

Monitoring of International Protection Accommodation Service Centres

Assessment-Judgment
Framework for the
Monitoring of International
Protection Accommodation
Service Centres

Version 1.4: August 2025

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory body established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

Reporting to the Minister for Health and engaging with relevant government Ministers and departments, HIQA has responsibility for the following:

- Setting standards for health and social care services Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.
- Regulating social care services The Chief Inspector of Social Services
 within HIQA is responsible for registering and inspecting residential services
 for older people and people with a disability, and children's special care units.
- Regulating health services Regulating medical exposure to ionising radiation.
- Monitoring services Monitoring the safety and quality of permanent international protection accommodation service centres, health services and children's social services against the national standards. Where necessary, HIQA investigates serious concerns about the health and welfare of people who use health services and children's social services.
- Health technology assessment Evaluating the clinical and cost effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- Health information Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland's health and social care services.
- National Care Experience Programme Carrying out national serviceuser experience surveys across a range of health and social care services, with the Department of Health and the HSE.

Visit www.higa.ie for more information.

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Revision History

Revision Date	Summary of Changes
December 2023	Document approved for publication.
January 2024	Version 1.0 — document published
April 2024	Version 1.1 — 'About HIQA' page updated and removal of duplicate entry
July 2024	Version 1.2 — formatting (page numbering)
February 2025	Version 1.3 — 'About HIQA' page updated
August 2025	Version 1.4 — Update to name of government department overseeing IPAS

Introduction to this assessment-judgment framework

The Health Information and Quality Authority (HIQA) is responsible for assessing compliance with the *National Standards for accommodation offered to people in the protection process*. HIQA has published this assessment-judgment framework to support this function.

HIQA advocates for and promotes a human-rights based approach to health and social care services that upholds the resident's core human rights principles of fairness, respect, equality, dignity and autonomy. Respecting diversity, promoting equality and treating people fairly and with dignity as well as including people in decisions about their lives promotes and supports safe and effective service delivery.

HIQA uses a standardised approach to its inspection and monitoring in order to consistently carry out its functions. We call this the Authority's Monitoring Approach (AMA). All HIQA inspection staff adhere to this approach and to any associated procedures and protocols.

This monitoring approach does not replace the professional judgment of HIQA authorised persons, referred to hereafter as inspectors. Instead, it will give inspectors a range of procedures, protocols and tools to assist them in carrying out their functions. This assessment-judgment framework and the associated guidance are some of these tools.

Applying AMA and using this assessment-judgment framework will help HIQA to ensure that each provider is treated fairly and that the assessment of compliance against the national standards is timely, consistent and responsive to any risks identified within services.

It is the responsibility of each provider and persons who participate in the management of accommodation offered to people in the protection process to ensure they are delivering a safe and effective service that complies with the standards and all other relevant legislation, ensuring residents' rights are respected and upheld.

The framework also provides transparency for service providers and the public on how HIQA assesses and makes judgments about compliance against the national standards.

Applying the Authority's Monitoring Approach does not replace or take away from a provider's responsibility to ensure that they comply with the *National Standards for accommodation offered to people in the protection process* and provide safe and

high-quality services for people accessing their services. More information on how we monitor IPAS accommodation centres can be found at www.higa.ie.

Assessment-judgment framework

There are two purposes to this assessment-judgment framework:

- It supports HIQA inspectors in gathering evidence when monitoring or assessing a service and to make judgments on compliance. The framework sets out examples of the lines of enquiry to be explored (questions to be asked) by inspectors.
- It supports providers to self-assess their own service against national standards.

Judgment descriptors

We make judgments on whether the provider is: compliant, substantially compliant, partially compliant or not compliant with the standards associated with the findings. Table 1 below shows what these levels of compliance mean. We term them 'judgment descriptors', and they are used to assess performance against each of the standards.

Table 1. Judgment descriptors

Compliant:

A judgment of compliant means that on the basis of this inspection, the service is in compliance with the relevant national standard.

Substantially compliant:

A judgment of substantially compliant means that the service meets most of the requirements of the relevant national standard, but some action is required to be fully compliant.

Partially compliant:

A judgment of partially compliant means that the service meets some of the requirements of the relevant national standard while other requirements are not met. These deficiencies, while not currently presenting significant risks, may present moderate risks which could lead to significant risks for people using the service over time if not addressed.

Not compliant:

A judgment of non-compliant means that one or more findings indicate that the relevant national standard is not being met, and that this deficiency is such that it represents a significant risk to people using the service.

HIQA inspection staff should apply the assessment-judgment framework in conjunction with the:

- National Standards for accommodation offered to people in the protection process.¹
- Directive 2013/33/EU (the recast-Reception Conditions Directive)
- European Communities (Reception Conditions) Regulations 2018 (as amended)
- European Communities (Reception Conditions) (Amendment) Regulations 2023.

In addition, the assessment-judgment framework should also be applied in conjunction with HIQA's monitoring approach policy, procedures and guidance.

How this document is structured

This assessment-judgment framework document is organised into two overarching sections which we term 'dimensions'. These are the dimensions of:

- 1. Capacity and capability
- 2. Quality and safety

Capacity and capability of the provider to deliver a safe quality service

The dimension of capacity and capability reviews the governance, leadership and management arrangements in place in the service. It considers how effective they are in ensuring that a good-quality and safe service is being sustainably provided. It outlines how people who work in the service are recruited and supported through education and training, and whether there are appropriate systems in place to underpin the safe delivery and oversight of the service.

Quality and safety of the service

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¹ These standards were developed and published by the Department of Justice and Equality.

The dimension of quality and safety reviews the experiences and support people receive on a day-to-day basis. It is a check on whether this is a good quality and caring service which ensures people are safe. It includes information about the environment where the service is provided.

Themes

In each of these dimensions are a series of what we call 'themes', or aspects of service provision, such as 'Governance, accountability and leadership' and 'Personcentred care and support'.

These dimensions and their respective themes are illustrated in Table 2 below.

Table 2. Dimensions and themes

Dimension of capacity and capability

THEME 1: Governance, Accountability and Leadership

THEME 2: Responsive Workforce

THEME 3: Contingency Planning and Emergency Preparedness

Dimension of quality and safety

THFMF 4: Accommodation

THEME 5: Food, Catering and Cooking Facilities

THEME 6: Person-centred Care and Support

THEME 7: Individual, Family and Community life

THEME 8: Safeguarding and Protection

THEME 9: Health, wellbeing and development

THEME 10: Identification, Assessment and Response to Special Needs

One dimension cannot exist without the other: service providers will never sustainably deliver a good service without having good governance and oversight,

the right resources, active use of information and a competent and confident workforce.

In general, person-centred care and support, safeguarding and protection, and better health, wellbeing and development for people living in the centre all happen because the capacity and capability arrangements are there to ensure that they happen.

In this assessment-judgment framework, lines of enquiry under each dimension and theme are set out. The overarching dimension is first listed, followed by the related theme — such as Theme 1: Governance, Accountability and Leadership. This is immediately followed by the standard number and text of the standard. Underneath are the lines of enquiry which are the questions to be addressed to assist with assessing compliance.

Section 1. Dimension of capacity and capability

This section focuses on the overall delivery of the service and how the provider is assured that a quality, safe and effective service is sustainably provided to people living in the centre.

It includes how the service provider:

- makes sure there are effective governance structures with clear lines of accountability so that all members of the workforce are aware of their responsibilities and who they are accountable to
- plans, manages and organises its workforce to ensure enough staff are available at the right time with the right skills and expertise to meet the service's current and future needs
- ensures that the necessary resources are in place to support the effective delivery of quality care and support to people using the service
- uses information to plan, deliver and manage services provided to residents to ensure the delivery of high-quality, safe and effective services.

Theme 1: Governance, Accountability and Leadership

Dimension: Capacity and capability

Theme 1: Governance, Accountability and Leadership

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.

- 1. Does the accommodation centre operate in compliance with the relevant regulatory requirements and national standards?
- 2. Has the provider notified HIQA of serious incidents in line with the requirements of regulation 27H of the European Communities (Reception Conditions) (Amendment) Regulations 2023?
- 3. Is new and existing legislation and national policy, such as Safeguarding Vulnerable Persons at Risk of Abuse 2014, the Domestic Violence Act 2018, Children First Act 2015 and Children First: National Guidance for the Protection and Welfare of Children (2017), reviewed on a regular basis to determine what is relevant to the accommodation centre, how it impacts on practice and to address any gaps in compliance?
- 4. Do staff in the accommodation centre demonstrate understanding of the relevant legislation, regulations, policies and standards for the rights and care and welfare of children and adults (residents) living in the centre, appropriate to their role, and is this reflected in all aspects of their practice?

- 5. Does the service provider cooperate and respond in a timely way to assessment, monitoring, inspection or investigation of its service, including the:
 - development and implementation of quality improvement plans where required
 - provision of information and documentation as requested?

Dimension: Capacity and capability

Theme 1: Governance, Accountability and Leadership

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.

- 1. Are there clearly defined governance arrangements and structures that set out the lines of authority and accountability, stipulate individual accountability and specify the roles and responsibilities of all staff in the service?
- 2. Are the governance arrangements and individual responsibilities explained to and understood by residents and staff?
- 3. Is there an internal management structure, which includes the reception officer, and is appropriate to the size, ethos and purpose and function of the service, and which is known to staff and residents?
- 4. Is leadership demonstrated at all levels in the service?
- 5. Is there a culture of respect for human dignity, equality and diversity and kindness?

6. Is there a manager in place with the appropriate qualifications, and or skills and experience necessary to manage the accommodation centre with regard to the size of the centre, the services it provides and the number and needs of residents?

7. Do managers:

- have experience working with residents from diverse cultural backgrounds and with protection applicants and refugees
- demonstrate an awareness of basic mental health issues and an understanding of, medical, social care and social welfare systems
- demonstrate an awareness of adult safeguarding, child welfare and protection guidance and youth work practice
- demonstrate strong communication and active listening skills
- demonstrate a compassionate and empathetic style of leadership and management which respects the dignity, equality and diversity of residents?
- 8. Is the service adequately resourced, and are the resources available effectively allocated to ensure the provision of person-centred, safe and effective services?
- 9. Are strategic and operational plans in place which set clear objectives for the service? Are these plans monitored for effectiveness and implementation and to ensure that objectives are being met?
- 10. Is a risk management framework and supporting structures in place for the identification, assessment and management of risk?
- 11. Are procedures specified in the child safeguarding statement and risk assessment in place and known to all staff and residents?

- 12. Are there systems in place to effectively manage risk, including risk to children, and is there a designated person or people to contact in an emergency?
- 13. Is there a transparent complaints process in place whereby a record maintained of all adverse events and complaints, including details of the investigation, reporting and resolution? Is this regularly reviewed and is learning implemented to improve practice in the service?
- 14. Is there a culture of safety, openness and transparency in the service that welcomes, encourages and acts on feedback from people living in the service? Are residents reassured that their perspectives are valued and that there are no adverse consequences for raising an issue or making a complaint?
- 15. Are there arrangements in place to effectively plan and manage service change, including closure of the centre?
- 16. Is there a safe and effective system in place to actively include and involve children and adults living in the accommodation centre to express their views and to encourage their participation in matters which affect them?
- 17. Is there a culture of continual quality improvement in the service, which is informed by the views of children and adults living in the accommodation centre?
- 18. Are residents living in the accommodation centre provided with all information about the service, their rights and entitlements, statutory services relevant to them, and any planned changes which may affect them, in a way they can understand?
- 19. Are there procedures in place to address issues of discrimination or violations of human rights if they occur and to actively prevent their reoccurrence?

Dimension: Capacity and capability

Theme 1: Governance, Accountability and Leadership

Standard 1.3

There is a resident 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.

- 1. Is there a resident charter in place which is provided to residents on their arrival, which is in an accessible format, and which sets out the following:
 - how new arrivals are welcomed to the accommodation centre
 - the name and role of each staff member in the accommodation centre
 - how the accommodation centre meets the needs of residents as much as possible
 - how the individual dignity, equality and diversity of each resident is promoted and preserved
 - that all residents are treated with respect for their dignity, equality and diversity
 - that all personal information is treated confidentially, other than in certain specified circumstances
 - how residents are encouraged and facilitated to give their views on an ongoing and regular basis regarding their welfare and experience of the service and how their views inform decision-making in the service
 - how residents can make a complaint, the complaints process in place, and how the outcome of any

investigation of a complaint are provided to complainants

- how residents will be effectively communicated with on events and changes in the accommodation centre
- information on routines in the accommodation centre and the service provider's expectations of residents to ensure the safety and welfare of all residents and members of staff working in the accommodation centre?
- 2. On arrival at the service, are children and adults welcomed and provided with:
 - a written description of the service in a language which they can understand
 - information on child safeguarding
 - the residents' charter
 - a welcome pack which includes information on their rights and entitlements and statutory services relevant to them
 - an orientation class in a language and format they can understand?
- 3. Do residents actively participate in the development and regular review of the above, and is their feedback taken into account in a meaningful way?
- 4. Are residents made aware of any records created by staff in respect of their personal information, and are they provided with guidance on how to access these records in line with relevant legislation?
- 5. Does the accommodation centre have a confidentiality policy which clearly outlines limitations to confidentiality, and are residents aware of this policy?

Dimension: Capacity and capability

Theme 1: Governance, Accountability and Leadership

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.

- 1. Is there a culture of active inclusion and consultation with residents in the delivery and planning of the service; for example, do staff encourage and facilitate residents to express their needs and views through different forums (individual and group), and respond to the feedback they receive?
- 2. Do the needs and views of residents inform the service at all levels, including planning, design and service delivery?
- 3. Are arrangements in place to evaluate and manage the safety and quality of the service through audit, to ensure the best outcomes for residents living in the accommodation centre?
- 4. Is there an annual review of the quality and safety of the service conducted with the active involvement of staff and residents to promote continual improvement in the service? Does the annual review of the service provided to residents inform a programme of improvement within the service?
- 5. Are residents provided with an exit document whenever they are being granted a form of protection status which will help them in their transition to life outside the service, including a guide to local services?
- 6. Is there a written description of how the centre:
 - proactively protects the human rights of its residents and staff; promotes equality of opportunity and

treatment of its staff and residents, and eliminates discrimination

- the model of care and support it delivers
- the standard of accommodation.
- the services and facilities it provides?
- 7. Does this description of the centre reflect the day-to-day operations and key policies and procedures? Is it reviewed, revised and updated in line with contractual requirements and when necessary?

Dimension: Capacity and capability

Theme 1: Governance, Accountability and Leadership

Standard 1.5

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

- 1. Is there a resident committee in place which is broadly representative of the diversity of residents and which meets regularly?
- 2. Are arrangements in place to actively seek the views of adults and children, and provide them with information in a way that is understood by all. For example, on a group or individual basis (as appropriate)?

Theme 2: Responsive workforce

Dimension: Capacity and capability

Theme 2: Responsive workforce

Standard 2.1

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

- 1. Is staff recruitment safe and in line with relevant Irish and European legislation and informed by evidence-based safeguarding and human resource practices?
- 2. Are all staff appropriately vetted by An Garda Síochána (Ireland's national police service)?
- 3. Do all staff in the service have written job descriptions which include the requirement to establish and maintain relationships with residents which are based on respect for human dignity, equality and diversity?
- 4. Are all staff, managers and volunteers orientated and inducted into all relevant aspects of the centre on taking up their respective posts?
- 5. Is there an effective and fit-for-purpose performance appraisal system in place for staff to review the skills and competencies of each staff member or manager during their probationary period, and their performance on an ongoing basis afterwards?

Dimension: Capacity and capability

Theme 2: Responsive workforce

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.

- 1. Are there 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?
- 2. Do staff have the necessary experience and competencies to meet the needs of the residents?
- 3. Does workforce planning take account of contingency cover for emergencies or an unexpected shortfall in staff cover?
- 4. Are arrangements in place to promote staff retention and continuity of staff support to ensure residents experience stability?
- 5. Is there a reliance on agency or temporary staff in the centre?
- 6. Does the service provider recruit staff with the necessary skills and experience appropriate to their role and to support them to provide services and support to residents; for example, cultural competency, an awareness of mental health issues and safeguarding, strong communication skills and a compassionate and empathetic style which respects the dignity, equality and diversity of all residents?
- 7. Where required, are staff registered with their relevant regulatory body?
- 8. Is there a written code of conduct for staff which is adhered to? Do staff also adhere to the codes of conduct

of their own professional body, association and or professional regulatory body?

Dimension: Capacity and capability

Theme 2: Responsive workforce

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.

- 1. Do staff and managers in the accommodation centre understand their roles and responsibilities, and have clear accountability and reporting lines? Are they aware of policies and procedures to be followed at all times?
- 2. Are staff and managers in the accommodation centre supported to effectively exercise their personal, professional and collective accountability to provide an effective and safe service and supports?
- 3. Are there procedures in place to protect staff, managers and volunteers and minimise risk to their safety? Where risk to staff, managers and the safety of volunteers is identified, are procedures followed and is appropriate action taken?
- 4. Do all staff receive regular formal supervision and support from managers every three months at a minimum, or more frequently if required?
- 5. Are the skills and competencies of individual staff members reviewed as part of their ongoing performance appraisal?
- 6. Is a written record kept of all supervision, support and performance appraisals, and is the record provided to staff?

- 7. Is an up to date, accurate and secure personnel file maintained for all staff and managers?
- 8. Is there a policy and procedure on protected disclosures?
 Are staff in the service aware of who they can report a protected disclosure to, and can they do so without fear of adverse consequences to themselves?

Dimension: Capacity and capability

Theme 2: Responsive Workforce

Standard 2.4

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

- 1. Have all staff been trained to provide person-centred, rights-based and culturally-competent services and supports to all residents in a kind and compassionate manner, which respects the dignity, equality and diversity of all residents?
- 2. Have all staff received appropriate training and development opportunities, equivalent to their role, to meet the needs of residents and to promote safeguarding in the centre?
- 3. Is management and supervision training provided to new managers with line management responsibility?
- 4. Is a training needs analysis undertaken periodically with all staff? Is relevant training provided as part of a continual professional development programme, taking into account the assessed needs of residents?
- 5. Are all staff trained by an appropriately qualified person in the prevention, detection and the requirement to report

- allegations of abuse, and child protection and welfare concerns, in line with legislation and national policy?
- 6. Are staff and residents aware of health and safety procedures in the accommodation centre?
- 7. Are all staff and residents aware of, and do they apply, policies, procedures, guidelines and practice documents in place in the centre; for example, a child protection and welfare policy and a complaints procedure?
- 8. Are all staff and managers provided with training and refresher training in line with the national standards?

Theme 3: Contingency Planning and Emergency Preparedness

Dimension: Capacity and capability

Theme 3: Contingency Planning and Emergency Preparedness

Standard 3.1

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

- 1. Is there a risk management policy in place that is implemented?
- 2. Does the risk management policy include a risk register system and does it address:
 - a. the ongoing identification and assessment of risks throughout the service
 - b. the measures and actions in place to control the risks identified which are regularly reviewed?
- 3. Is the centre's risk register made available for inspection, and to the Office of the Ombudsman?
- 4. Is contingency planning in place to ensure the continuity of services in the event of a disaster or unforeseen event? For example, fire, flood, lack of supply of water or electricity?
- 5. Do emergency plans take into consideration the needs of all residents including those with a disability?
- 6. Has the service provider ensured that all residents are informed about fire drills and any emergency protocol at or close to the time of their admission to the centre?

- 7. Are fire evacuation routes and exits are clearly marked throughout the centre?
- 8. Is there an appropriate fire detection, alarm and emergency lighting system in the centre, which is known to residents?
- 9. Is the centre's emergency protocol displayed throughout the centre which is accessible to people with communication needs and or language barriers?
- 10. Do residents know what to do in the event of a fire? Are they aware of the exits from their own living or sleeping quarters (single or shared and own door)? Is this clearly displayed in residents' living and or sleeping quarters and in an accessible way?

Section 2. Dimension of quality and safety

The focus of this section is about how providers achieve best possible outcomes for people using their service. This includes how people:

- make choices and are actively involved in shaping the services they receive
- are empowered to exercise their rights, achieve their personal goals, hopes, and aspirations
- receive effective person-centred care and support, at all stages of their lives
- are able to live in a safe, comfortable and homely environment
- have access to food and drink that is nutritious
- are protected from any harm or abuse.

Theme 4: Accommodation

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Are rooms allocated to residents in a fair and transparent way having regard to:
 - the needs of residents identified in the initial and any subsequent vulnerability assessment, including the resident's sexual orientation and gender identity
 - the specific health conditions or disabilities of the resident and their requirement for individual rooms

- the preference of the resident, in so far as these can be accommodated?
- 2. Is the design and allocation of the accommodation informed by:
 - familial links
 - gender
 - cultural, linguistic, religious background
 - age specific concerns
 - the availability of shared accommodation for LGBTQI+ residents?
- 3. Are effective, appropriate and timely liaison arrangements in place between the provider and the relevant government department in the event of the accommodation being unable to either meet the identified needs and best interests of residents or the best interests of the child?

Dimension: Quality and safety

Theme 4: Accommodation

Standard 4.2

The service provider makes available accommodation which is homely, accessible and sufficiently furnished.

- 1. Is there written confirmation in place of compliance with the Housing Act 1966 and building regulations? (3rd party confirmation)
- 2. Does the accommodation:

- provide a minimum space of 4.65m² for each resident per bedroom
- provide additional space for persons with a disability where required
- have a minimum bedroom ceiling height of 2.4m
- have bedrooms with sufficient space to cater for residents' assessed needs
- have bedroom fixtures and fittings that meet residents' assessed needs.
- 3. Do residents have bedrooms which:
 - facilitate the range of activities likely to be carried out
 - offer adequate floor area
 - have a well-proportioned footprint outline
 - provide good-quality living environments for residents
 - adequately accommodate appropriate furniture and equipment while allowing free circulation within that area
 - receive sufficient natural light
 - are allocated in a manner determined by the provider on the basis of fair and transparent criteria?
- 4. Is high-quality wireless Internet access available to residents throughout the centre and is information on online safety available to children, young people and their parents?
- 5. Do residents have access to a telephone in a private setting?
- 6. Do shared bedrooms for single persons contain:
 - a television
 - appropriate seating

- a table
- a bed for each person sharing
- a wardrobe or chest of drawers
- a lockable unit?
- 7. Are all people aged 15 and over provided with a bed (unless they specifically request a bunk bed)?
- 8. Has the service provider ensured that the accommodation centre complies with building regulations on accessibility for people with a disability insofar as:
- reasonable provision has been made to enable disabled persons to have safe and independent access to the centre and to those parts of the centre which it is appropriate to have access
- reasonable provisions have been made for disabled persons in terms of sanitary conveniences provided in the centre, such as toilets, urinals, sinks, showers and bathtubs?
- 9. Is the accommodation centre appropriately decorated and maintained in good structural condition?
- 10. Are arrangements in place to report maintenance needs and to ensure a prompt response?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Do all rooms (assigned to residents for their personal use; such as, bedrooms and living quarters) have a working lock?
- 2. Do residents have safe, secure and reasonable access to an adequate number of high-quality, clean and accessible bathroom facilities?
- 3. Is there a centre-specific health and safety statement in place which is known to centre staff?
- 4. Are there arrangements in place for single residents to apply for a single bedroom after nine months, which ensure they are provided with a single room within a 15-month period (in so far as it is possible)?
- 5. Are all residents provided with a bedroom locker for safe storage of personal items?
- 6. Do residents have access to a secure storage facility outside of shared areas in the service to store items such as suitcases?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Are family members, including children and their care givers, placed together in the accommodation centre and in line with the best interest of the child?
- 2. Are all families and young people provided with:
 - their own private living space in addition to their sleeping quarters
 - sleeping arrangements which promote the privacy of all family members and meet the needs of children
 - a sufficient number of suitable beds
 - an en-suite or access to a bathroom designated for their own use
 - own-door accommodation. Where own door accommodation does not include a kitchen, are basic food preparation facilities in place, such as a kettle, toaster and fridge?

Dimension: Quality and safety

Theme 4: Accommodation

Standard 4.5

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

- 1. Are residents actively included and involved on an ongoing basis in decisions about the design and planning of recreational and multi-purpose spaces for children and adults, to ensure they are accessible, well-furnished and equipped?
- 2. Are children and young people actively involved and included in decisions on safe, appropriate, secure and adequate indoor and outdoor play, sports and recreation spaces, and facilities for youth club meetings and events? Do they have access to these spaces; for example, for celebratory events?
- 3. Do children and young people have sustained access to a range of age-appropriate toys and games, which are in good condition and meet their developmental and creative needs?
- 4. Do adults have access to adequate indoor and outdoor recreation and sports facilities which meet their needs?
- 5. Are residents supported to integrate with their local community through community access to onsite facilities?
- 6. Are children and young people supported and facilitated to participate in social and recreational activities appropriate to their developmental level and age?
- 7. Are the recreational needs of children promoted through appropriate centre transport?

- 8. Are residents supported and facilitated to practise their religion and worship through the provision of a non-denominational space in the accommodation centre?
- 9. Do children and their families have access to an appropriate space to host family and friends?
- 10. Are fair and transparent processes and procedures in place for residents to access any communal or multipurpose areas?
- 11. Are all play, recreation and multipurpose spaces sufficiently furnished, fit for purpose, accessible for all residents including those with a disability, clean and regularly maintained?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Do children and young people access appropriate and adequate study and homework facilities and spaces in the accommodation centre which are:
 - adequately furnished, equipped and resourced
 - clean and fit for purpose?
- 2. Do children have access to an appropriate on-site or offsite crèche as required?
- 3. Are children facilitated to attend an appropriate off-site pre-school?

- 4. Are children and young people provided with:
 - a full-time serviced after school homework or study club or transport to and from such clubs throughout the school year
 - on-site clubs which are welcoming, age-appropriate, attractive, well heated, appropriately supervised, equipped with wireless Internet access and sufficient numbers of computers with age-appropriate and effective parental control software installed?
- 5. Are arrangements in place for the centre to support young people to access schools and other educational, mentoring and training facilities?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Are arrangements in place to ensure:
 - all common areas of the service are clean
 - residents have access to laundry facilities and provisions which meet their collective and individual needs, are well stocked and equipped, well maintained, ventilated and have adequate drainage
 - residents are actively involved in decisions about laundry provisions

residents have access to indoor and outdoor clothes drying facilities?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Are residents actively included and facilitated to participate in risk assessments related to the security of the centre and do their views inform the security measures in place; for example, wearing of uniforms, presence of security staff on site, physical barriers and or access gates in the accommodation centre?
- 2. Are all security staff trained in cultural sensitivity, equality, diversity and non-discrimination?
- 3. Are residents, staff and visitors to the centre protected from assault and other forms of violence, including sexual and gender-based assault and harassment?
- 4. Are arrangements in place to promptly address and prevent reoccurrence of incidents of assault and other forms of violence, and are they reflected in service policies and procedures? Are these measures known to residents?
- 5. Are arrangements in place to ensure the safe recruitment of all security personnel, and that all security personnel are licensed by the appropriate authority?
- 6. Is the privacy of each resident respected and upheld by the security measures in place?

- 7. Do residents have access to private visiting areas in the service?
- 8. Are policies and procedures in place for the use of closed-circuit television (CCTV) in the accommodation centre, having regard to the residents' right to privacy and safety?
- 9. Are rooms available in the accommodation centre without CCTV for residents to receive visitors and meet in private with for example, professionals and advocates?
- 10. Are information governance arrangements in place, including staff training, to ensure that the service complies with legislation, uses information ethically, and protects residents' personal information?
- 11. Are arrangements in place to ensure appropriate sharing of information, for example, for the protection of children?
- 12. Are arrangements in place for sharing and transferring residents' personal information, which clearly outline who staff can share personal information with and in what circumstances, and how this is done to protect the privacy and confidentiality of the residents concerned?
- 13. Is there a policy for the retention and destruction of records in line with legislative requirements?
- 14. Is there a policy in place for managing requests and access to information?

Dimension: Quality and safety

Theme 4: Accommodation

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.

- 1. Are residents provided with:
 - sufficient and appropriate personal hygiene products, feminine hygiene products and toiletries
 - sufficient and suitable nappies, wipes and lotions and other necessary items if required for the safe care of babies and toddlers
 - a minimum of two sets of adequate and appropriate bed linen and towels for each person on arrival at the centre
 - adequate pillows, duvets, blankets and other necessary items that are in a good condition and suited to the local climate?
- 2. Are residents facilitated to access free contraception?
- 3. Are residents informed of the availability of, and actively involved in decisions about, the non-food items available in the service?
- 4. Is the resident's preference and right to choose respected in relation to the provision of all non-food items and products?
- 5. Is the resident's right to choice, comfort, dignity, health and wellbeing promoted in the provision of non-food items and products in the accommodation centre?

Theme 5: Food, Catering and Cooking Facilities

Dimension: Quality and Safety

Theme 5: Food, Catering and Cooking Facilities

Standard 5.1

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

- 1. Do residents have access to:
 - cooking and sufficient food storage facilities in a selfcontained unit or a communal kitchen
 - cooking and dining facilities which are accessible to people with disabilities
 - the option to cook food themselves in tandem with the provider's catering option
 - adequate food preparation space
 - sufficient quantity of cooking utensils and equipment (which is culturally and religiously appropriate)
 - facilities and provisions for the making of food to take off site as necessary, such as school lunches?
- 2. Are residents actively included and involved in decisions about access to food preparation areas?

Dimension: Quality and safety

Theme 5: Food, Catering and Cooking Facilities

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.

- 1. Where a resident avails of the service provider's food catering option, are they actively included and involved in decisions about:
 - the planning and development of the 28-day menu cycle
 - the provision of adequate supplies to ensure a variety of nutritious and ethnically-appropriate food
 - the availability of healthy snacks and beverages
 - arrangements for kitchen and dining area opening times and mealtimes to ensure their needs are met; for example, study timetables and external activities
 - opening times of the centre shop (where applicable)?
- 2. Do residents who avail of the service provider's food catering option exercise choice in relation to:
 - mealtimes and menus
 - the availability of nutritious food which meets their medical, cultural, religious and dietary needs?
- 3. Does the service provider promote healthy eating and good habits?

- 4. Do residents have access to freely available drinking water outside of their living quarter?
- 5. Is all food provided by caterers on behalf of the service provider prepared by a suitably-qualified person, traceable and sourced in line with national guidelines?
- 6. Are nursing mothers and infants provided with the facilities and provisions they require?
- 7. Do residents have access to a dining hall which provides them with sufficient space to eat and facilitates both private and communal dining?

Theme 6: Person-Centred Care and Support

Dimension: Quality and safety

Theme 6: Person-Centred Care and Support

Standard 6.1

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

- 1. Are the rights of each resident protected, respected and promoted in line with national legislation and international human rights standards and legislation?
- 2. Are residents informed of their rights in an accessible and age-appropriate format, and are they supported to understand their rights?
- 3. Are residents treated with dignity, respect and kindness? Is equality promoted and respected in relation to the resident's age, gender, gender identity, sexual orientation, disability, family status, civil status, race, religious beliefs and or membership of an ethnic group?
- 4. Do residents receive, in a timely way, the appropriate assistance and support they may require to uphold their right to recognition before the law and to exercise their legal capacity? Does this include help to access legal advice and representation in any forum where their rights are being determined?
- 5. Are residents facilitated to access advocacy services, and receive information about their rights?
- 6. Are all residents treated equally? How do staff and management ensure that all residents are treated equally?
- 7. Are the preferences and needs of each resident taken into account when supports are being put in place for them, and are the outcomes of and obligations from the

- vulnerability assessment (where these outcomes are shared with the permission of the resident) considered?
- 8. Do residents have the opportunity to exercise their right to observe or abstain from religious practice in line with their wishes?
- 9. Do residents have the opportunity to exercise their right to be informed and to vote, in line with their wishes and national law, and are they supported to do so by the provider?
- 10. Do children have their:
 - rights explained to them in an age-appropriate way
 - needs and perspectives heard and considered in relation to plans for the service provided
 - right to participate in the decisions which affect them recognised and fulfilled?
- 11. Do children who identify as LGBTQI+ get the support they may require to exercise their rights?

Dimension: Quality and safety

Theme 6: Person-Centred Care and Support

Standard 6.2

The service provider respects and safeguards the privacy of each resident.

- 1. Do residents have the opportunity to be alone, and are their rights to privacy and dignity respected at all times, particularly in relation to:
 - receiving visitors
 - personal communications

- expressions of intimacy and sexuality
- personal consultations
- personal examination
- circumstances where confidential or sensitive information is being discussed
- access to bedrooms, toilets and bathrooms?
- 2. Does each resident receive enhanced support at times of acute distress, in a manner that takes account of their particular needs and preferences, and which respects their privacy and dignity?
- 3. Are residents consulted with and have their views heard in relation to the operation and delivery of the service, particularly when it impacts on their privacy, dignity and sense of home? Do the views of residents in this regard inform service improvements?
- 4. Are there arrangements in place to ensure each resident has their own bed, which is not used by another resident in their absence?
- 5. Are residents' bedrooms and or family accommodation inaccessible to others unless with their consent, with the exception of staff who require access in the event of an emergency?
- 6. Do locks fitted to doors of single occupancy bedrooms and family accommodation meet the capabilities of residents living there and fire safety guidelines?
- 7. Are the personal possessions of residents respected and where possible, do residents have facilities to store personal and important items?
- 8. If a resident has been deported, does the service provider arrange for the packaging of their belongings in a dignified manner and store them for a reasonable period of time?

- 9. Do staff demonstrate an understanding of the individual needs of residents and show respect for their dignity, modesty and privacy?
- 10. Are a resident's wishes regarding how they would like to be addressed determined and respected?
- 11. Are residents supported and facilitated to act and speak on their own behalf?
- 12. Is information shared by residents with staff treated in confidence, except when information is shared for the purpose of protecting and or safeguarding a resident or where legally required for example for the protection of a child(ren)?

Dimension: Quality and safety

Theme 6: Person-Centred Care and Support

Standard 6.3

The service provider respects and safeguards the dignity of each resident.

- 1. Does the service provider have all necessary safeguards in place to ensure residents are protected from harm, and that there is an open and supportive environment in the centre?
- 2. Is there an up-to-date statement on the safety, dignity, anti-bullying and anti-harassment policies of the service, which outlines the requirements of residents and staff to ensure a safe and respectful living environment and is such a statement accessible to all residents and staff?
- 3. Is there a system in place to address any disclosures of concern by residents in a timely way?

- 4. Do residents receive care and support at the end of their life that meets their needs and which respects their dignity and independence?
- 5. Are residents affected by bereavement and loss provided with information on support services locally and nationally, especially for those services offered free of charge or at low cost? In particular, when they are affected by the death of another resident in the accommodation centre?
- 6. Are residents who are being removed or transferred from the accommodation centre treated in a humane, dignified, proportionate and non-discriminatory way which ensures each resident's human rights are protected?
- 7. Are residents who are transferred or removed from the accommodation centre provided with sufficient information about how to contact support services they may require?

Dimension: Quality and safety

Theme 6: Person-Centred Care and Support

Standard 6.4

The service provider makes information available, and communicates this, in an accessible format which is appropriate to any special requirements of residents' communication needs.

- 1. Are residents communicated with in a way that is appropriate and accessible to their individual information and communication needs?
- 2. Are arrangements in place to ensure that the centre uses appropriately-trained interpreters and translators?

- 3. Is the consent of the resident routinely sought for the use of intermediaries to interpret, translate or represent the resident's interests?
- 4. Are there mechanisms in place to ensure children are not used by the provider as intermediaries, interpreters or translators between their parents and the centre and or external services?
- 5. In as far as is practicable, are communications by the centre provided to residents in a way they understand? Are residents' communication needs considered by the centre? How well does the centre communicate important information to residents where language barriers exist, and in particular those who communicate in lesser spoken languages?

Theme 7: Individual, Family and Community Life

Dimension: Quality and safety

Theme 7: Individual, Family and Community Life

Standard 7.1

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

- 1. Are residents' friends and family welcomed by the staff and management, and are they facilitated to participate in, and be regularly involved in residents' lives?
- 2. Are families provided with opportunities for intergenerational learning, knowledge transfer and preservation of culture?
- 3. Is family unity respected and promoted by ensuring that families of every kind are accommodated together where

- appropriate? Are family members facilitated to visit together? Are the best interests of the child considered?
- 4. Do residents receive visitors in a private area and in their private rooms, having regard to residents' privacy and safety?
- 5. Are arrangements in place to ensure visits are planned in a way that ensures residents' privacy and safety is consistently maintained; for example, during times when there are high volumes of visitors?

Dimension: Quality and safety

Theme 7: Individual, Family and Community Life

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 service.

- 1. Does the service provider facilitate residents to have appropriate access to local recreational, educational, medical, health and social care, religious and other public or private services they require?
- 2. Do residents have access to transport provided by the centre based on their reasonable needs, including any accessibility needs of people with a disability?
- 3. Is transport made available by the service provider to appropriate retail outlets to residents who require it?
- 4. Are transport plans in place which are regularly reviewed, and do reviews take into consideration the views of

residents? Do these plans cater for exceptional circumstances?

- 5. Are residents informed about all available public transport services and transport options available from the service provider?
- 6. Is documentation in place in the accommodation centre to demonstrate the roadworthiness, service history, tax and insurance of all centre-provided vehicles?
- 7. Is each centre-provided vehicle equipped with appropriate safety equipment?
- 8. Are all centre-provided vehicles driven by appropriate, vetted persons, who are insured?
- 9. Does the service provider ensure children and young people are transported to off-site crèche, pre-school, extra-curricular and socialisation activities, including youth groups where necessary?

Dimension: Quality and safety

Theme 7: Individual, Family and Community Life

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.

Lines of enquiry

1. Is there a communication strategy and plan in place to support residents to build links with the local community, including access to services and activities? Did the service provider engage with other agencies during the development of this plan? Has the service provider remained engaged with other agencies?

- 2. Is a "Friends of the Centre" group established which meets regularly and whose membership consists of residents' representatives (including children and young people and a broad representation of the diversity of residents), local statutory services and community and voluntary groups?
- 3. Are partnership agreements in place between the service provider and other organisations to facilitate residents' access to leisure centres, youth clubs and services, sports clubs or other relevant recreational facilities and voluntary groups in the community?
- 4. Are residents supported by the service provider to integrate into their local communities; for example, through the provision of language learning supports?
- 5. How are public and private spaces in the accommodation centre clearly demarcated and respected by the service provider, residents and visitors?
- 6. Are fair and transparent criteria in place to manage centre facilities, such as meeting rooms and grounds, which are available for activities to create and strengthen two-way links between residents and the local community?
- 7. Are residents adequately supported and empowered to develop skills in preparation for transitioning out of the accommodation centre?

Dimension: Quality and safety

Theme 7: Individual, Family and Community Life

Standard 7.4

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

Lines of enquiry

- 1. Has the service provider organised community activities within the centre in consultation with residents?
- 2. Do activities and events within the centre reflect and celebrate the diverse cultures, interests, age profile, identity and needs of residents?
- 3. Are groups and activities organised or managed by external groups and held within the centre in compliance with relevant policy and legislation related to protecting children and vulnerable persons?

Theme 8: Safeguarding and Protection

Dimension: Quality and safety

Theme 8: Safeguarding and Protection

Standard 8.1

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

- 1. Does the service provider have policies and procedures in place to protect all residents from all forms of abuse and harm, in line with relevant legislation and guidance, and to minimise their effects whenever they may occur? Do policies and procedures include prompt and effective mechanisms to ensure concerns identified are addressed without delay?
- 2. Are residents aware of and actively supported to engage with the complaints processes in place?
- 3. Are effective risk assessment and risk management policies and procedures in place to manage risks to residents' safety?

- 4. Are documented and effective measures taken by the provider to protect residents if a concern regarding their safety arises?
- 5. Are policies and procedures in place and implemented to address allegations of abuse and or harm?
- 6. Are policies and procedures in place to manage conflict and associated risk in the centre?
- 7. Is there a designated person in place in the centre to act as a liaison with outside agencies and a resource person for staff who may have safety concerns?
- 8. Is the service provider aware of relevant community and national support services, and is this information clearly displayed for residents and staff in the centre?
- 9. Are safe and secure storage areas available to residents for their valuables in both their rooms and elsewhere in the centre?
- 10. Are clear emergency protocols in place and are they known to residents and staff?
- 11. Are residents provided with information and skills training in relation to keeping themselves safe?
- 12. Are residents consulted on policies and procedures developed for their safeguarding and protection?

Dimension: Quality and safety

Theme 8: Safeguarding and Protection

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.

- 1. Has the service provider ensured that the centre operates in line with and complies with national policy as outlined in Children First 2017 and relevant legislation? Are parents informed of their right to contact The Child and Family Agency (Tusla) should they need to?
- 2. Do staff and managers work in partnership with children and families to promote the safety and wellbeing of children, and are all residents aware of the centre's child safeguarding policy and procedures?
- 3. Does the service provider have policies and procedures in place to protect children from all forms of abuse and neglect, and to minimise their effects whenever they may occur? Are these in line with Children First 2017 and relevant legislation and policy? Do these policies and procedures include prompt and effective mechanisms to ensure concerns are dealt with effectively? Does the service provider have clearly-defined procedures in place for the resolution of allegations of abuse by staff that prioritise the safety of children and are understood by all staff?
- 4. Does the accommodation centre have a designated liaison person (DLP) who acts in line with Children First? Is the name and contact details for the DLP prominently displayed in the in the centre?
- 5. Are there systems in place to ensure each child is accounted for? Are there policies and procedures in place

to report children missing from the centre to the relevant authorities?

- 6. Are parents supported and facilitated to provide ageappropriate supervision to children, and are there procedures in place for the care of children in a parent's absence, including arrangements between residents for the care of children?
- 7. Do the identified needs, best interest and views of children inform the development and delivery of services and supports?
- 8. Does the service provider make information available to all children regarding supports for children and young people; for example, telephone helplines and other supports in various age-appropriate formats, including posters, leaflets and online resources?

Dimension: Quality and safety

Theme 8: Safeguarding and Protection

Standard 8.3

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

- 1. Are policies and procedures in place for the timely reporting, response, review and evaluation of adverse incidents and events? Are affected residents included in any such review or evaluation?
- 2. Are adverse events treated sensitively and confidentially?
- 3. Are residents fully and openly informed when an adverse event which affects them has occurred and in a timely

way. Is information and support provided to residents as needed?

4. Are emergency contacts displayed in appropriate rooms of the centre?

Theme 9: Health, Wellbeing and Development

Dimension: Quality and safety

Theme 9: Health, Wellbeing and Development

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.

- 1. Are all residents proactively provided with the necessary information and assistance to access supports for their physical and mental health, wellbeing and development, having regard to trauma they may have possibly experienced?
- 2. Are all communications with residents in an accessible and age-appropriate format and, where practicable, appropriate to any special communication requirements; for example, residents who have language and literacy barriers or a disability?
- 3. Has the service provider established a clear referral protocol and links for residents to community or specialist services and supports?
- 4. Is the health, wellbeing and development of residents promoted and supported through a healthy diet, good nutrition, and opportunities for recreation, exercise and mental and physical activities?

- 5. Are spaces made available in the centre for private discussions between residents and health and social care and other professionals; for example, a visiting public health nurse or their legal representative?
- 6. Have specific groups of residents access to up-to-date and age-appropriate information leaflets, posters and confidential contact details on topics such as torture, domestic violence, disability, human trafficking, antibullying and online safety, older people's needs and prostitution? Is this done in a dignified way?
- 7. Do staff liaise with relevant the government departments and other bodies to ensure residents particularly those who are newly arrived are aware of their welfare and social protection rights?
- 8. Are the contact details publicly displayed for organisations or groups of people who are able to inform residents about available health, social care and support services?
- 9. Does the service provider facilitate open days where community support services come to the accommodation centre to talk and meet with residents on the support services they offer?
- 10. Do staff and managers develop and maintain links with family support services in the area?
- 11. Does the service provider support and facilitate access to preventative and early intervention family supports?
- 12. Does the service provider support parents to make decisions regarding their welfare and the welfare of their children?
- 13. Are parents fully informed by the service provider about national legislation and policy on child protection and safety and the supports available?
- 14. Are parents and guardians recognised and respected as the primary caregivers and decision-makers with regards to their children's welfare and development? Are parents provided with supports and education on acceptable parenting practice under Irish law and national policy?

- 15. Does cultural competence training provided, encompass awareness of different parenting cultures and styles, rights, equality and non-discrimination, and is it available to parents and staff and managers?
- 16. Does the service provider have arrangements in place to assist and enable residents to access medical appointments and psycho-social services and supports; for example, childcare and transport supports?
- 17. Does the service provider facilitate access to sexual, reproductive and LGBTQI+ health and family planning and crisis pregnancy information and services?
- 18. Does the service provider ensure effective hygiene and sanitary practices are in place and promoted to control the spread of infectious diseases?
- 19. Does the service provider have a substance use statement in place, in line with relevant departmental policy, and are all staff and residents advised about their rights and responsibilities in relation to this?
- 20. Do staff and managers use positive risk management strategies to identify and safely manage the risks associated with substance (such as alcohol and drugs) misuse?

Dimension: Quality and safety

Theme 9: Health, Wellbeing and Development

Standard 9.2

The service provider makes available in the accommodation centre services which support residents' physical and psychological, health, wellbeing and development, and promote a self-care approach.

- 1. Does the manager of the accommodation centre promote effective and accessible communication between residents and health and social care professionals involved in the provision of supports and treatment?
- 2. Does the provider respect each resident's right to give consent, and in the case of a child, those lawfully acting on their behalf, for care, support and treatment?
- 3. Are the wishes of each resident considered in relation to sharing of their information?
- 4. Is there an appropriate private setting for visits with health and other professionals?
- 5. Does the service provider develop and deliver initiatives to promote the health, wellbeing and development of residents, including preventative initiatives, in consultation with residents? Do residents participate in the development of these initiatives?
- 6. Do staff and managers promote healthy lifestyles, interests and wellbeing in residents by encouraging them to participate in and develop social and community activities?
- 7. Do staff and managers continually inform residents of selfcare activities available in the community, and do they facilitate residents to identify and participate in the development of suitable programmes and peer-led training that could be offered in the accommodation centre?

Dimension: Quality and safety

Theme 9: Health, wellbeing and development

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.

- 1. Are residents supported and enabled to:
 - access and participate in further education and training opportunities in the community and training provided in the centre
 - access appropriate and adequate study materials and facilities
 - participate in employment opportunities (where eligible)
 - participate in volunteering opportunities
 - develop skills in preparation for transitioning out of the centre?
- 2. Is up-to-date information available and actively provided to residents on employment, education, volunteering and training supports, services and opportunities?
- 3. Does the provider make an accessible, dedicated, local transport service available to residents, taking into consideration their needs when attending education, training, support services and volunteering opportunities?

Theme 10: Identification, assessment and response to special needs

Dimension: Quality and safety

Theme 10: Identification, Assessment and Response to Special Needs

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.

- 1. Is there a written work plan in place which outlines how the service provider will support the requirements of residents with special reception needs, which is implemented and continually reviewed for its effectiveness?
- 2. Are any special reception needs, including those identified through initial and subsequent vulnerability assessments, clearly communicated by the provider to the reception officer, to assist them in the performance of their duties, while respecting the confidentiality of the resident?
- 3. Having been notified of any special reception needs and having consulted with the resident, does the service provider put measures in place which inform the:
 - allocation of a room or rooms
 - delivery of supports and services
 - information and referrals to relevant external supports and services?
- 4. Are arrangements in place to liaise with the relevant government department if:
 - the service is unable to accommodate or cater for the special reception needs of a resident

- supports and services are not available in the locality to meet the special reception needs of a resident
- special arrangements or measures need to be put in place to meet the assessed needs of the resident?
- 5. Is there a system in place to ensure room allocation is informed by the needs of other residents when meeting the special reception needs of a resident?
- 6. Is a record kept of the special reception needs of residents notified to the provider, and how they are met, have been met or plan to be met, and is it stored securely and in a confidential manner?

Dimension: Quality and safety

Theme 10: Identification, Assessment and Response to Special Needs

Standard 10.2

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

- 1. Does each staff member receive initial and ongoing specialised training and support to identify and respond to the special reception needs and vulnerability of residents? Does the service provider maintain a written record of staff training?
- 2. Are staff debriefed in a timely manner after incidents or responding to residents in crises?
- 3. Does the service provider have measures in place to support and promote the self-care of staff who regularly deal with residents with special reception needs?

- 4. Does the service provider have measures in place to prevent work overload, burnout and vicarious trauma, including stress management training for staff and managers?
- 5. Does the service provider have measures in place to encourage and actively facilitate staff to share experiences, best practice and lessons learnt? Are the lessons learned documented and used to improve processes and delivery of supports and services within the accommodation centre?
- 6. Is the delivery of supports for people requiring special reception needs person-centred and provided in such a way as to affirm, promote and empower the person's strength and resilience?

Dimension: Quality and safety

Theme 10: Identification, Assessment and Response to Special Needs

Standard 10.3

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

- 1. Is there a systematic, fair and transparent mechanism in place to assess all residents for ongoing and or additional special reception needs, and to ensure special reception needs are identified where these needs become apparent after being placed in the centre?
- 2. Is the accommodation centre's reception officer proactive in identifying the special reception needs of residents on an ongoing basis?
- 3. Does the centre manager liaise with the relevant government department if:

- the accommodation centre is unable to accommodate or cater for the special reception needs of a resident
- supports and services are not available in the locality to meet the special reception needs of a resident
- special arrangements or measures need to be taken to accommodate or cater for the special reception needs of a resident within the accommodation centre?
- 4. Are the special reception needs of residents and how they are met, been met or are the plans to be met documented and stored in a safe and confidential manner?
- 5. Are written plans to meet the needs of vulnerable residents in place and monitored for implementation and effectiveness?
- 6. Is the relevant government department kept informed of a resident's special reception needs?
- 7. Are the special reception needs of residents responded to promptly and adequately, and are referrals made to relevant health and social care services, government agencies, statutory bodies or support organisations, as required?
- 8. Does the centre's reception officer cooperate and collaborate with providers, support organisations and statutory and non-statutory agencies to promote the health and development of residents with special reception needs, and ensure their needs are met?
- 9. Does the service provider have a mechanism in place to ensure residents with special reception needs are regularly monitored in conjunction with the centre's reception officer?
- 10. Are residents encouraged and actively supported to attend follow-up vulnerability assessments?
- 11. Are arrangements in place to assist and enable residents with special reception needs to access appropriate

supports and services, including childcare and transport supports?

12. Is information in relation to vulnerability assessments held by the provider in line with relevant legislation and centre policy?

Dimension: Quality and safety

Theme 10: Identification, Assessment and Response to Special Needs

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.

- 1. Is there a dedicated reception officer in place in the centre?
- 2. Is the reception officer appropriately qualified (a Quality and Qualifications Ireland (QQI) level 7 social care or equivalent) and skilled to identify and respond to residents with special reception needs?
- 3. Is the reception officer a member of the senior management team of the centre?
- 4. Does the reception officer receive regular external specialised training to identify and respond to residents with special reception needs, and is a written record of training attendance maintained?
- 5. Is a copy of the reception officer policy and procedure manual made available to residents? Is there a mechanism

- in place by the provider to ensure the reception officer adheres to the requirements set out in this manual?
- 6. Is the reception officer the principal point of contact for residents, staff and managers for any issues concerning special reception needs?
- 7. Has the reception officer established relationships with, and are they in regular contact with, relevant state service providers, support organisations and statutory and non-statutory agencies in the locality?
- 8. Is the relevant government department notified of the availability or otherwise of support services in the locality and in the accommodation centre?
- 9. Does the reception officer provide information and advice to residents and staff on issues about special reception needs within the accommodation centre?
- 10. Does the reception officer support other staff to ensure that they can adequately identify, refer and respond, as appropriate, to the special reception needs of residents within the accommodation centre?
- 11. Does the manager report any special reception needs of residents that become apparent after the resident has been placed in the centre to the relevant government department?
- 12. Does the manager liaise with and make recommendations to the relevant government department if they consider that a resident with special reception needs would be better accommodated or catered for in a more appropriate accommodation centre?
- 13. Are any changes to a resident's accommodation needs communicated to and discussed with the resident in a timely and appropriate manner?
- 14. Does the reception officer have links with relevant services and supports where appropriate, and in line with vulnerability assessments and the identified special needs of residents? Does the reception officer communicate

effectively with the service provider's designated liaison person in this regard where necessary?

Dimension: Quality and safety

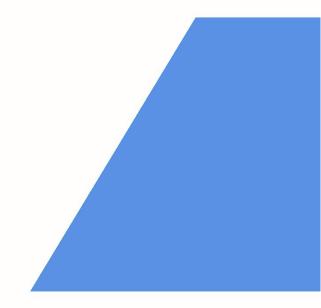
Theme 10: Identification, Assessment and Response to Special Needs

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.

- 1. Does the accommodation centre have a significant percentage of residents who are deemed to be exceptionally vulnerable or has the centre been designated for exceptionally vulnerable international protection applicants?
- 2. Are sufficient staff available with the appropriate qualifications and skills to respond to the needs of exceptionally vulnerable residents?
- 3. Is there a system in place to regularly review the staff membership and skill-mix to meet the number and assessed needs of the residents in the accommodation centre?
- 4. Are staff trained to meet the assessed needs of exceptionally vulnerable residents? Does the service provider maintain a written record of staff training?
- 5. Are staff provided with supervision and appropriate professional supports in line with their professional requirements if they are responding to exceptionally vulnerable residents?

- 6. Are residents' needs subject to review by staff to determine their ongoing needs, outline the supports required and make appropriate referrals?
- 7. Do staff work in close cooperation with local health and social care providers to ensure a resident's ongoing needs are managed in a respectful and dignified way?
- 8. Does the manager regularly liaise with the relevant government department and make recommendations as to whether the resident should remain in the accommodation centre or be supported to transfer to another accommodation centre?
- 9. Do staff demonstrate an understanding of the impact of the protection process on a resident's health and wellbeing, and do they support residents at key phases of the protection process?
- 10. In accommodation centres where a significant proportion of residents are exceptionally vulnerable or in centres which cater for such residents, are there appropriate, proportionate and rights-based safety and security measures and arrangements in place? Are these measures regularly reviewed, taking into account the views of the resident or residents, for their effectiveness, necessity and proportionality?



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