING, SMOKE ALARMS, FIRE NOTICES

(in corridors & common areas)

Are fire exits clear from obstruction?	Yes
Are they unlocked?	Yes
Are fire exits clearly posted throughout the building?	Yes
Are all fire doors kept closed?	Yes
Comments:	

Administration Area:**Reception: None on site. All administration is carried out from Drishane Castle**

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

Bedrooms:**CLEANING (General Arrangements)**

How often are bedrooms inspected?	twice weekly <input type="checkbox"/> when carrying out maintenance
Who cleans the bedrooms?	Staff <input type="checkbox"/> Residents <input checked="" type="checkbox"/>
How often do staff clean the bedrooms?	Weekly <input type="checkbox"/> fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Other <input type="checkbox"/> This is an independent living centre and residents are obliged to clean their own apartments
Are there cleaning materials and equipment provided by management for residents?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
What cleaning equipment is available to residents?	Residents purchase their own cleaning equipment
What arrangements are in place if rooms are not cleaned sufficiently by residents?	

APT NUMBER 1(2 BEDROOMS)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3 & 1		3 & 1
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If *, please give details :				
APT NUMBER: 2(3 BEDROOMS)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3&2&2		2&2&2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details: Toilet seat broken				

APT NUMBER 3 (3 bedrooms)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3 & 2 & 1		3 & 2 & 1
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details: Resident asked for double mattress as the double bed consisted of 2 single mattresses attached together. Resident asked that the plumbing in the ensuite be looked at, had brought this already to the attention of the manager who had scheduled it on the maintenance log.				

APT NUMBER 4 (2 bedrooms)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2 & 1		2 & 1
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details:				

APT NUMBER 5 (2 BEDROOM)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3 & 2		3 & 2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details:				

APT NUMBER 6 (1 BEDROOM)				
Room Profile:		Room Capacity:		Room Occupancy:
family		3		3
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: Smoke alarm covered (removed by resident during inspt)				

APT NUMBER 7 (1 bedroom)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3		3
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order? Yes <input type="checkbox"/> No * <input checked="" type="checkbox"/>				
If *, please give details: Resident stated that only one window in the apartment opened, but with restricted opening and that the other window in the bedroom had no opening.				

APT NUMBER 8 (2 bedroom)				
Room Profile:		Room Capacity:		Room Occupancy:
family		3 & 1		3 & 1
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order? Yes <input checked="" type="checkbox"/> No * <input type="checkbox"/>				
If *, please give details:				

APT NUMBER 9 (3 bedrooms)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3 & 2 & 2		3 & 2&2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is everything in working order? Yes <input type="checkbox"/> No * <input checked="" type="checkbox"/>				
If *, please give details: Apartment requires tidying. Window in ensuite rotting. Charger left plugged in (safety hazard)				

APT NUMBER 10 (2 bedroom)				
Room Profile:		Room Capacity:		Room Occupancy:
family		2 & 1		2 & 1
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details:				

APT NUMBER 11 (2 bedrooms)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		3 & 2		3 & 2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: Chargers left plugged in(safety hazard)				

APT NUMBER 12 (1 bedroom)				
Room Profile:		Room Capacity:		Room Occupancy:
Family		2		2
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Cleanliness	Very Good	Adequate	Poor *	Needs urgent attention *
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: Apartment requires tidying				

APT NUMBER 13 (1 bedroom)				
Room Profile:		Room Capacity:		Room Occupancy:
family		3		3
TV	Ensuite	Shared Bathroom	Smoke Alarm	Fire Notice
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Very Good	Adequate	Poor *	Needs urgent attention *
Cleanliness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is everything in working order?			Yes <input type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details: Apartment requires cleaning. Only one window in the apartment opens, but with restricted opening and the other window in the bedroom has no opening				

Corridors and stairway – The corridors in the stairway require painting



Áisneacht Fháilte agus Comhtháite
Reception and Integration Agency

Mr Thomas Duggan
Millstreet Equestrian Services Ltd
Green Glens Arena,
Millstreet
Co. Cork

11th January, 2019

Dear Mr. Duggan,

The Reception and Integration Agency, carried out an inspection at Davis Lane on 11th December, 2018. A copy of the report is enclosed for your information and I apologise for the delay in forwarding this to you. Please read this report carefully and do not hesitate to contact me if you require any clarifications.

During the course of the inspection a number of issues were highlighted, we would appreciate your immediate attention to deal with any hazards or risks detailed in this report.

Please reply to me in writing, on or before Friday 1st February, 2019 outlining the steps you have taken/propose to take to address each of the issues raised in the report.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Bernie Loughrey'.

Bernie Loughrey
Internal Inspection Unit
Reception and Integration Agency

Bernadette M. Loughrey

From: Thomas Duggan <thomas@millstreet.ie>
Sent: 02 February 2019 15:12
To: Bernadette M. Loughrey
Cc: 'Drishane Castle'; 'Karol Smiech'
Subject: Inspection - Mallow Davis Lane Apartments

Dear Ms. Loughrey,

Thank you for your letter of January 11th re the above.

The documents referred to in the report are all on display in Mallow as well as in Millstreet Notice boards.

The Fire Safety register on site has records of the following.

Servicing of
Fire Alarm,
Emergency Lighting
First Aid Fire Fighting Equipment

Record of
All Exit Door checks
Fire Drill
and
Training (December 19th 2018)

The toilet seat in Apartment no 2 has been replaced

The windows in apartments 7 and 13 are fire rated glass to protect the escape route immediately outside the window. This is an express requirement in the Fire Safety Certificate of the complex. The other windows in the apartment open freely plus a mechanical air intake fan operates in both units.

Apartment 11 and 12 – the residents have been asked not to leave chargers plugged in.

Sincerely,

Thomas Duggan

Siobhan A. O'Higgins

From: Siobhan A. O'Higgins
Sent: 28 February 2019 15:06
To: 'Thomas Duggan'
Subject: Inspection report Linden House & Davis Lane

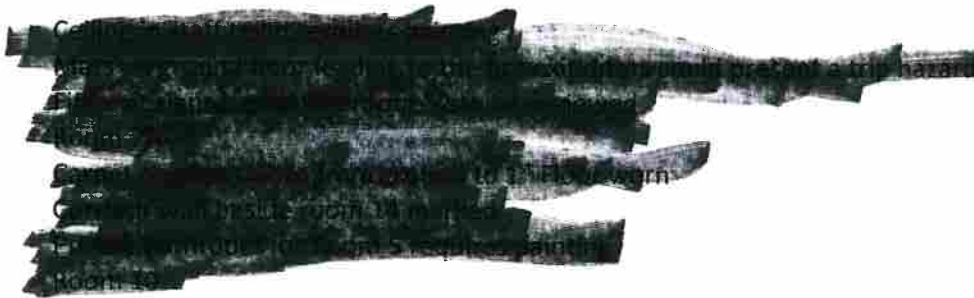
Dear Thomas,

I refer to the Inspection report responses for Linden House and Davis Lane. A number of issues remain to be addresses.

Davis Lane

Apt Number 3
Apt Number 9
Corridors in the stairway require painting

Linden House



I would be grateful if you submit a response to these issues as soon as possible.

Yours sincerely

Siobhan O'Higgins



Siobhan A. O'Higgins

From: Thomas Duggan <thomas@millstreet.ie>
Sent: 01 March 2019 15:27
To: Siobhan A. O'Higgins
Subject: Davis Lane Apartments

Dear Siobhan,

I acknowledge your recent email re the inspection of the above accommodation centre.

Apartment no 3

All double mattresses are the zip and link system which can be two no. singles or one no. double without moving furniture in and out of the room. .

The family resident in this apartment is moving to Athlone in 2 weeks time.

Apartment no 9

The ensuite window has been included in the maintenance log and will be rectified. Resident was requested to tidy the apartment.

The walls in the stairwell are scheduled to be painted.

Sincerely,

Thomas Duggan

