



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

Name of the Centre:	Mosney Village
Centre ID:	OSV-0008444
Provider Name:	Mosney Unlimited Company
Location of Centre:	Co. Meath
Type of Inspection:	Announced
Date of Inspection:	11/06/2024 to 12/06/2024
Inspection ID:	MON-IPAS-1031

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

Mosney Village is located on an expansive 80-acre open green space site along the County Meath coastline. It has a recorded capacity of 977 people seeking international protection, currently housing 875 residents. The village caters to a diverse population including families, couples, and single males and females. The village is a blend of over 300 houses, bungalows, apartments, and essential facilities such as administration offices, a medical centre, a food hall, multi-function rooms, football fields, outdoor playgrounds, a church, a mosque, and green areas. A dedicated bus service, contracted to a private operator, is available for residents to travel to Drogheda town for various services.

Mosney Village is operated by a dedicated team, including a management team, an operations team, administrative staff, security personnel, and maintenance staff. The premises are privately owned, and the service is provided by Mosney Unlimited Company on a contractual basis, acting on behalf of the Department of Children, Equality, Disability, Integration and Youth.

The following information outlines some additional data on this centre:

Number of residents on the date of inspection:	875
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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)
11/06/2024	10:00 – 17:00	1	1
12/06/2024	09:30 – 15:00	1	1

What residents told us and what inspectors observed

The inspectors found, from speaking with residents and from what was observed during the inspection, that residents were well-supported and satisfied with the service and support provided. The centre was well designed and a person-centred approach to the provision of services had been adapted. The centre offered safe and comfortable accommodation that allowed residents to live independently, enjoy a good quality of life and engage in community life. There was evidence of an ongoing investment in staff development and in the improvement of facilities and amenities within the centre. Staff members supported residents to connect with the local community and develop life skills, preparing them for independent living beyond the centre. Overall, the centre demonstrated high levels of compliance with the national standards and the inspectors found that good quality and safe services were provided residents.

This inspection took place over two days. During this time, the inspectors met or spoke with 15 adults and six children who were living in the centre. In addition, 21 resident questionnaires were completed and returned to the inspectors. The inspectors also met or spoke with the service provider representative, three board directors, the centre manager, a reception officer, and separately held a focus group discussion with six other staff members.

Before entering the centre on the first day of inspection, the inspectors observed residents driving their cars in and out of the car park located at the entrance of the campus grounds where the centre was located. A new bus shelter for residents was being constructed at the periphery of the car park. While the centre was located on an 80-acre site, the centre's administration offices, facilities, and residents' living quarters were within a large, gated campus.

On arrival, the inspectors entered the centre through pedestrian access monitored by security staff who oversaw all individuals entering and exiting. The main entrance was restricted to delivery services, campus transport, and emergency vehicles. The inspectors held an introductory meeting with the management team in the administration office, followed by a walk-through of the buildings and facilities with some management team members.

On a walk around the campus grounds, the inspectors observed extensive, well-maintained open spaces, green lawns, and tree-lined avenues. The grounds maintenance was exceptional for such a large campus, with no litter and well-kept grass, shrubs and trees. Roads and pathways were also exceptionally well maintained, and the sidewalks, ramps, and pathways ensured free movement and accessibility for all residents, including those with mobility challenges.

Over two days of the inspection the inspectors observed residents engaging in daily activities, interacting with each other and staff members, and using the centre's services and facilities. The centre's courtesy vehicles, driven by security staff identified as residents' services staff, constantly moved slowly around the centre. The centre manager explained that these vehicles were used for emergency response, transporting residents with mobility issues, delivering food and mail, monitoring child safety, and escorting delivery vehicles around the campus. The inspectors also observed a fire drill taking place at one of the buildings.

While the centre provided accommodation to people seeking international protection, the inspectors found that 702 of the 875 (80%) had received refugee or subsidiary protection status, and 250 residents had received notice to leave by July 2024 to seek private accommodation outside the centre. Due to the lack of alternative accommodation options, some residents told inspectors they could not avail of more appropriate alternative accommodation and were anxious as a result.

The inspectors visited houses and apartments at the invitation of a number of residents and viewed vacant units within the centre. While some exterior paintwork was needed for specific apartments, the overall physical condition of the structures in the centre was very good. Each family or resident had private homes with keys, thus promoting independent living in a secure environment. The units observed featured fully fitted kitchens, dining areas, and private shower and bathroom facilities furnished with couches, dining tables, fitted wardrobes, and television sets. One of the houses which was ready for occupation had a folder on the dining table containing residents' welcome pack, the residents' charter and pamphlets with additional information about the centre and the local community.

The occupied homes and apartments which the inspectors observed were decorated homely and personalised to suit residents' tastes. The homes were well-maintained and had sufficient equipment for daily living and cooking. The apartments had ample space for children to play, and complete schoolwork. There was adequate storage for residents to store their clothes and belongings without impacting their living environment. Residents expressed satisfaction with their accommodation, with one wishing to stay permanently if possible. Residents praised staff for promptly addressing maintenance issues and respecting residents' privacy by seeking permission before entry.

The inspectors found that the centre's design and layout promoted residents' independence, safety, dignity, free movement, and social interaction. The centre also encouraged a normal, family-oriented lifestyle both inside and outside the living quarters. For example, the inspectors observed residents engaging with each other in a neighbourly manner while watching their children play on the open green spaces in front of their houses. The inspectors also observed residents living ordinary family routines, such as one resident watering flowers in their front garden.

The centre manager and accommodation offices were centrally located to assist residents with their daily needs. Residents spoken with found the centre manager and staff approachable and felt comfortable raising concerns with them. The inspectors observed courteous, professional and respectful interactions between residents and staff throughout the inspection.

The inspectors got to view some of the facilities available at the centre including a medical centre within the administration office block. This medical service provided by the Health Service Executive (HSE) for residents had a dedicated general practitioner and medical receptionist available Monday to Friday. Services included daily medical check-ups, health screenings, enquiries, vaccinations, and specialist referrals. There were also consultation rooms available in the medical centre for public health nurses, community mental health nurses and an advanced nurse practitioner for displaced populations who were based in the centre on a part-time basis.

A large food hall was in the centre of the campus, with shops fully stocked with a wide variety of food and non-food items essential for daily household use. Residents used a points-card system to buy from the food hall. The cost in points was displayed, and the opening times were suitable to cater to the various needs of residents. The food hall was clean, spacious, and comfortably accessible to all residents on foot or by bicycle. Residents spoken with were happy with the points system and the variety of food provided in the food hall.

Laundry facilities for residents were provided in a bright and spacious open-plan room with 80 washing machines and 80 tumble dryers available. The laundry facility was fully staffed to assist residents where necessary. The inspectors saw notices posted all around the laundry room in multiple languages outlining how to use the machines provided. In addition to tumble dryers, residents had access to washing lines outside their living quarters.

The inspection found that the provider ensured access to educational facilities for adults and children. The centre featured classrooms where adult education was provided, offering a variety of Quality and Qualification Ireland (QQI)-certified vocational courses provided by a local education and training board. The classrooms were bright, spacious, and comfortable. There was also a fully supervised computer centre with desktops and laptops, which residents used for educational support, printing, studying, online applications, meetings, interviews, training, recreational gaming, and general browsing. The centre also featured a crèche managed by a non-governmental organisation, and was equipped with modern facilities including a large indoor soft play area and an enclosed outdoor play area.

The inspectors noted that the centre grounds offered ample space for children's play and opportunities for walks and recreation. The centre also provided various leisure, recreational, and sporting facilities for all age groups, genders, and cultural needs. For instance, there were designated gym times for female residents established following residents' suggestions. A popular all-weather, floodlit multi-sports play area accommodated football and basketball. There were grass pitches where residents could play football and Gaelic games and two walking tracks had been installed in the centre to promote the health and wellbeing of the resident group. Additionally, a well-maintained playground with diverse outdoor equipment catered to younger children. During the afternoons of the inspection period, the inspectors observed children, supervised by responsible adults, happily playing in these playgrounds. Mosney Beach was a five-minute walk from the centre, accessible via a path through a woodland.

The centre offered large multi-purpose function rooms for resident use, including a bright and spacious 100-seater auditorium. This fully equipped venue served for recreational and formal events at Mosney Village, available for residents to pre-book at no cost for family celebrations, social and cultural events. Additionally, the centre provided a 600-seater church for special services attended by residents and members of the local community, and also a mosque and multi-faith prayer rooms.

A dedicated bus service contracted to a private operator provided six daily return journeys to Drogheda from the centre. The bus service allowed the residents to attend schools, third-level colleges, religious services, and medical and dental appointments in Julianstown and Drogheda.

Residents told the inspectors that they felt safe, happy, and well-supported, and appreciated the approachable and helpful manner of managers and staff. Satisfaction with the overall service was high. The length of time residents had lived in the centre varied between two weeks and eight years. They noted easy access to complaint procedures and comfort in raising issues when necessary. They felt well-informed about rights and services, though some felt the centre was unsuitable for children with special needs. Some residents identified privacy and dignity concerns, primarily related to the use of shared bedrooms for older related teenagers, as areas needing improvement. Overall, however, residents were highly complementary of the staff and management teams and the supports they received while living in the centre. They described their experience as "very good", "incredible" and one person stated that they felt "lucky" to have been provided with accommodation at Mosney village.

In summary, careful observation of everyday activities and interactions within the centre, coupled with active engagement with the residents, made it clear that the centre provided a positive environment where residents had access to supportive staff and managers. Interactions with residents were marked by warmth, respect, and a focus on individual needs. The observations of the inspectors and the residents' views presented in this section of the report reflect the overall findings of the inspection.

The following two sections of the report present the inspection findings about the centre's governance and management and how these affected the quality and safety of the delivered service.

Capacity and capability

This was the first inspection of this centre by HIQA and it found high levels of compliance with the national standards. The centre was well managed and the service provider had provided effective leadership along with robust governance and management systems which ensured a good quality and safe service was provided. These arrangements along with the human rights and person-centred approaches which were adapted in the day-to-day practices and operations of the centre resulted in positive outcomes and lived experiences for residents.

The inspection found that the service provider had a clear vision and a comprehensive understanding of their legislative and regulatory responsibilities in relation to providing accommodation to people in the international protection process. To this effect, the provider had established centre policies, systems and processes to guide staff practice, and to ensure a safe and effective delivery of services. For instance, the provider had employed a suitably qualified reception officer and established a policy to identify, communicate, and address existing and emerging special needs in the centre. While practices in the centre were good, some policies required further development to ensure a systematic and transparent support approach.

The inspection found strong leadership and decision-making at the senior level, ensuring safe and effective delivery of services to residents. A well-defined governance and management structure with clear lines of authority and accountability existed, with multiple layers of governance and designated responsibilities across service areas. The management team included a chief executive officer (CEO), centre manager, duty manager, reception officer, and departmental managers responsible for maintenance, accommodation, the food hall, security, human resources, and finance. The CEO regularly reported to the board of directors, while the centre manager, assisted by a duty manager, oversaw daily centre operations and reported to the CEO. The inspectors found that overall, accountability for the delivery of the service was clearly defined and staff working in the service were aware of their responsibilities and to whom they were accountable. The centre's organogram was freely available to residents ensuring their awareness of the governance arrangements in place in the centre.

The inspectors found that the centre's governance systems promoted a culture of individual, team and organisational accountability. The centre manager chaired weekly departmental meetings to address centre operations, including resident welfare, and the minutes of these meetings contained clear decisions and specified arising actions. While structured probationary reviews and formal annual performance appraisals were held, formal staff supervision was taking place annually, and not quarterly as required

by the national standards, however, this had been identified by the service provider as an area for improvement and a plan was in place. Members of the staff and management teams were keen to learn from the inspection process and there was a clear commitment to ongoing quality improvement across all departments of the centre.

There were effective systems in place to assure the provider that centre management had oversight over the centre's daily activities. For example, the centre operated a system where staff held daily handover meetings between shifts and circulated the shift handover summary document to the CEO, centre manager, and reception officer. While this system provided oversight of the centre's operations, improvements were required to ensure that incidents and events could be tracked over time. The inspectors were informed that an electronic case management system was being developed to provide a centralised platform to streamline, manage, and track information and data on the centre's daily activities including incidents, accidents and risk management.

The service provider had a system in place to receive and record complaints from residents, and the residents informed the inspectors of good practices in this regard. The complaints procedure was included in the residents' charter. It was also on display on notice boards, and accessible online via a quick-response code (QR code) provided in the residents' welcome pack. While complaints were resolved locally, recorded and escalated, if necessary, there was a need for the development of a centre specific complaints procedure. In addition, it was not evident whether the centre manager had determined whether the complainant was satisfied with the response.

The inspectors found that the centre management team had made significant efforts to facilitate residents' meetings, which allowed residents to provide feedback and participate in decisions that affected them. Residents' meetings were held monthly, and the reviewed minutes showed that residents raised issues and that actions were documented. A suggestion box was centrally located in the centre's post office. The opening times for the centre's post office were an example of a suggestion from residents that were considered by the provider and implemented.

Before the inspection, the service provider assessed their compliance with national standards, demonstrating an ability to identify areas which required improvement and a commitment to quality improvement. Consequently, the provider had developed and implemented appropriate policies and procedures, identifying areas needing enhancement to meet the requirements of the national standards.

A review of staff records found that all staff members were vetted per the National Vetting Bureau (Children and Vulnerable Persons) Act 2012, and dates of re-vetting

were recorded. While all staff were Garda vetted, there was a need to develop systems to assure the provider that all staff who had lived outside of Ireland had international police clearances. Personnel files were stored centrally and managed by the company's human resources department. The inspectors found that the sample of staff personnel files reviewed contained all documents required.

It was clear that all staff members met with had the required competencies to deliver person-centred and human rights-based services to residents in the centre. From speaking with residents and staff and through the observations of the inspectors, there was clear evidence of staff members demonstrating these competencies and reflecting the service's values, ethos, and vision, whose key elements were prominently displayed throughout the centre. All staff were encouraged to familiarise themselves with the national standards, had attended briefings on the standards, and were supplied with summary booklets by the service provider.

The service supported staff in continually updating and maintaining their knowledge and skills. A record was kept of all training courses completed by staff, and there was evidence that a culture of learning was promoted through training and professional development. All staff members had attended mandatory training courses, including training on adult safeguarding as outlined in legislation and national policies. However, a training needs analysis was absent to identify any training gaps.

The service had an effective risk management system in place. A risk register had been developed and was reviewed annually. A sample of control measures listed in the risk register were reviewed by the inspectors and were found to be in place in practice. The inspectors found, however, that the centre would have benefitted from an expanded risk management framework including a centre specific risk and incident management policy.

The service provider had a contingency plan to ensure continuity of services in the event of unforeseen circumstances. Fire, flood, infectious disease, and water shortage and electricity outage were cited as some of the issues that the service provider had planned for. The emergency plan accounted for the needs of all residents, including those with mobility issues or small children.

Appropriate fire safety arrangements were in place around the campus, including residents' living quarters. Fire evacuation routes and exits were marked, and the centre was equipped with appropriate fire detection, alarm, and emergency lighting systems. Residents participated in planned fire evacuation drills, and effective systems were in place to monitor the condition and status of fire safety equipment.

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 provider had a good understanding and knowledge of their responsibilities in relation to the requirements of the national standards, national policies, and the relevant legislation and regulations. The provider had ensured a suite of policies and procedures were in place, specific to the needs of residents, and it was evident that the service provided promoted and protected the human rights of residents living in the centre.

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 inspectors found that effective governance and management arrangements were in place to ensure the delivery of good-quality, person-centred care and support to residents. There was evidence of strong leadership by the management team, and all staff and the managers met with during the course of the inspection demonstrated that they had a good understanding of their roles and responsibilities. The service provider had developed effective management systems to allow for oversight of the service provided.

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 provider had prepared a residents' charter that clearly described the services available and had been made available to residents. The residents' charter was provided to residents in six languages. Additional information about the centre was available in a residents' welcome pack, centre's website, notice boards, and online via a QR code.

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 inspection found that the service provider had developed a culture of ongoing quality improvement in the centre. The provider and management team were continually looking for ways to meet the evolving needs of residents. While the provider had completed a self-assessment against the national standards, they were actively working on improvement plans and a variety of person-centred initiatives. In addition, feedback was sought from residents and welcomed by staff members and the management team.

Judgment: Compliant

Standard 2.1

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

While all staff members were Garda vetted as required, there were a small number of staff members who did not have international police checks available on file despite previously living overseas. The provider had commenced the process of obtaining these international police checks and there were references on file for the sample of staff members reviewed by the inspectors.

Judgment: Substantially 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 centre was appropriately resourced to meet the collective needs of the residents availing of its services and a competent and confident workforce was employed. The centre was appropriately resourced to meet the needs of the current number of residents. There were sufficient managers and staff on duty during business hours, at night, and at weekends.

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 developed a supervision policy and had begun its implementation at the time of the inspection. There was clear evidence to demonstrate that staff members were appropriately supervised in both a formal and informal manner while working in the centre.

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.

The centre promoted a culture of learning. All staff members received mandatory training to meet the specific needs of residents. The service supported staff in continually updating and maintaining their knowledge and skills and the impact of this training was evident in how staff members supported residents with their needs.

Judgment: Compliant

Standard 3.1

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

A risk register was in place which was comprehensive in nature and considered risks relating to residents. The inspectors found, however, that there was a need for the further development of the centre's risk management framework to include a risk and incident management policy. There were detailed plans in place to ensure the continuity of service in the event of emergency or unseen incidents.

Judgment: Substantially Compliant

Quality and Safety

This inspection found that the provider operated a good quality and safe service for residents. It was evident that considerable efforts were taken to meet the needs of residents where they were known to the provider. The provider engaged in meaningful consultation with residents and supported them to meet their needs as independently as possible. The provider adapted a model of community living in the centre, which fostered independence, ensured residents maintained and developed their skills and abilities, and facilitated integration. There was clear evidence that residents enjoyed a good quality of life while living in this centre and that the service provider had adapted a human rights based and person-centred approach to the provision of services. This resulted in a centre culture which valued and welcomed resident feedback and where individuals and families were respected and had full autonomy to live active and meaningful lives.

The inspectors found that housing allocation at the centre was based on residents' needs, with every effort made to accommodate families together and address special accessibility needs. The centre manager told the inspectors that they monitored the availability of vacancies in the centre and regularly updated the DCEDIY with details of the accommodation available. Based on this information, the DCEDIY would assign new residents to vacant house and apartments. While the centre manager monitored room availability to adjust accommodations as needed, a formal policy outlining the process and ensuring consistent implementation over time was required.

The buildings in the centre were in a good condition, reflecting its commitment to safety and quality. Equipment maintenance and servicing were appropriately managed and supported by thorough records. Clear arrangements were in place for building upkeep and general maintenance. An online facilities management application accessible via staff mobile phones enabled real-time monitoring and resolution of maintenance requests. A log of maintenance requests showed that faults and issues were promptly addressed to the satisfaction of residents. This approach demonstrated the provider's dedication to ensuring a safe and comfortable environment for residents.

The accommodation provided to residents was of a very high standard. The inspectors found that the houses and apartments were in a good condition and contained high quality furnishings, fittings and facilities for residents to live independently. The majority of the accommodation provided was in the form of two-bedroomed apartments and three-bedroomed units. Each house and apartment had an open-plan living space and kitchen. All units contained sufficient storage and additional shelving was provided when this was requested.

Residents were supported and facilitated in maintaining personal and family relationships. Families were accommodated, and the family unit was further respected and promoted. Residents were encouraged to bring their family members to their private living space for visits up to 10pm. The food hall had a seating area where residents could meet visitors outside their living quarters and there were also private spaces for residents to receive visitors or hold meetings.

Residents accessed laundry facilities located outside their living quarters. The spacious, well-ventilated laundry room at the rear of the campus housed 80 washing machines and 80 tumble dryers, supported by a staff member to assist residents where necessary. Multi-lingual notices provided usage guidelines and essential information. Adequate cleaning materials and laundry powder were available, complemented by outdoor clothes drying spaces in good weather. The facility and communal areas were consistently clean and well-maintained, ensuring resident comfort and convenience.

The provider ensured residents received two sets of bed linen and towels upon arrival, replacing them if worn or damaged. The inspectors noted that good-quality bed linen had been provided to a new resident who arrived a few weeks before the inspection. An on-site food hall stocked non-food items like nappies, wipes, feminine hygiene products, toiletries, and laundry supplies. Residents freely communicated their needs to the staff, who stocked the shop accordingly. Household cleaning materials were replenished from the centre's accommodation office, maintaining cleanliness in residents' houses and apartments.

Residents resided in self-contained houses and apartments, equipped with kitchens and dining areas, allowing them to cook and choose their diets. The provider ensured these areas were well-equipped, including adequate storage for refrigerated and dry foods. Residents utilised a points system to purchase groceries and household items from shops within the food hall, giving residents autonomy in their purchases. Residents engaged with during the inspection appreciated the variety of products in the food hall and could request additional items from staff as needed. The centre accommodated religious and cultural dietary needs, ensuring halal-certified food was available.

Residents also had opportunities to learn cooking skills essential for independent living. A classroom type kitchen located in the education and training building provided safe cooking and fire prevention training facilitated by a local education and training board offering a QQI Level 2-certified course. Additionally, residents could cultivate vegetables, herbs, and flowers in allotments and were provided with tools and materials by the centre team with the aim of fostering further self-sufficiency and skills development.

Through discussion with staff and speaking with residents, the inspectors found that the general welfare of residents was well promoted, and concerns raised by residents were effectively dealt with. Feedback procedures were in place and utilised to improve service

delivery. Residents were encouraged to be independent while receiving necessary support. Visitors were welcomed, and residents' privacy was respected during visits. The staff treated residents with dignity and respect, and referred to residents in a professional and considerate manner. Residents were informed about their rights and supported in engaging with statutory and non-statutory services. The centre facilitated religious observances, offering a 600-seater church for special masses and accommodating a mosque and multi-faith prayer rooms.

The provider ensured residents at Mosney Village had access to local educational, health, and community services. A dedicated bus service provided shuttle trips to Drogheda town seven times daily, facilitating residents' access to third-level colleges, hospitals, and medical appointments. Children attended nearby schools with daily transportation to and from Mosney Village. This integration into local schools and after-school activities supported their engagement with the broader community.

Mosney Village fostered a strong community atmosphere through diverse cultural events and activities. For example, events like 'Africa Day' were hosted in the centre a few weeks before the inspection, and various groups, such as women's groups, yoga classes, and arts and crafts sessions, catered to residents' interests. The centre also organised and funded family outings to leisure parks and historical sites around the country, enhancing community bonds.

Additionally, the provider promoted community involvement through the 'Friends of Mosney Village' group, which represented residents, local statutory services, non-governmental organisations, and community groups. The inspectors reviewed some of the records of the meeting of this network and noted that the agenda was resident focused and fostered ongoing positive engagement with the local community.

Children in the centre participated in local Gaelic football and soccer summer schools. A national youth organisation had offices in the centre, and it supported children and youth in the centre in participating in local and national events as part of its efforts to facilitate inclusion and integration.

The inspection found good safeguarding practices in place in the centre to protect both children and adults from abuse. Staff were well-trained in child protection and adult safeguarding, and records reviewed by inspectors showed that they promptly reported concerns to relevant authorities. Four designated liaison persons, one of whom was a social worker, facilitated the effective management of safeguarding concerns. Residents reported feeling safe and knew how to raise safeguarding concerns if needed. Staff from the centre's crèche provided regular parenting support to parents and assisted with school liaisons.

The provider prioritised resident health, wellbeing, and development through a comprehensive strategy focused on residents' individual and collective needs. The on-

campus medical centre provided access to a general practitioner for check-ups, screenings, vaccinations, and specialist referrals, supported by consultation rooms for public health and mental health nurses. First aid stations were strategically located and regularly maintained throughout the centre. Residents were encouraged to lead healthy lifestyles with amenities such as green spaces for walks, sports fields, and a fully equipped gym.

Additionally, the centre facilitated resident access to further education through courses offered by a local education and training board. These courses included English language, information technology, culinary skills, sewing, horticulture, and beauty. These programmes were provided on-site and aimed to enhance residents' skills and readiness for independent living. Information boards in the centre highlighted local job opportunities, training courses, child safety guidelines, and support services for domestic violence and human trafficking, providing valuable resources to residents.

The centre employed a full-time reception officer with suitable qualifications and skills to support residents with special reception requirements and additional needs. The inspectors found that the reception officer had established effective working relationships with residents, staff, support groups, and statutory and non-statutory organisations. Notably, the reception officer ensured the completion of vulnerability assessments for residents within four to six weeks of their arrival in the centre. The provider had developed a policy for identifying, communicating, and addressing ongoing and new reception needs in the centre.

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 worked with the relevant government department to ensure that residents were suitably accommodated upon admission to the centre. The centre manager provided the government department with details of the vacant homes and apartments, and new residents were placed in houses and apartments according to their known needs.

Judgment: Compliant

Standard 4.3

The privacy, dignity and safety of each resident is protected and promoted in accommodation centres. The physical environment promotes the safety, health and wellbeing of residents.

The provider ensured that the right to safety and privacy was protected and promoted in the centre. Residents had own door accommodation with keys and they had safe storage for their personal belongings in their living quarters. The facilities in the centre, including bathrooms and common rooms, were clean and well-maintained, and were accessible to residents with mobility issues.

Judgment: Compliant

Standard 4.4

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.

The provider had protected and promoted the privacy and dignity of family units. The provider promoted fully independent living. Families lived in their self-contained houses and apartments, which promoted and respected family life, and residents were satisfied with the quality of the accommodation provided.

Judgment: Compliant

Standard 4.5

The accommodation centre has adequate and accessible facilities, including dedicated child-friendly, play and recreation facilities.

The provider had ensured that children in the centre had access to adequate recreational facilities. There were play areas for children, including green spaces and sports fields. Recreational facilities in the centre catered for various age groups of children in the centre and included playgrounds, sports facilities and access to a beach.

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.

Children and young people were supported in reaching their educational potential. Children had access to sufficient living spaces to complete their homework. There was access to Wi-Fi throughout the centre, and children had access to computers outside their living quarters if needed. There was a crèche in the centre which contained sufficient materials and well equipped play areas.

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.

The laundry room in the centre was clean and well-maintained and contained adequate washers and dryers for the residents to use. All equipment was observed to be in working order and there was appropriate access to cleaning materials and laundry detergent.

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 provider ensured residents had access to a range of non-food items in the on-site shop, such as nappies and wipes, feminine hygiene products, toiletries, and laundry products. It was observed that residents were comfortable letting staff know what items they needed, and the shop was stocked accordingly. The service provider ensured sufficient and appropriate non-food items and products were available to residents.

Judgment: Compliant

Standard 5.1

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

The centre provided appropriate food preparation and dining facilities for residents. Residents had a fully-fitted kitchens in their individual houses and apartments. Residents were provided with additional support and advice on cooking and food preparation where required.

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.

Residents purchased foods of choice through a points system and had full autonomy in preparing meals, respecting their religious and cultural beliefs and dietary, nutritional, and medical requirements. The on-site shop was well-stocked and had a wide variety of food items and ingredients. This included fresh fruit, vegetables, and meat suitable for residents' dietary and cultural requirements and preferences. Residents were encouraged to give feedback on the items in the shop and specific requests were facilitated where possible.

Judgment: Compliant

Standard 6.1

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

The rights and diversity of each resident were respected, safeguarded, and promoted. Staff members treated residents with dignity, respect, and kindness. Residents felt safe and were consulted about the service and their views and feedback provided were listened to. The provider assisted residents in accessing advocacy services. Information about the centre was provided in a variety of languages.

Judgment: Compliant

Standard 7.3

The service provider supports and facilitates residents, including children and young people, to integrate and engage with the wider community, including through engagement with other agencies.

The provider facilitated the establishment of the 'Friends of Mosney Village' group to support residents in engaging and integrating with the local community. The provider also ensured residents could access relevant information about local services and facilities. The centre manager and staff supported residents in accessing resources in the local area such as education, health, and community support services. Notice boards throughout the centre provided up-to-date information about various support services which were available and how to access them.

Judgment: Compliant

Standard 7.4

Staff and management support and encourage community initiatives and a sense of community within the centre.

The provider ensured that there was a sense of community within the centre. A wide range of activities and events that reflected diverse cultures, specific interests, and events of particular importance to residents were regularly organised in the centre.

Judgment: Compliant

Standard 8.1

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

Residents told the inspectors that they felt safe living in the centre. Staff members were empowered to identify, report, and manage safeguarding concerns. There were measures in place to protect children and adults who lived in the centre. There was an adult safeguarding statement in place that outlined the general steps taken to manage safeguarding risks. There were good practices in the centre for reporting and managing safeguarding issues.

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 safety statement in place and there was a designated liaison officer appointed. Staff members had received training in child protection, and those spoken with knew how to raise concerns if necessary. There were no active child protection risks in the centre at the time of inspection.

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.

The inspectors found that significant adverse incidents were reported to the relevant department where required and appropriately managed and followed up on. It was noted that the service provider was in the process of implementing an electronic system which would allow for improved efficiency in the management and oversight of incidents, accidents and adverse events. This was due to be operational within a number of weeks of the completion of the inspection.

Judgment: Compliant

Standard 9.3

Staff and management engage with other agencies to provide information and access to a range of services for residents to promote their health, wellbeing and development. The service provider supports residents to participate in education (both formal and non-formal), training, volunteering and employment opportunities.

The inspectors found that the arrangements in the centre ensured that residents received the necessary support to meet their health needs and were provided with opportunities to participate in formal and non-formal education. Both the staff and management teams were found to have engaged with local services to facilitate residents' access to information and various services. The service provider facilitated residents' participation in defined educational and vocational skills programmes which prepared residents for life outside the centre.

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.

Where the service provider had been notified of the special reception needs of residents, it was found that appropriate plans and supports had been put in place to meet those needs. There was active involvement in this process by the centre's reception officer and the wider staff and management teams.

Judgment: Compliant

Standard 10.2

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

The staff team at the centre had engaged in appropriate training to support them in identifying and addressing the needs of residents living in the centre. Staff members had also been provided with training to support self-care and wellbeing.

Judgment: Compliant

Standard 10.3

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

The provider had implemented measures to support identifying any special reception needs that residents may have. When the provider became aware of special reception needs, they took reasonable steps to meet them and to ensure that residents could also avail of relevant support in the community.

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 had appointed a reception officer for the centre who was employed in a full-time capacity. The reception officer was appropriately qualified and an active member of the centre's management team. Residents told the inspectors that the reception officer was helpful, available, and supportive. The reception officer developed well-established links with local support services and was supporting the wider staff team to ensure that they could identify and respond to the special reception needs of residents within the centre.

Judgment: Compliant

Standard 10.5

In accommodation centres where a significant percentage of residents are deemed to be exceptionally vulnerable or in cases where a centre has been designated for exceptionally vulnerable international protection applicants, the service provider makes additional measures available.

The centre manager had identified that many residents living in the centre had special reception needs. In these cases, the provider and centre manager ensured that additional measures were available to ensure the accommodation and support best met these needs

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
Theme 2: Responsive Workforce	
Standard 2.1	Substantially Compliant
Standard 2.2	Compliant
Standard 2.3	Compliant
Standard 2.4	Compliant
Theme 3: Contingency Planning and Emergency Preparedness	
Standard 3.1	Substantially Compliant
Dimension: Quality and Safety	
Theme 4: Accommodation	
Standard 4.1	Compliant
Standard 4.3	Compliant
Standard 4.4	Compliant
Standard 4.5	Compliant
Standard 4.6	Compliant
Standard 4.7	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 7.3	Compliant
Standard 7.4	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 9.3	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
Standard 10.5	Compliant