

RIA

Internal Inspection Report

Centre:	Hanratty's Accommodation Centre
Inspector:	Conor Mulvihill
Date of Inspection:	28th of June 2019
Time of Arrival & Departure:	10.30am - 1.10 pm

HANRATTYS STAFF

On duty 28th June 2019

Síle Corish (DLP)

Michael Raleigh

Margaret O Rourke

Patrik Cicen

Aidan Becton

Edita Baluikaite

Justina Bildziunaite

Part 1
General Information on Services

Centre: **Hanratty's Hotel**
Date of Inspection: **28th of June 2019**

3 GENERAL SECURITY & EMERGENCY DETAILS

Is 24 hour supervision provided? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Give details of roster hours	
Is security provided by external company? (Y/N)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, give name of company:	
Does the centre have CCTV? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is a list of emergency numbers available in the Manager's office?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the list include the following numbers? (Y/N) Local Garda station 24 hr number Local hospital Local fire station Duty Social Work Team Out of hours GP Service RIA out of hours number	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If no, give details:
Are first aid kits available? (Y/N)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Where and how many?	2 kits - 1 x kitchen and 1 x reception
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?	Gas central 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?	The heating is on 24 hours a day, 7 days a week throughout the year.

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?	A copy is issued to each resident with their welcome pack on arrival in the centre.

(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?	No

10 INDOOR FACILITIES

<i>Are the following available to residents?</i>	Yes/No			
Computers with Internet access	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
WIFI	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
DVD player	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Computer Games	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Snooker Table	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Pool Table	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Table Tennis Table	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Board Games	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Newspapers	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Books	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Other	Sky TV			
Give details of any other arrangement or other comments:	Private room for meetings and prayer. Residents have membership to the local library			

11 TRANSPORT ARRANGEMENTS

Is there a bus service provided? (Yes/No):	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Where does the service go to?	
What is the frequency of the service? (List time table opposite)	

12 TV SYSTEM

Is there a specific TV system in place? (give details)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
An average, how many TV channels are provided to residents?	45-50
Are residents allowed to erect satellite dishes?	No

PART 2

Room by Room Inspection

*Centre: **Hanrattys Accommodation Centre***

Date of Inspection: 28th June 2019

FIRE SAFETY

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

EMERGENCY LIGHTING INSPECTION SCHEDULE

<u>Date</u>	<u>Inspected By</u> (Company Name / Position)	<u>Comments</u>
18/06/2019	Manager	None
25/06/2018	Manager	None

FIRE ALARM & DETECTION SYSTEM INSPECTION SCHEDULE

Date	Inspected By (Company Name / Position)	OK	Defect	Remedial Action Taken (Y/N)	Sign Off Y/N
11/06/2019	Firecheck Ltd. Q2 Service	<input checked="" type="checkbox"/>	Error with main fire exit	Yes	Yes
26/06/2019	Manager	<input checked="" type="checkbox"/>	None	No	Yes
27/06/2019	Manager	<input checked="" type="checkbox"/>	None	No	Yes

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
18/05/2019	LFP Fire Services	<input checked="" type="checkbox"/>	Fire extinguisher	Yes	Yes
21/06/2019	Manager	<input checked="" type="checkbox"/>	none	No	Yes

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
26/06/2019	Manager	<input checked="" type="checkbox"/>	none	No	Yes
27/06/2019	Manager	<input checked="" type="checkbox"/>	none	No	Yes

FIRE DRILL PROCEDURE INSPECTION SCHEDULE

Date & Time	Numbers of staff involved in drill	No. of residents present / evacuated **	Evacuation Time	Comments
15/06/2019	3	16/16	5 mins	None
20/12/2018	3	21/21	5 mins	None

Administration Area:

Reception: Ground Floor

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

Tea Station: dining room

What facilities are provided? Tea, coffee, juices, breads, butter and jams. Each room also has tea/coffee making facilities.		
Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail:		

LAUNDRY ROOM

	Washing Machines	Dryers
Number	5	5
Do they appear to be in working order?	Yes – machine tokens available from reception.	
Comments:	Operates 7am – 11pm	

OUTDOOR GROUNDS / FACILITIES

Please rate the following:

	Very Good	Adequate	Poor*	Needs urgent attention*
Condition of exterior of centre	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paintwork of the centre	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance standard of the grounds (e.g. grass cut, walkways clear etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness of the grounds (ie., evidence of rubbish etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Where you have rated * please provide details and comments:				
Are there any facilities available for children outdoors? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Comments This is an adult only centre, building is in the city centre				

Please outline: **Kitchen staff wear full catering uniform while server staff wear black trousers and top, apron, hat and gloves.**

Has the manager shown you HACCP Certificates for chefs?	<input type="checkbox"/> No HACCP
Was the fridge temperature showing as being between 1 and 5°C?	<input checked="" type="checkbox"/>
Did you see evidence that the fridge temperature is recorded daily?	<input checked="" type="checkbox"/>
Was the freezer temperature showing as being -18°C or below?	<input checked="" type="checkbox"/>
Did you see evidence that freezer temperature is recorded daily?	<input checked="" type="checkbox"/>
Are dry food stuffs stored on shelving? (all dry goods should be stored off the ground)	<input checked="" type="checkbox"/>
Has it been demonstrated to you that cooked food is at a temperature above 72°C?	<input checked="" type="checkbox"/>
Is the temperature recorded for all food services (lunch & dinner)	<input checked="" type="checkbox"/>
Is there a record of daily cleaning of kitchen, food service and dining areas?	<input checked="" type="checkbox"/>
Have you seen a record of periodic deep clean of all floors, under and behind cookers/fridges etc.?	<input checked="" type="checkbox"/>
Are bins with waste food covered/lidded ?	<input checked="" type="checkbox"/>
Are fly screens present on windows and doors into kitchen?	<input checked="" type="checkbox"/>

No HAACP certificate provided but environmental training certificates were provided

Public Toilet (State Location):		Ground Floor:		First Floor:		
	Number	Soap	Toilet Paper	Hand Towels / Dryers	Hot Water	Sanitary Bins
Unisex:	Disabled toilet	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ladies:	3 cubicles	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Gents:	2 cubicles 3 urinals	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Is there a cleaning schedule displayed?					Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Record the last time entry.						
Is the area clean? (provide comment) Yes, clean and tidy						
Are all facilities working?					Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
Visual Check: Have you noticed any issues requiring attention?					Yes* <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If No, give details:						

Bedrooms:

CLEANING (General Arrangements)

How often are bedrooms inspected?	twice weekly <input type="checkbox"/> Weekly <input checked="" type="checkbox"/>
Who cleans the bedrooms?	Staff <input checked="" type="checkbox"/> Residents <input type="checkbox"/>
How often do staff clean the bedrooms?	Weekly <input checked="" type="checkbox"/> fortnightly <input type="checkbox"/> Monthly <input type="checkbox"/> Other <input type="checkbox"/>
Are there cleaning materials and equipment provided by management for residents?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What cleaning equipment is available to residents?	Hoover, mops, cloths, a selection of detergents and cleaning products
What arrangements are in place if rooms are not cleaned sufficiently by residents?	Rooms cleaned once weekly by contract cleaner

Location – 1ST Floor

STAIRWAY: between ground and 1st floor

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

CORRIDOR: 1st floor

Is the area generally clean?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If no please give details:	
Visual Check: Have you noticed any issues requiring attention? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes please detail:	

ROOM NUMBER 201				
Room Profile:		Room Capacity:	Room Occupancy:	
Shared		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:				

Location – 2nd Floor

ROOM NUMBER 301				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 checked="" type="checkbox"/>	No* <input type="checkbox"/>
If *, please give details: Windows dirty, build-up of cigarettes outside window, paint peeling in bathroom				

ROOM NUMBER 302				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		4		4
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 type="checkbox"/>	No* <input checked="" type="checkbox"/>
If *, please give details: Window in main room dirty				

ROOM NUMBER 303				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Some mould on window				

ROOM NUMBER 304				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		5		5
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: two bed looks unused Cobwebs in bathroom				

STAIRWAY (State Location): between 1st and 2nd floor

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

CORRIDOR (State Location): 2nd floor

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention? Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
If yes please detail:		

ROOM NUMBER 305				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Walls need to be painted Ensuite: Shower needs to be cleaned				

If *, please give details: **Window blind is dirty, two beds appear to be unused**

ROOM NUMBER 310				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Room is very untidy, window ledge is dirty				

ROOM NUMBER 311				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: One beds does not look used				

Location - 3rd Floor

STAIRWAY: between 2nd and 3rd floor

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

CORRIDOR: 3rd Floor

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail:		

If *, please give details:

ROOM NUMBER 405				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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:				

ROOM NUMBER 406				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: walls in bathroom to be painted				
Room is untidy, light shade missing				

ROOM NUMBER 407				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Bathroom walls need to be painted				

Is everything in working order?	Yes <input checked="" type="checkbox"/>	No * <input type="checkbox"/>
If *, please give details: Bathroom light shade missing		

Location – 4th Floor.

CORRIDOR (State Location): 4th Floor

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail:		

ROOM NUMBER 501				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Ensuite: Bathroom walls need painting and floor needs covering. Vent left open with knife, room untidy				

ROOM NUMBER 502				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Few cobwebs				

ROOM NUMBER 503				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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"/>

Cleanliness	<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: untidy room				

ROOM NUMBER 508				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: resident was smoking in room.				

ROOM NUMBER 509				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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: Tinfoil on smoke alarm				

ROOM NUMBER 510				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 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: Traces of mould present in bathroom				

ROOM NUMBER 511				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 type="checkbox"/>	<input type="checkbox"/>

Location – 5th Floor

CORRIDOR (State Location): 5th Floor

Is the area generally clean?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If no please give details:		
Visual Check: Have you noticed any issues requiring attention?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes please detail:		

ROOM NUMBER 601				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 checked="" type="checkbox"/>	No* <input type="checkbox"/>
If *, please give details:				

ROOM NUMBER 602				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 type="checkbox"/>	No * <input checked="" type="checkbox"/>
If *, please give details:				
Floor in bathroom needs repair.				
ROOM NUMBER 603				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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:				

ROOM NUMBER 607				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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 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:				

ROOM NUMBER 608				
Room Profile:		Room Capacity:		Room Occupancy:
Shared		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"/>
Light cover in bathroom missin				

Manager should be asked to sign this declaration.

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

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

Signed:

Silo Corbin

Position:

Manager

Date:

28/06/2019

Manager should be asked to sign this declaration.

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

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

Signed:

Silo Corbin

Position:

Manager

Date:

28/06/2019

Part 3
Sensitive Information

Internal Inspection

Centre: **Hanratty's Hotel**

Date of Inspection: 28th of June 2018

Staff on duty at time of inspection:

Do you have a full list of staff employed at the centre?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Do you have a list of the Staff on duty on the day of the inspection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Do you have a list of the Designated Liaison Persons (Child Protection)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Please attach the above lists to the end of the inspection report.

If you do not have a separate list, please provide

Name	Position	On Duty? Check box if yes.
------	----------	-------------------------------

OFFICIAL REGISTER

Accommodation Centre :

Hanrattys Hotel

Proprietor / Manager: SILE CORISH

Contact Telephone Number: 061-774362

P=present X=absent H=hospital

Week Ended: #####

ROOM #

OCCUPANCY

NAME

NATIONALITY

ID NO

twin, single max-current

MON TUE
17 18

201	Twin	2	2	Shamsuhuda Safi Muhammad Fahad	Afghanistan Pakistan	943318-15 945503 - 15	P	P
202	Twin	2	2	Mduduzi Dube Mduduzi Ndhlovu	Zimbabwe Zimbabwe	1021709 - 17 1021713 - 17	P	P
203	Twin	2	2	Oleksandr Kyrymyza Anatolii Kryzhanivski	Ukraine Ukraine	907764-14 929469 - 15	P	P
204	Twin	2	1	Vacant Najim Bouras				
205	Twin	2	2	Thulani Gumede Richard Ikechukwu Nwamadi	Morocco Zimbabwe	1043784 - 18 1043110 - 18	P	P
206	Twin	2	2	Lloyd Chipinga Yaser Kiani	Nigeria Malawi	1081696 - 19 882989 - 14	X	X
207	Twin	2	2	Mollen Manzini Deba Droz	IRAN Zimbabwe	1000468 - 17 1004869 - 17	X	X
301	Twin	2	2	Beg Bahadur Ramjali Suman Babu Dahal	Cameroon Nepal	1014081 - 17 1044769 - 18	P	P
302	Triple	4	4	Irakli Chikhladze Lasha Gagun	Nepal Georgia	351794-10 1071597 - 18	P	P
303	Triple	3	3	Ray Jubilant Gwalugano Otari Tsignadze Ebrahim Abdulla	Georgia Tanzania Baharain	1071600 - 18 1067290 - 18 1081496 - 19	X	X
304	Five Bed	5	5	Tarloknath Karen Kumar Mohamed Amin Dehbozorgi Galandar Shah	India Iran Afghsn	1027832 - 17 943723-15 1050085-18	P	P
						1082480 - 19	P	P

407	Twin	2	2	Mujiaba Safi Chico Kalala Lukusa	Afghanistan DRC	952615-15 1027192 - 17	P	P
408	Twin	2	2	Happy Igbenigun Shamshir Safi	Nigeria Afghanistan	997682 - 17 1027114-17	X	X
409	Twin	2	2	Armando Ulndreaj Jacob Komanzi	Albania Burundi	1026684 - 17 354152-08	P	P
410	Twin	2	2	Feroz Din Ikram Ul Haq Eric Armah	Pakistan Ghana	1046319 - 18 879194 - 14	X	X
411	Twin	2	2	Olaosebikan Popoola Cole Mohammed Tahar Benaouicha	Nigeria Algeria	907562-14 831404/12	P	P
501	Triple	3	3	Rommel Sanchez Peredo Khalid Yousuf	Bolivia Somalia	1061524 - 18 1077852 - 18	P	P
502	Triple	3	3	Bilal Achi Ali Waseem	Algeria Pakistan	1036539 - 17 945507-15	P	P
503	Triple	3	3	Palwinder Kaur Rakesh Rani	India India	941610-15 941693-15	P	P
504	Triple	3	3	Tsiala Kakhani Honar Momand	Georgian Afghanistan	912249-15 956289 - 16	P	X
505	Twin	2	2	Abdullah Chaman Toryalai Ashrafi	Afghanistan Afghanistan	1082077 - 19 350807 - 11	P	P
506	Twin	2	2	Ndrigin Quema Jannahmat Bahrami	Albania Afghanistan	1051369 - 18 1070327 - 18	X	X
507	Twin	2	2	Faryad Halimi Ravi Oojagheer	Afghanistan Mauritius	1048159 - 18 941052 - 15	P	P
508	Twin	2	2	Didier Lokamba Bosiwa Saifuddin Saleh	DR Congo Afghanistan	1052754 - 18 1028487 - 17	P	P
509	Twin	2	2	Salahuddin Safi Olivier Auglustaine	Afghanistan Guinea-Bissau	938876 - 15 814754-12	P	P
509	Twin	2	2	Sammar Ali Ismail Ziajee	Pakistan Afghanistan	942675-15 958273 - 16	P	P
509	Twin	2	2	Chari Tordi Najib Ereg	Afghanistan Somalia	304117 -11 1039013 - 18	P	P
509	Twin	2	2	Shmagi Motikulashvili	Georgia	1039001 - 18	X	X

OFFICIAL REGISTER

Accommodation Centre :

Hanratlys Hotel

Proprietor / Manager:

SILE CORISH

Contact Telephone Number: 061-774362

P=present X=absent H=hospital

ROOM #		OCCUPANCY	NAME	NATIONALITY	ID NO	Week Ended: ####	
						MON 17	TUE 18
201	Twin	2 2	Shamsuhuda Safi	Afghanistan	943318-15	P	P
			Muhammad Fahad	Pakistan	945503 - 15	P	P
202	Twin	2 2	Mduduzi Dube	Zimbabwe	1021709 - 17	P	P
			Mduduzi Ndhlovu	Zimbabwe	1021713 - 17	X	X
203	Twin	2 2	Oleksandr Kyrymyza	Ukraine	907764-14	P	P
			Anatolii Kryzhanivski	Ukraine	929469 - 15	P	X
204	Twin	2 1	Vacant				
			Najim Bouras	Morocco	1043784 - 18	P	P
205	Twin	2 2	Thulani Gumede	Zimbabwe	1043110 - 18	P	P
			Richard Ikechukwu Nwamadi	Nigeria	1081696 - 19	X	X
206	Twin	2 2	Lloyd Chippinga	Malawi	882989 - 14	X	X
			Yaser Kiani	IRAN	1000468 - 17	X	X
207	Twin	2 2	Mollen Manzini	Zimbabwe	1004869 - 17	P	P
			Deba Droz	Cameroon	1014081 - 17	P	P
301	Twin	2 2	Beg Bahadur Ramjali	Nepal	1044769 - 18	P	P
			Suman Babu Dahal	Nepal	351794-10	P	P
302	Triple	4 4	Irakli Chikhladze	Georgia	1071597 - 18	X	X
			Lasha Gagun	Georgia	1071600 - 18	P	P
			Ray Jubilant Gwalugano	Tanzania	1067290 - 18	P	P
			Otari Tsignadze	Georgia	1081496 - 19	P	X
303	Triple	3 3	Ebrahim Abdulla	Baharain	1027832 - 17	P	P
			Tarlok Nath Karen Kumar	India	943723-15	P	P
			Mohamed Amin Dehbozorgi	Iran	1050085-18	P	P
304	Five Bed	5 5	Qalander Shah	Afghsn	1082480 - 19	P	P

510	Twin	2	2	Thabani Mangeria Nkosiyo Mhodi	Zimbabwe Zimbabwe	853495-13 1045054 - 14	P P	P P
511	Twin	2	2	Mohammad Ruhul Amin Kazi Farid Alam	Bangladesh Bangladesh	913860 - 15 993626 - 16	P P	P P
601	Twin	3	3	Aissa Hellali Fatoth Issa	Afghanistan Algeria	1067587 - 18 1081853 - 19	P P	P P
602	Triple	3	2	Mohamed Ammour Barakat Khan	Algeria Afghanistan	898782-14 864697-13	P P	P P
603	Triple	3	3	Chadrack Mulopo Miliambo Muhammad Haseeb	DRC Pakistan	1047674 - 18 1076942-18	P P	P P
604	Triple	3	3	Md Rabiul Awal Shuhol Miah	Bangladesh Bangladesh	929993 - 15 940393-15	P P	P P
605	Triple	3	3	Mir Muhammad Sabuj Miah Izmir Qarsj	Bangladesh Albania	940299 - 15 1078155 - 18	P P	P P
606	Triple	3	3	Ntwenhle Mahaye Umba Malonda	South Africa DRC	1083997 - 19 1047637 - 18	P P	P P
607	Triple	3	3	Toufik Bouikni Abdermane Doumandi	Algeria Algeria	996077 - 17 948710 - 15	P P	X P
608	Quad	4	4	Shota Ivanidze Charles Nyange	Georgian Kenya	1040051 - 18 336966-10	P P	P P
609	Twin	2	2	Abdul Satar Azizyar Helman Safi	Afghanistan Afghanistan	1068014-18 1068145-18	P P	X P
610	Triple	3	3	Gelmaz Khushishvili Abdulkader Mandou	Georgia Syria	1042319 - 18 1054450-18	P P	X P
611	Triple	3	3	Tonbrapade Louis Ebigbagha Arber Lulaj	Nigeria Albania	1052822 - 18 1082155 - 19	P P	P P
612	Triple	3	3	Abdullah Al Lami Ravil Radulin	Iraq China	1020501 - 17 1052363-18	P X	P X

305	Twin	2	2	Givi Davitashvili Berihu Teame Soso Zhorzholiani Roman Mangal Xolani Ncube Mandson Vundla Junior Lombo Fido Isifi	Georgian Eritrea Georgian Afghanistan Zimbabwe Zimbabwe DRC DRC	1030264 - 17 1020685 - 17 1067840 - 18 1065233 - 18 1005375 - 17 900525-14 864651/13 1026920 - 17	P X X P P X P P	X X X P P X P P	
306	Twin	2	2	Abdeslam Ouadah Kamunga Jeannot Jadid Abdelhafid Kamal Ahmed Ismail Ilia Lomsadze Leri Alaverdashvili Ashok Kumar Bhoopathy Jozefina Murcaj	Algeria Congo Syria Sudan Georgia Georgian India Albania	956272 - 16 1067680 - 18 1004730-17 324552-06 1054076 - 18 1045852 - 18 1028164 - 17 1081694 - 19	P P P P P P P P	P X P P P P P P	
307	Twin	2	2	Lambo Belenda Emmanuel Emmanuel Mugwendere Augustin Mulumba Mulumba Papy Bofosalomanga Patrick Matovu	DRC Zimbabwe DRC Congo Uganda	1006366 - 17 1045027 - 18 980507 - 16 1048046 - 18 897992 - 14	P P P P P	X P P P P	
308	Twin	2	2	Adikaly Modu Bangura Mthabisi Keith Dube Mamadou Saïdou Diallo Arnold Kamberi Mahmoud Abdu Hassan Ernest Necaj	Sierra Leone Zimbabwe Guinea Albania Egypt Albania	13/05/1994 980346 - 16 1084773 - 19 950631 - 15 1074777 - 19 1068004 - 18	P P P P P P	P P P P P P	
309	Twin	2	2	Akbar Moqadar Jamal Khan Hashemi Khalid Mahmood Sikhulekile Ruth Ndlovu Concilia Mpofo Hafeez Rahman	Afghanistan Afghanistan Pakistan Zimbabwe Zimbabwe Afghanistan	1077405 - 18 813829 - 17 925126 - 15 1057958 - 18 1066821 - 18	P P P P P P	P P P P P P	
310	Twin	2	2						
311	Twin	2	2						
401	Triple	3	3						
402	Triple	3	2						
403	Triple	3	3						
404	Triple	3	3						
405	Twin	2	2						
406	Twin	2	2						

407	Twin	2	2	Mujiaba Safi Chico Kalala Lukusa	Afghanistan DRC	952615-15 1027192 - 17	P	P
408	Twin	2	2	Happy Igbenigun Shamshir Safi	Nigeria Afghanistan	997682 - 17 1027114-17	X	X
409	Twin	2	2	Armando Ulndreaj Jacob Komanzi	Albania Burundi	1026684 - 17 354152-08	P	P
410	Twin	2	2	Feroz Din Ikram Ul Haq Eric Armah	Pakistan Ghana	1046319 - 18 879194 - 14	P	P
411	Twin	2	2	Olaosebikan Popoola Cole Mohammed Tahar Benaouicha	Nigeria Algeria	907562-14 831404/12	P	P
501	Triple	3	3	Romel Sanchez Peredo Khalid Yousuf	Bolivia Somalia	1061524 - 18 1077852 - 18	P	P
502	Triple	3	3	Bilal Achi Ali Waseem	Algeria Pakistan	1036539 - 17 945507-15	P	P
503	Triple	3	3	Palwinder Kaur Rakesh Rani	India India	941610-15 941693-15	P	P
504	Triple	3	3	Tsiala Kakhiani Honar Momand	Georgian Afghanistan	912249-15 956289 - 16	P	P
505	Twin	2	2	Abdullah Chaman Toryalai Ashrafi	Afghanistan Afghanistan	1082077 - 19 350807 - 11	X	X
506	Twin	2	2	Ndrigim Quema Jannahmat Bahrami	Albania Afghanistan	1051369 - 18 1070327 - 18	X	X
507	Twin	2	2	Faryad Halimi Ravi Oojagheer	Afghanistan Mauritius	1048159 - 18 941052 - 15	P	P
508	Twin	2	2	Didier Lokamba Bosiwa Saifuddin Saleh	DR Congo Afghanistan	1052754 - 18 1028487 - 17	P	P
509	Twin	2	2	Salahuddin Safi Olivier Auglustaine	Afghanistan Guinea-Bissau	938876 - 15 814754-12	P	P
509	Twin	2	2	Sammar Ali Ismail Ziajee	Pakistan Afghanistan	942675-15 958273 - 16	P	P
509	Twin	2	2	Chari Tordi Najib Ereg	Afghanistan Somalia	304117 -11 1039013 - 18	P	P
509	Twin	2	2	Shmagi Motikulashvili	Georgia	1039001 - 18	X	X

510	Twin	2	2	Thabani Mangeria	Zimbabwe	853495-13	P	P
				Nkosiyo Mhodi	Zimbabwe	1045054 - 14	P	P
511	Twin	2	2	Mohammad Ruhul Amin	Bangladesh	913860 - 15	P	P
				Kazi Farid Alam	Bangladesh	993626 - 16	P	P
601	Twin	3	3	Aissa Hellali	Afghanistan	1067587 - 18	P	P
				Fatoh Issa	Algeria	1081853 - 19	P	P
				Mohamed Ammour	Algeria	898782-14	P	P
602	Triple	3	2	Barakat Khan	Afghanistan	864697-13	P	P
				Chadrack Mulo Miliambo	DRC	1047674 - 18	P	P
603	Triple	3	3	Muhammad Haseeb	Pakistan	1076942-18	P	P
				Md Rabiul Awal	Bangladesh	929993 - 15	P	P
				Shuhul Miah	Bangladesh	940393-15	P	P
604	Triple	3	3	Mir Muhammad Sabuj Miah	Bangladesh	940299 - 15	P	P
				Izmir Qarsi	Albania	1078155 - 18	P	P
				Ntwenhle Mahaye	South Africa	1083997 - 19	P	P
605	Triple	3	3	Umba Malonda	DRC	1047637 - 18	P	P
				Toufik Bouikni	Algeria	996077 - 17	P	X
				Abdermane Doumandi	Algeria	948710 - 15	P	P
606	Quad	4	4	Shota Ivanidze	Georgian	1040051 - 18	P	P
				Charles Nyange	Kenya	336966-10	P	P
				Abdul Satar Azizyar	Afghanistan	1068014-18	P	X
607	Twin	2	2	Helman Safi	Afghanistan	1068145-18	P	P
				Gelmaz Khushivili	Georgia	1042319 - 18	P	X
				Abdulkader Mandou	Syria	1054450-18	P	P
608	Triple	3	3	Tonbrapade Louis Ebigbagha	Nigeria	1052822 - 18	P	P
				Arber Lulaj	Albania	1082155 - 19	P	P
				Abdullah Al Lami	Iraq	1020501 - 17	P	P
				Ravil Radulin	China	1052363-18	X	X

HANRATTYS STAFF

On duty 28th June 2019

Síle Corish (DLP)

Michael Raleigh

Margaret O Rourke

Patrik Cicen

Aidan Becton

Edita Baluikaite

Justina Bildziunaite

Manager should be asked to sign this declaration.

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

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

Signed:

Sile Corbin

Position:

Manager

Date:

28/06/2019

Manager should be asked to sign this declaration.

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

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

Signed:

Sile Corbin

Position:

Manager

Date:

28/06/2019

Week 1

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MUSHROOM SOUP	VEGETABLE SOUP	LEEK SOUP	TOMATO SOUP	BROCCOLI SOUP	CHUNKY VEG SOUP	SEAFOOD CHOWDER
BIR YANI CHICKEN	CAJUN SPICED CHICKEN	CHICKEN MARYLAND	CHICKEN MARINATED	ROAST CHICKEN PIECES WITH STUFFING	TANDOORI STYLE CHICKEN	TEX MEX CHICKEN
MOROCCAN STYLE LAMB	BEEF GOULASH	LAMB BURGER	BRAISED BEEF KIDNEY	IRISH STEW	BEEF LASAGNE	BBQ BEEF RIBS
OVEN BAKED COD FILLET WITH CHEESE	PANFRIED HAKE FILLET	BATTERED COD FILLET	BAKED HAKE	BAKED SMOKED COD FILLET	BREADED HAKE FILLET	GRILLED MACKREL
ROAST VEGETABLES	FRIED PLANTAIN	SAVOURY SEMOLINA	CHICKPEAS IN BIRYANI	PORK CHOP	COUS COUS WITH PEPPERS	RATATIOULLE

WEEK 2

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
VEGETABLE SOUP	SWEETCORN SOUP	BROCCOLI SOUP	CREAMED LENTIL SOUP	Mushroom SOUP	TOMATO SOUP	MUSHROOM SOUP
GARLIC & GINGER CHICKEN	CHICKEN AND VEGETABLE BIRYANI	BBQ CHICKEN	AFRICAN CHICKEN	CAJUN STYLE CHICKEN	PIRI PIRI CHICKEN	CHICKEN WITH ITALIAN HERBS
ITALIAN STYLE BEEF CASSEROLE	LAMB MASALA	GRILLED LIVER WITH ONION GRAVY	LAMB BELLY	BEEF BURGER	BEEF & BLACK BEAN STIRFRY	LAMB STEW
DEEP FRIED COD FILLET	SEAFOOD PIE	COD IN BATTER	BAKED COD FILLET	OVEN BAKED LING	BAKED HADDOCK WITH HERB CRUMB	DUO OF FISH FILLET
SAVOURY RICE	GARLIC PASTA WITH BLACK OLIVES	SAVOURY OMELETTE	FRIED RICE	SAVOURY FRIED RICE	STUFFED PEPPERS	VEGETABLE CURRY



Áisneacht Fháilte agus Comhtháite
Reception and Integration Agency

Mr. J.P. Ryan,
Birch Rentals
The Old Creamery,
Drombana,
Co. Limerick.

13th September 2019

Dear Mr. Ryan,

The Reception and Integration Agency carried out an inspection at Hanratty's Hotel on 28th June 2019. A copy of the inspection report is enclosed for your attention and I apologise for the long delay in forwarding this to you. Please read the report carefully and do not hesitate to contact me if it contains any discrepancies.

A number of issues were identified as requiring attention during the course of the inspection and these are outlined in the report.

Please reply in writing on or before Friday 4th October 2019 outlining the steps you have taken/propose to take to address each of the issues raised.

Yours sincerely,

Bernie Loughrey
Internal Inspection Unit
Reception and Integration Agency

Hanratty's Hotel

Glentworth Street,

Limerick

061 774362

2nd October 2019

Dear Ms Loughrey,

Please be informed the following steps have been taken to address the issues raised during an inspection carried out in Hanrattys by Conor Mulvihill on the 28th June 2019

Bedroom Issues

- 204 Bathroom floor has been resealed
 - 205 Bathroom has been painted
 - 206 Area outside window has been cleaned
 - 207 Bathroom has been painted
 - 301 Room has been painted and window cleaned
 - 302 Windows have been cleaned
 - 303 Mould has been cleaned from window
 - 304 Cobwebs have been cleaned from bathroom
 - 305 Shower has been cleaned
 - 307 Blind has been replaced
 - 310 Residents have been asked to keep room tidy and offered additional storage. Window ledge has been cleaned
 - 401 Bathroom has been painted
 - 402 Window has been cleaned
 - 406 Room has been completely painted, cleaned and light shade replaced
 - 407 Bathroom has been painted
 - 408 Residents have been asked to keep room tidy. Light shade has been replaced
 - 409 Residents have been made aware of the dangers of smoking in the room. Walls have been cleaned and painted
 - 410 Walls have been cleaned and painted in both the bedroom and bathroom. Window ledge has been cleaned.
 - 411 Light shade has been replaced in bathroom
-

- **501** Wet room has been cleaned and painted and knife removed from vent. Residents have been asked to keep the room tidy.
- **502** Room has been dusted
- **503** Bathroom has been painted
- **504** Bathroom has been cleaned
- **505** Bathroom has been painted
- **506** Bathrooms has been painted
- **507** Residents have been asked to keep room tidy
- **508** It has been explained to the residents the dangers of smoking inside the building and also that it is illegal in Ireland to smoke inside.
- **509** Tinfoil was removed at time of inspection
- **510** Seal has been replaced on shower and bathroom painted
- **602** Bathroom floor has been repaired
- **606** Bedroom and bathroom has been repainted and residents have been asked to keep the room tidy. Cover from smoke alarm was removed while we were in the room.
- **608** Light cover has been replaced

I hope this is to your satisfaction and should you require any further information, please do not hesitate to contact me.

Yours sincerely,



Síle Corish
Manager