



Report of an Inspection of an International Protection Accommodation Service Centre.

Name of the Centre:	Cúirt Uisce Accommodation Centre
Centre ID:	OSV-0008858
Provider Name:	Keldesso Ltd.
Location of Centre:	Co. Galway
Type of Inspection:	Announced
Date of Inspection:	14/08/2024
Inspection ID:	MON-IPAS-1069

Context

International Protection Accommodation Service (IPAS) centres, formerly known as direct provision centres, provide accommodation for people seeking international protection in Ireland. This system was set up in 2000 in response to a significant increase in the number of people seeking asylum, and has remained widely criticised on a national¹ and international level² since that time. In response, the Irish Government took certain steps to remedy this situation.

In 2015, a working group commissioned by the Government to review the international protection process, including direct provision, published its report (McMahon report). This group recommended developing a set of standards for accommodation services and for an independent inspectorate to carry out inspections against. A standards advisory group was established in 2017 which developed the *National Standards for accommodation offered to people in the protection process* (2019). These national standards were published in 2019 and were approved by the Minister for Children, Equality, Disability, Integration and Youth for implementation in January 2021.

In February 2021, the Department of Children, Equality, Disability, Integration and Youth published a White Paper to End Direct Provision and to establish a new International Protection Support Service³. It was intended by Government at that time to end direct provision on phased basis by the end of 2024.

This planned reform was based on average projections of 3,500 international protection applicants arriving into the country annually. However, the unprecedented increase in the number of people seeking international protection in Ireland in 2022 (13,319), and the additional influx of almost 70,000 people fleeing war in the Ukraine, resulted in a revised programme of reform and timeframe for implementation.

It is within the context of an accommodation system which is recognised by Government as not fit for purpose, delayed reform, increased risk in services from overcrowding and a national housing crisis which limits residents' ability to move out of accommodation centres, that HIQA assumed the function of monitoring and inspecting permanent⁴ International Protection Accommodation Service centres against national standards on 9 January 2024.

¹ Irish Human Rights and Equality Commission (IHREC); The Office of the Ombudsman; The Ombudsman for Children

² United Nations Human Rights Committee; United Nations Committee on the Elimination of All Forms of Racial Discrimination (UNCERD)

³ Report of the Advisory Group on the Provision of Support including Accommodation to People in the Protection Process, September 2022

⁴ European Communities (Reception Conditions) (Amendment) Regulations 2023 provide HIQA with the function of monitoring accommodation centres excluding temporary and emergency accommodation

About the Service

Cúirt Uisce is an accommodation centre located in Galway. The centre consists of 13 own door family units and at the time of inspection the centre provided accommodation to 52 residents. Cúirt Uisce is located in a busy city and has good access to transport links, recreational facilities and there are restaurants and shops within walking distance.

There are parking facilities on site and access to the building is gained through the main reception. The centre is comprised of residents' apartments, a reception area, an office, a common room, a central kitchen, meeting rooms, a football pitch and a play area.

The service is managed by a centre manager and deputy manager who report to the company directors. In addition there is a reception officer, a human resources and staff supervisor, a child and youth advocacy worker, general support staff including domestic staff, security or night staff and maintenance staff.

The following information outlines some additional data on this centre:

Number of residents on the date of inspection:	52
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How we inspect

This inspection was carried out to assess compliance with the *National Standards for accommodation offered to people in the protection process* (2019). To prepare for this inspection, the inspector reviewed all information about the service. This includes any previous inspection findings, information submitted by the provider, provider representative or centre manager to HIQA and any unsolicited information since the last inspection.

As part of our inspection, where possible, we:

- talk with staff to find out how they plan, deliver and monitor the services that are provided to residents
- speak with residents to find out their experience of living in the centre
- observe practice to see if it reflects what people tell us and
- review documents to see if appropriate records are kept and that they reflect practice and what people tell us.

In order to summarise our inspection findings and to describe how well a service provider is complying with standards, we group and report under two dimensions:

1. Capacity and capability of the service:

This section describes the leadership and management of the service and how effective it is in ensuring that a good quality and safe service is being provided. It outlines how people who work in the centre are recruited and trained and whether there are appropriate systems and processes in place to underpin the safe delivery and oversight of the service.

2. Quality and safety of the service:

This section describes the service people receive and if it was of good quality and ensured people were safe. It included information about the supports available for people and the environment which they live.

A full list of all standards that were inspected against at this inspection and the dimension they are reported under can be seen in Appendix 1.

The inspection was carried out during the following times:

Date	Times of Inspection	Lead Inspector(s)	Support Inspector(s)
14/08/2024	09:30hrs-18:30hrs	1	1

What residents told us and what inspectors observed

The inspectors found, through conversations with residents, a review of documentation and observations made during the inspection, that the residents at Cúirt Uisce were receiving good supports from the staff team and service provider. Residents expressed satisfaction with the services and assistance they received at the centre and spoke highly of the staff team, director, deputy manager and centre manager.

Upon arrival at the centre, the inspectors entered through the reception lobby which had secure post boxes for residents and a welcoming reception area where residents could request information or supports as necessary. The inspectors were met by the director of services, the centre manager, reception officer and staff supervisor who directed them to a meeting room allocated to the inspectors for the course of the inspection. The inspectors had an introduction meeting with the management team and then completed a walkthrough of the buildings with some members of management.

The accommodation centre was located in Galway City within walking distance of local services and transport links. The entrance to the centre was bright and welcoming and was described by the residents as safe and secure, with ample parking and storage facilities. Residents, many of whom were families with children, consistently expressed their happiness and sense of security within the environment. The apartments had a courtyard in the centre and were surrounded by a secure wall so children were safe when playing outside.

This was the first inspection of this centre by HIQA and the centre had only recently opened. The 13 apartments were newly renovated with all new appliances and had been freshly painted. There was a mix of four, three and two bedroom apartments across three floors. The centre had 35 bedrooms and 16 bathrooms, and altogether, it accommodated a total of 52 individuals, including both adults and children.

The primary function of the centre was to provide accommodation to international protection applicants and it catered for families and couples. The resident group in the centre were from a number of different countries and as this was a new centre the inspectors found that none of the families had received refugee or subsidiary protection status.

Each apartment had a kitchen, dining area with table and chairs and a sitting room with sofa and armchairs. The kitchens in the apartments were equipped with fridge, freezer, cooker, oven and microwave. Residents could cook meals of choice and cultural preference which residents said they were very happy with. There was also a washing machine and tumble dryer in each apartment along with a bathroom or shower room.

This centre was very suitable to family living and met the needs of both the children and adults. Overall the buildings were clean and well maintained.

There was a local crèche and playschool within walking distance of the centre, operated by a private provider. The centre had a play area with toys for small children and there were goal posts in the garden for playing soccer, football and hurling and a playground nearby. The centre had adequate outdoor space, and there was car parking facilities available for residents.

In order to fully understand the lived experience of the residents, the inspectors made themselves available to the residents over the course of the inspection. The inspectors engaged with 10 adults and 21 children and it was noted that overall, they said they were very satisfied with the support they received and were treated with respect. All of the residents with whom the inspectors spoke stated that they felt safe in the centre and were satisfied with the size of the apartments and facilities provided. Overall, the feedback to the inspectors from residents was positive and they said they were very happy in the centre and they liked the fact that they could cook their food of choice in line with their cultural needs and religious beliefs. In addition, the inspectors spoke with centre managers, the staff supervisor, the reception officer and the service provider's representative.

The centre was homely and the service provided was very person-centred. There were three residents who were pregnant at the time of inspection and all were receiving appropriate support from the reception officer, management and staff team. One resident had received baby equipment in advance of the baby's birth and where a baby cot was not suitable it was replaced immediately with one more accessible to the resident's needs. These three residents also received high chairs and strollers and other baby equipment. A new family were receiving support with completing school application forms and getting school books and uniforms. There was good supports provided from external agencies including friends of the centre, the Health Service Executive (HSE) social inclusion, Jesuit refugee services, St. Vincent de Paul and the Immigrant Council.

Although the centre didn't provide transport, residents benefited from the convenience of having the train station nearby as well as local bus services. The centre was within walking distance of shops, restaurants. Leisure facilities such as playgrounds, football and basketball amenities were also within easy access.

There was information displayed in the reception area on notice boards from various support services and external agencies, for example, there was guidance available from the Irish Refugee Council and there was guidance on making complaints to the Ombudsman for Children, alongside resources from Barnardo's and The McVerry Trust

Housing Clinic. The noticeboard also provided important information for residents about their rights and entitlements.

In summary, by closely observing daily life and interactions within the centre and engaging with residents, it was evident to the inspectors that the centre was a supportive space where the staff team and managers were readily available to provide support. Interactions with residents were characterised by respect, and were person-centred in nature. The staff team, managers and service provider demonstrated a commitment to delivering a service which was of a high standard and which adopted a human rights and person-centred approach. The observations of the inspectors and the views of residents presented in this section of the report reflect the overall findings of the inspection.

The next two sections of the report present the findings of this inspection in relation to the governance and management arrangements in place in the centre, and how these arrangements impacted on the quality and safety of the service being delivered to each resident living in the centre.

Capacity and capability

This was the first inspection of Cúirt Uisce by HIQA. The inspection found that the service was effectively managed on a day-to-day basis and had a committed management and staff team in place. There were strong governance systems in place which ensured good oversight and monitoring of the services provided.

The inspectors found that the service provider and centre management team had a good understanding of the legal and policy framework governing service operations, encompassing relevant legislation, national policy, and national standards, which enhanced their effectiveness in their roles. There was a strong commitment from the management team to enhance their knowledge further and embed a positive culture for sustained compliance. To oversee quality and compliance, the service provider had employed an experienced management team including a centre manager, deputy manager, reception officer and staff supervisor.

The service provider had a clear governance structure in place. The centre was managed on a daily basis by a centre manager and deputy manager and who were supported by the reception officer and staff supervisor. The centre managers reported to the director of services.

There were formal systems and processes in place for quality improvement, auditing and reporting which ensured oversight and monitoring of service provision. The service provider had developed a weekly reporting system which informed a monthly managers' meeting and quarterly overview report. The provider had also developed an annual review template to ensure a comprehensive review at the end of each year. The provider demonstrated active engagement in learning and development concerning the implementation of the national standards and quality improvement systems, indicating a commitment to the continual improvement of the services provided in the centre.

Prior to the inspection, the service provider had conducted a self-assessment of their compliance with the national standards, demonstrating a good understanding of their obligations. The inspectors found that the service provider had developed a good internal audit system for the centre. A quality improvement plan, subsequent action plan and a progress monitor in relation to the identified actions had also been developed. The manager told the inspectors that monthly meetings with the service director were held to monitor the implementation of the quality improvement plan and to ensure that a good quality service was being provided to residents.

There was a complaints policy and process in place and a template to record complaints, however, as the centre was newly opened, there were no complaints at the time of inspection. A recording system ensured the provider had good oversight of

complaints which would inform service improvements. The complaints officer details were highlighted on the residents' noticeboard.

The service provider had a system in place to record and report on incidents that took place within the centre. In addition, the manager had developed an incident log and meeting system whereby incidents would be reviewed at incident learning forums. Although there had been no incidents at the time of the inspection, the inspectors found that the incident log developed by the manager accounted for learning from adverse events and skills development to empower staff to manage incidents effectively.

The service provider had formal arrangements in place to actively seek the views of children and adults in the form of the suggestion box and a text message group and had initiated the development of a residents' committee. This consultation system ensured that a culture of engaging with residents was embedded in practice in the centre. The manager and service provider intended the residents' committee to broadly represent the diversity of residents residing in the centre. Residents reported that they had very positive relationships with staff members, they felt listened to and that they participated in decisions which affected them.

The provider had prepared a residents' charter which clearly described the services available, and this document had been made available to residents. The charter was discussed with residents during their induction meeting at the centre. This ensured that residents had accurate information regarding the services provided to them.

The service provider had a risk management policy and critical incident policy in place, and had developed a risk register as required by the national standards. The provider had identified some risks including special reception needs and the risk ratings and control measures were appropriate to the levels of risks identified.

The service provider had a contingency and emergency preparedness plan in place for scenarios including a flood, the outbreak of a fire, outbreak of an infectious disease, and should a staff shortage occur. Residents were informed about fire drills and emergency protocols were detailed on notice boards in the centre. Fire evacuation routes and exits were clearly marked and there was appropriate fire detection, alarm and emergency lighting systems in the centre.

The practices for the recruitment of staff members in this centre were safe and effective. The inspectors found that all staff had a valid Garda vetting disclosure and staff who had resided outside of the country for a period of six months or more had an international police check completed. The service provider had a system in place to risk assess positive disclosures identified through vetting processes, where applicable.

The inspectors reviewed a sample of personnel files and found that service had an effective performance management and appraisal system in place. The staff supervisor explained that new staff members participated in appraisal meetings during their probationary period while all other staff members received an annual appraisal meeting.

The service provider had ensured that accurate personnel files were held securely and included role profiles and contracts for each staff member. In addition, the service provider had developed a supervision policy which had recently been implemented. This ensured all staff members received regular formal supervision to support them to carry out their roles.

The inspectors did a review of the training records and found that staff had received appropriate training and development opportunities to meet the needs of the residents and to promote safeguarding in the centre. Training was provided to all staff including safeguarding of vulnerable adults and Children's First, and a training needs analysis had been completed by the provider with a subsequent training plan developed.

Overall, it was found that residents were receiving a good quality and safe service that met their individual needs well. While the centre had only recently opened, the service provider had implemented good governance and management arrangements and quality assurance systems were in place which would support the delivery of safe services for residents.

Standard 1.1

The service provider performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect residents living in the accommodation centre in a manner that promotes their welfare and respects their dignity.

The service provider performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect residents living in the accommodation centre in a manner that promotes their welfare and respects their dignity. The centre was operating in compliance with the relevant regulatory requirements and the service provider had implemented monitoring and review systems to ensure residents received a good quality of care and support.

Judgment: Compliant

Standard 1.2

The service provider has effective leadership, governance arrangements and management arrangements in place and staff are clearly accountable for areas within the service.

The service provider had effective leadership, management and governance arrangements in place which clearly identified the lines of authority and accountability, specified roles and detailed responsibilities for areas of service provision. The provider had defined management roles in place, for example, there was a reception officer, centre manager and staff supervisor who had good knowledge of their individual responsibilities. The service provider had a good understanding of the standards and legislation and the role of the reception officer. Also, the service provider had developed formal quality assurance and reporting systems to support good oversight and monitoring of all aspects of service provision.

Judgment: Compliant

Standard 1.3

There is a residents' charter which accurately and clearly describes the services available to children and adults living in the centre, including how and where the services are provided.

The service provider had a residents' charter in place which was available to residents and was displayed prominently. It outlined how new residents were welcomed, the name and role of staff members in the accommodation centre and how the centre met the needs of children and adults in the centre. The residents' charter also included how each individual's dignity, equality and diversity was promoted and preserved and how all residents were treated with respect. There was information available on the complaints process, how the service provider sought the views of the residents, the code of conduct, and about how residents' personal information would be treated confidentially.

Judgment: Compliant

Standard 1.4

The service provider monitors and reviews the quality of care and experience of children and adults living in the centre and this is improved on an ongoing basis.

The service provider had implemented a monitoring and review system to ensure residents received a good quality of care and support. The inspectors reviewed a weekly report system the provider had implemented, these reports were submitted to the directors weekly and reviewed at a monthly managers meeting and also informed a quarterly overview report. Residents were consulted with regularly and there were records of this consultation informing the delivery and planning of the service.

Judgment: Compliant

Standard 1.5

Management regularly consult residents on their views and allow them to participate in decisions which affect them as much as possible.

There was evidence of the active inclusion of residents in the delivery of services. The provider had initiated a residents' committee and meetings of this group were planned. The residents did, however, inform the inspectors that they had regular informal discussions with staff and felt listened to.

Judgment: Compliant

Standard 2.1

There are safe and effective recruitment practices in place for staff and management.

The provider had ensured that there were safe and effective recruitment practices in place for staff and management. On review of documentation, the inspectors found that all staff had a valid Garda vetting disclosure and staff who had resided outside of the country for a period of six months or more had an international police check in place. A staff appraisal system had been developed by the provider and had been implemented.

Judgment: Compliant

Standard 2.2

Staff have the required competencies to manage and deliver person-centred, effective and safe services to children and adults living in the centre.

The service provider had ensured there were appropriate numbers of staff employed in the centre with regard to the number and needs of the residents and the size, layout and purpose of the service. The service provider had ensured that the staff team had the necessary experience and competencies to deliver person-centred support to the residents and to meet the individual needs of residents.

Judgment: Compliant

Standard 2.3

Staff are supported and supervised to carry out their duties to promote and protect the welfare of all children and adults living in the centre.

The provider had recently developed a system for supervision of staff, which they had begun to roll out to the staff team. The centre manager had received supervision and there was a schedule in place for the staff team to receive supervision. The provider had developed a supervision policy and was implementing this. The inspectors noted that staff members demonstrated a good understanding of their roles and responsibilities in promoting and safeguarding the welfare of all residents. Staff members spoken with said they felt supported by the centre manager and directors.

Judgment: Compliant

Standard 2.4

Continuous training is provided to staff to improve the service provided for all children and adults living in the centre.

Training was provided to all staff including safeguarding of vulnerable adults and Children's First and a training needs analysis had been completed by the provider. A training plan was developed and a record kept of all training completed. Members of the management team had received additional training in areas such as mental health awareness, conflict resolution and supervision.

Judgment: Compliant

Standard 3.1

The service provider will carry out a regular risk analysis of the service and develop a risk register.

The service provider had a risk management policy in place and included a risk register system which identified the identification and assessment of risks. The measures and actions in place to control the risks identified were also outlined.

Judgment: Compliant

Quality and Safety

This inspection found that the service provider and centre managers were dedicated to the delivery of a good quality and safe service which met the needs of all residents. Residents were supported to live independent lives and were treated with respect and dignity. Residents informed the inspectors that they felt safe living in Cúirt Uisce and felt they were provided with a good quality and safe service.

The inspectors reviewed the procedure for allocating apartments to residents at the centre and it was noted that allocation was primarily determined by residents' needs and guided by the provider's newly developed policy. Upon residents' arrival, the centre's manager and staff team made allocation decisions based on the information accessible to them at the time. They endeavoured to fulfil residents' needs by placing them in the most appropriate accommodation. The inspectors found that factors such as family links and health needs were taken into consideration, with residents who had specific health needs being given individual rooms, where possible. In cases where immediate accommodation matching the residents' needs wasn't possible upon admission, the centre manager kept track of vacancies and relocated residents to more suitable accommodations once available. The allocation policy ensured that there were clear and transparent criteria considered when making decisions regarding apartment allocation.

The inspectors found that the apartments in the accommodation centre were clean and well maintained. There was adequate storage in bedrooms and the rooms were appropriately furnished and there was adequate space in line with requirements of the national standards. The living and sleeping accommodation provided a good quality living environment. The kitchen and living space were adequately equipped to prepare and family meals. There was sufficient parking available for residents and visitors. Children had access to a play area and a football pitch on site. There were ample child friendly facilities for families locally.

Closed-circuit television (CCTV) (visual) was in place in the communal and external areas of the centre and its use was informed by data protection legislation and centre policy. Security arrangements were in place and there was adequate checks of people entering the building. There were no unnecessary restrictive practices in the centre.

The centre offered Wi-Fi internet access throughout the buildings which supported residents attending school and university. The service provider was proactive in meeting the educational needs of residents and offered support in accessing schools for children and supports for those who had returned to education. The service provider was also very aware of the need for health supports and there was a healthcare service

available for residents. A local general practitioner was allocated to residents on arrival to the centre and support was offered to access screening and vaccination clinics.

Each apartment kitchen was equipped with a washing machine and a tumble dryer and on arrival at the centre residents were initially provided with laundry detergent by the centre managers. The kitchen comprised of a fridge, freezer, microwave, toaster, kettle and pots and pans for the residents to cook and prepare food with. The inspectors observed residents cooking foods specific to their culture during the inspection and they were very happy with this and to have the opportunity to maintain their cultural traditions.

Residents were provided with bedding, towels and non-food items on arrival to the centre and received a welcome food package with all the basic food items. Thereafter food items were purchased by residents from their weekly allowance on their preloaded debit cards. The management team explained that toiletries including toothpaste, shampoo and shower gel were supplied on an ongoing basis free of charge.

Through discussion with staff and speaking with residents, the inspectors found that the general welfare of residents was well promoted and any concerns raised by residents were effectively dealt with. Residents informed the inspectors that they were treated with respect and spoke very highly of the management team. Residents were encouraged to be independent and autonomous while receiving the necessary supports. The centre manager informed the inspectors that residents' rights were promoted in the centre, there was documentary evidence that rights and entitlements were discussed with residents in the days after their arrival as part of an induction to the centre.

Residents were supported and facilitated to maintain personal and family relationships. Families were accommodated together and the family unit was further respected and promoted as residents were encouraged to receive visitors to their apartments.

The service provider had made appropriate training available to staff in relation to child protection, and had a child safeguarding statement and policy and staff had completed safeguarding of vulnerable adults training. The service provider had ensured that child and adult safeguarding concerns were identified, addressed and reported in line with national policy and legislation. No adult safeguarding concerns had been recorded or reported, and residents reported that they felt safe living in the centre. The service provider had identified a designated officer and a designated liaison person for the service and their contact details were listed on a notice board at reception.

The service provider had policies in place for the management and reporting of incidents and a system to review and learn from such events had been developed. The manager explained that an internal incident report log had been developed to identify the issues that may arise and the supports that were offered. The service was planning to review these reports at regular incident learning meetings to identify areas for service improvement.

The service provider endeavoured to promote the health and wellbeing of residents and links with local services were established and maintained where required. Residents were referred to mental health services where necessary and information about support services was available to residents. The manager informed the inspectors that the centre had good links with local general practitioners and when new residents arrived they were supported with appointments as necessary. The inspectors found that the provider was in the process of developing a substance misuse policy.

The service provider had established a policy to identify, communicate and address existing and emerging reception needs and had also employed a dedicated reception officer who had the required skills and experience to fulfil the role. The appointed reception officer possessed the necessary qualifications and was part of the senior management team and had received adequate training to become the primary point of contact for residents, staff members, and management regarding special reception needs.

The reception officer had developed a vulnerability assessment and a guidance manual and had identified some residents with special reception needs. The supports offered to these residents was documented and appropriate records maintained to effectively address and track these needs. When the staff became aware of special reception needs, they made arrangements to assist individual residents in accessing the required services.

Standard 4.1

The service provider, in planning, designing and allocating accommodation within the centre, is informed by the identified needs and best interests of residents, and the best interests of the child.

The provider had recently developed a policy and procedure for allocation of apartments to residents. Apartments were allocated having regard to the needs of the residents including health conditions, familial links, cultural, linguistic and religious backgrounds. Residents with whom the inspectors spoke stated they were happy with this approach and that the provider was accommodating in this regard.

Judgment: Compliant
<p>Standard 4.2</p> <p>The service provider makes available accommodation which is homely, accessible and sufficiently furnished.</p>
<p>The service provider had ensured that the accommodation for residents was of a good standard and the residents had sufficient space in line with the requirements of the national standards. The apartments in general were homely and well maintained and all apartments had recently been freshly painted.</p>
Judgment: Compliant
<p>Standard 4.4</p> <p>The privacy and dignity of family units is protected and promoted in accommodation centres. Children and their care-givers are provided with child friendly accommodation which respects and promotes family life and is informed by the best interests of the child.</p>
<p>The service provider had ensured that the privacy and dignity of family units was protected and promoted. Family members including children and their care givers were placed together in the accommodation centre in line with the best interest of the child.</p>
Judgment: Compliant
<p>Standard 4.5</p> <p>The accommodation centre has adequate and accessible facilities, including dedicated child-friendly, play and recreation facilities.</p>
<p>Children and young people had sustained access to a range of age-appropriate toys and games, which were in good condition and met their developmental and creative needs. There were playgrounds, football pitches and sporting clubs within walking distance and many families access these.</p>
Judgment: Compliant

Standard 4.6

The service provider makes available, in the accommodation centre, adequate and dedicated facilities and materials to support the educational development of each child and young person.

The service provider made Wi-Fi available throughout the centre to meet the educational requirements of children and young people. Staff members supported families in securing school placements for children and childcare supports.

Judgment: Compliant

Standard 4.7

The service provider commits to providing an environment which is clean and respects, and promotes the independence of residents in relation to laundry and cleaning.

Each apartment had a washing machine and tumble dryer and the service provider ensured this equipment was in working order. Residents consulted with were happy to maintain their independence in relation to laundry and cleaning.

Judgment: Compliant

Standard 4.8

The service provider has in place security measures which are sufficient, proportionate and appropriate. The measures ensure the right to privacy and dignity of residents is protected.

The inspectors found that the service provider had implemented suitable security measures within the centre which were deemed proportionate and adequate and which respected the privacy and dignity of residents. CCTV was in operation in communal spaces within the centre only and was monitored in line with the service provider's policy.

Judgment: Compliant

Standard 4.9

The service provider makes available sufficient and appropriate non-food items and products to ensure personal hygiene, comfort, dignity, health and wellbeing.

The service provider ensured sufficient and appropriate non-food items and products were available to residents. Residents were provided with bed linen and sets of towels on arrivals and these were replaced as required. They also received the basic equipment required to prepare and cook their meals and an initial food package on arrival.

Judgment: Compliant

Standard 5.1

Food preparation and dining facilities meet the needs of residents, support family life and are appropriately equipped and maintained.

Residents' apartments were adequately equipped for them to cook foods of choice and culturally sensitive meals. There were storage facilities available for residents' food and their apartment kitchens included an oven, cooker, microwave, fridge, freezer, hot water and space for preparing and eating family meals.

Judgment: Compliant

Standard 5.2

The service provider commits to meeting the catering needs and autonomy of residents which includes access to a varied diet that respects their cultural, religious, dietary, nutritional and medical requirements.

Individual apartments were appropriately equipped with cooking equipment and food storage facilities to allow the residents to cook in line with their cultural, religious, dietary, nutritional and medical requirements. Residents received a preloaded debit card which was topped up weekly and which allowed them to buy groceries from local shops and supermarkets. Residents overall expressed satisfaction with the debit card system.

Judgment: Compliant

Standard 6.1

The rights and diversity of each resident are respected, safeguarded and promoted.

The inspectors found that the provider promoted the rights of the residents and adults and children were treated with dignity, respect and kindness by the staff team employed in the centre. The staff team provided person-centred supports which met the needs of the residents. Equality was promoted in the centre in terms of religious beliefs, sexual orientation, gender and age.

Judgment: Compliant

Standard 7.1

The service provider supports and facilitates residents to develop and maintain personal and family relationships.

Residents were supported to develop and maintain personal relationships and they could invite family and friends to visit them in the centre where they could meet in their individual apartments. The family unit was respected in the centre and privacy and dignity were promoted.

Judgment: Compliant

Standard 7.2

The service provider ensures that public services, healthcare, education, community supports and leisure activities are accessible to residents, including children and young people, and where necessary through the provision of a dedicated and adequate transport.

The service provider ensured that residents had access to local recreational, educational and health and social services. Residents had easy access to local bus and rail links. External agencies attended the centre to offer support and advice around education, training, employment and local services.

Judgment: Compliant

Standard 8.1

The service provider protects residents from abuse and neglect and promotes their safety and welfare.

The service provider had policies and procedures in place to protect all residents from all forms of abuse and harm. This centre was newly opened and as such had no recorded incidents or child protection issues. However, the inspectors did review the systems the provider had implemented to record and monitor incidents and adverse events. Residents were aware of and were actively supported to engage with the complaints process. The service provider had implemented risk management systems to manage the risk in relation to resident's safety. Residents reported feeling safe living there.

Judgment: Compliant

Standard 8.2

The service provider takes all reasonable steps to protect each child from abuse and neglect and children's safety and welfare is promoted.

There was a child protection policy and child safeguarding statement in place and staff had completed training in child protection. There was an appropriately trained designated liaison person appointed. The staff team provided support and advice to parents when required and children had access to additional supports, if this was required.

Judgment: Compliant

Standard 8.3

The service provider manages and reviews adverse events and incidents in a timely manner and outcomes inform practice at all levels.

There was a system in place to report and notify all incidents and serious events in the centre. Policies and procedures were in place to ensure the timely reporting, response, review and evaluation of adverse incidents and events. The service provider had developed a system to review and trend incidents regularly and to learn from them for continuous service improvement.

Judgment: Compliant

Standard 9.1

The service provider promotes the health, wellbeing and development of each resident and they offer appropriate, person centred and needs-based support to meet any identified health or social care needs.

The service provider promoted the health, well-being and development of each resident. The staff team provided person-centred support that was appropriate and proportionate to the needs of the residents. The service provider had engaged with community healthcare services and provided information or referrals, when appropriate, to services to meet a resident's health or social care needs.

Judgment: Compliant

Standard 10.1

The service provider ensures that any special reception needs notified to them by the Department of Justice and Equality are incorporated into the provision of accommodation and associated services for the resident.

The provider ensured that any special reception needs notified to them informed the provision of accommodation and delivery of supports and services for residents. Residents received information and referrals to relevant external supports and services as necessary. The service provider offered person-centred supports and maintained records of all special reception needs requirements.

Judgment: Compliant

Standard 10.2

All staff are enabled to identify and respond to emerging and identified needs for residents.

The service provider had ensured that the staff team had received the appropriate training to support them to identify and respond to the needs of residents. The service provider had review meetings in place to support staff in responding to residents who presented with special reception needs.

Judgment: Compliant

Standard 10.3

The service provider has an established policy to identify, communicate and address existing and emerging special reception needs.

The service provider had a policy in place to identify, address and respond to existing and emerging special reception needs. A recording system was in place to ensure that the special reception needs of residents could be appropriately responded to and monitored.

Judgment: Compliant

Standard 10.4

The service provider makes available a dedicated Reception Officer, who is suitably trained to support all residents' especially those people with special reception needs both inside the accommodation centre and with outside agencies.

The service provider employed a dedicated reception officer who was qualified and experienced to support residents with special reception needs. The reception officer had engaged in additional training to further enhance their understanding of the needs of the residents in Cúirt Uisce. They had also developed a guidance manual and vulnerability assessment to support the identification of special reception needs and to enable the reception officer to become the principal point of contact for residents, staff and management.

Judgment: Compliant

Appendix 1 – Summary table of standards considered in this report

This inspection was carried out to assess compliance with the *National Standards for accommodation offered to people in the protection process*. The standards considered on this inspection were:

Standard	Judgment
Dimension: Capacity and Capability	
Theme 1: Governance, Accountability and Leadership	
Standard 1.1	Compliant
Standard 1.2	Compliant
Standard 1.3	Compliant
Standard 1.4	Compliant
Standard 1.5	Compliant
Theme 2: Responsive Workforce	
Standard 2.1	Compliant
Standard 2.2	Compliant
Standard 2.3	Compliant
Standard 2.4	Compliant
Theme 3: Contingency Planning and Emergency Preparedness	
Standard 3.1	Compliant
Dimension: Quality and Safety	
Theme 4: Accommodation	
Standard 4.1	Compliant
Standard 4.2	Compliant
Standard 4.4	Compliant
Standard 4.5	Compliant
Standard 4.6	Compliant

Standard 4.7	Compliant
Standard 4.8	Compliant
Standard 4.9	Compliant
Theme 5: Food, Catering and Cooking Facilities	
Standard 5.1	Compliant
Standard 5.2	Compliant
Theme 6: Person Centred Care and Support	
Standard 6.1	Compliant
Theme 7: Individual, Family and Community Life	
Standard 7.1	Compliant
Standard 7.2	Compliant
Theme 8: Safeguarding and Protection	
Standard 8.1	Compliant
Standard 8.2	Compliant
Standard 8.3	Compliant
Theme 9: Health, Wellbeing and Development	
Standard 9.1	Compliant
Theme 10: Identification, Assessment and Response to Special Needs	
Standard 10.1	Compliant
Standard 10.2	Compliant
Standard 10.3	Compliant
Standard 10.4	Compliant