

Monitoring of International Protection Accommodation Services

Self-Assessment
Questionnaire and Quality
Improvement Tool for
International Protection
Accommodation Services

Version 2 (January 2024)

# **About the Health Information and Quality Authority**

The Health Information and Quality Authority (HIQA) is an independent statutory authority 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.

HIQA's mandate to date extends across a wide range of public, private and voluntary sector services. Reporting to the Minister for Health and engaging with the Minister for Children, Equality, Disability, Integration and Youth, 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 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 health services, children's social services and investigating as necessary serious concerns about the health and welfare of people who use these services.
- Health technology assessment Evaluating the clinical and costeffectiveness 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 services, in conjunction with the Department of Health and the HSE.

# Introduction

This self-assessment questionnaire and quality improvement tool for International Protection Accommodation Services (IPAS) has been developed by the Director of Healthcare Regulation within the Health Information and Quality Authority (HIQA) to support service providers in their ongoing assessment of compliance with *The National Standards for accommodation offered to people in the protection process*.

It is organised according to the themes and standards in *The National Standards for accommodation offered to people in the protection process* (Department of Justice and Equality, 2019). As per HIQA's monitoring approach, the standards are further organised into two overarching sections which we term 'dimensions'. These are the dimensions of:

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

The dimension of capacity and capability deals with the service provider's ability to sustainably deliver the service, and be aware of what is going on in the service.

The dimension of quality and safety reviews the experiences of people using services on a day-to-day basis and is a check on whether this a good and caring service.

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

These dimensions and their respective themes are illustrated in Table 1 below.

#### Table 1. 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**

## **THEME 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** 

# **Judgment Descriptors**

The following table shows the judgment descriptors used to assess performance against each of the 40 standards across all 10 themes. These are also the judgment descriptors that inspectors will use when they carry out inspections of IPAS centres.

## **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.

# How to complete this self-assessment and quality improvement tool

This self-assessment and quality improvement tool is an editable PDF document. This means you do not need to print it out to complete it. Simply select the options with your computer mouse and use your keyboard to enter text.

You will be asked to consider aspects of your service relevant to each of the National Standards. When you have done so under each standard, you will be asked to make a judgment on your performance against that National Standard.

You will note that you have the option of selecting 'compliant', 'substantially compliant', 'partially compliant' or 'not compliant' for each section. Where you select 'compliant' you are stating that you are in compliance with the National Standards and require no further action. However, in cases where you select 'substantially compliant', 'partially compliant' or 'not compliant', you are required to outline the actions you plan on taking to address the non-compliance in Section 2 – Quality Improvement Plan. In this section, you are required to state the action(s) required along with the timeline and the person(s) responsible for its completion.

# **Service Details**

Centre Name:	
Centre ID:	
(centre-specific ID number provided to each centre by HIQA)	
Name of person completing document:	
Role of person completing document:	
Date of completion:	

**Section 1: Self-assessment questionnaire** 

# **Dimension 1. 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.

- if the accommodation centre operates in compliance with the relevant regulatory requirements and national standards
- if HIQA has been notified of serious incidents in line with the requirements of the European Communities (Reception Conditions) (Amendment) Regulations 2023
- if 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), are 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
- if 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 that this is reflected in all aspects of their practice
- if the service provider cooperates and responds in a timely way to assessment, monitoring, inspection or investigation of its service, including the:
  - o development and implementation of quality improvement plans where required

o provision o	of information and documentation	n as requested	
	JUDGMENT – Please select whic	h best reflects your performance und	der Standard 1.1
☐ 1. Compliant	2. Substantially Compli	iant   3. Partially Compliant	☐ 4. Not Compliant
	ly outline the initiatives or measure ly outline why the service is failing t	es you have in place to meet the stand to meet this standard.	lard

## 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.

- if there are 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
- if the governance arrangement and individual responsibilities are explained to and understood by residents and staff
- if there is an internal management structure appropriate to the size, ethos and purpose and function of the service, which is known to staff and residents
- if leadership is demonstrated at all levels in the service
- if there is a culture of respect for human dignity, equality and diversity and kindness
- if there is 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
- if 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
  - o demonstrate an awareness of adult safeguarding, child welfare and protection guidance and youth work practice
  - o 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
- if the service is adequately resourced, and if the resources available are effectively allocated to ensure the provision of person-centred, safe and effective services
- if strategic and operational plans are in place which set clear objectives for the service and if these plans are monitored for effectiveness and implementation and to ensure that objectives are being met
- if information governance arrangements and policies are in place to ensure that the service complies with legislation, uses information ethically, and protects personal information held in the service
- if arrangements are in place to ensure the provider complies with data protection legislation
- if information on the use of image recording equipment by the service is clearly visible and accessible to residents and visitors
- if the centre's Child Safeguarding Statement and risk assessment is displayed and accessible in a public area of the accommodation centre
- if the centre's child protection policy available to those who request it
- if procedures specified in the child protection policy or risk assessment are in place and known to all
- if a risk management framework and supporting structures are in place for the identification, assessment and management of risk
- if procedures specified in the Child Safeguarding Statement and risk assessment are in place and known to all staff and residents

- if there are systems in place to effectively manage risk, including risk to children, and if there is a designated person or people to contact in an emergency
- if there is a transparent complaints process in place whereby a record of all adverse events and complaints is maintained, including details of the investigation, reporting and resolution and if this is regularly reviewed, and if subsequent learning is implemented to improve practice in the service
- if there is a culture of safety, openness and transparency in the service that welcomes, encourages and acts on feedback from people living in the service
- if residents are reassured that their perspectives are valued and that there are no adverse consequences for raising an issue or making a complaint
- if arrangements are in place to effectively plan and manage service change, including transition out of providing accommodation to people in the international protection process
- if there is 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
- if there is a culture of continual quality improvement in the service, which is informed by the views of children and adults living in the accommodation centre
- if residents living in the accommodation centre are 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
- if there are procedures in place to address issues of discrimination or violations of human rights if they occur and to actively prevent their reoccurrence

JUDGMENT – Please select which best reflects your performance under Standard 1.2:				
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant	
	outline the initiatives or measures you had outline why the service is failing to meet			

#### 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.

- if there is a residents' 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
  - o the name and role of each staff member in the accommodation centre
  - o how the accommodation centre meets the needs of residents as much as possible
  - o how the individual dignity, equality and diversity of each resident is promoted and preserved
  - o that all residents are treated with respect for their dignity, equality and diversity
  - o 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
  - o how residents will be effectively communicated with on events and changes in the accommodation centre
  - information on the routines in the accommodation centre and your expectations of residents to ensure the safety and welfare of all residents and members of staff working in the accommodation centre
- if on arrival at the service, children and adults are welcomed and provided with:
  - o a written description of the service in a language which they can understand
  - o information on child safeguarding
  - o the residents' charter
  - o a welcome pack which includes information on their rights and entitlements and statutory services relevant to them

o an orientation class in a language and format they can understand	
,	
<ul> <li>if residents actively participate in the development and regular review of the above, and if their feedback is taken into account in a meaningful way</li> </ul>	
<ul> <li>if residents are made aware of any records created by staff in respect of their personal information, and if they are provided with guidance on how to access these records in line with relevant legislation</li> </ul>	
• if the accommodation centre has a confidentiality policy which clearly outlines limitations to confidentiality, and if residents are aware of this policy	

JUDGMENT – Please select which best reflects your performance under Standard 1.3:				
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant	
u selected:				
	outline the initiatives or measures you h			
• 3 or 4, please briefly o	outline why the service is failing to meet	this standard.		

#### 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.

- if there is 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
- if the needs and views of residents inform the service at all levels, including planning, design and service delivery
- if arrangements are 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
- if there is 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. If the annual review of the service provided to residents inform a programme of improvement within the service
- if residents are 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
- if there is 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
  - o the model of care and support the centre delivers
  - o the standard of accommodation
  - the services and facilities the centre provides

•			reflects the day-to-day op actual requirements and w			cedures. If it is reviewed, revised
	JU	DGMENT -	- Please select which best r	eflects you	r performance under Sta	ndard 1.4:
	1. Compliant	□ <b>2.</b> 9	Substantially Compliant	□ 3. F	Partially Compliant	☐ 4. Not Compliant
If you •			nitiatives or measures you h the service is failing to meet			

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

- if there is a residents' committee in place which is broadly representative of the diversity of residents and which meets regularly
- if arrangements are in place to actively seek the views of adults and children, and they are provided with information in a way that can be understood by all. For example, on a group or individual basis (as appropriate)

JUDGMENT – Please select which best reflects your performance under Standard 1.5:					
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant		
f you selected:					
	outline the initiatives or measures you ha outline why the service is failing to meet				
5 of 4, please biletry	outline willy the service is failing to meet	uns standard.			

# **Theme 2: Responsive Workforce**

## Standard 2.1

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

- if staff recruitment is safe and in line with relevant Irish and European legislation and informed by evidence-based safeguarding and human resource practices
- if all staff are appropriately vetted by An Garda Síochána (Ireland's national police service)
- if 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
- if all staff, managers and volunteers are orientated and inducted into all relevant aspects of the centre on taking up their respective posts
- if there is 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 reviewed during their probationary period, and their performance on an ongoing basis afterwards

JUDGMENT – Please select which best reflects your performance under Standard 2.1:					
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant		
you selected:					
	outline the initiatives or measures you ha				
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.			

## 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.

- if there are 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
- if there are sufficient numbers of staff with the necessary experience and competencies to meet the needs of the residents
- if workforce planning takes account of contingency cover for emergencies or an unexpected shortfall in staff cover
- if arrangements are in place to promote staff retention and continuity of staff support to ensure residents experience stability
- if there is a reliance on agency or temporary staff in the centre
- if staff have been recruited 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
- if there is a written code of conduct for staff which is adhered to. If staff also adhere to the codes of conduct of their own professional body, association and or professional regulatory body

JUDGMENT – Please select which best reflects your performance under Standard 2.2:					
☐ 1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant
		he initiatives or measures you h vhy the service is failing to meet			

## 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.

- if staff and managers in the accommodation centre understand their roles and responsibilities, and have clear accountability and reporting lines. If they are aware of policies and procedures to be followed at all times
- if staff and managers in the accommodation centre are supported to effectively exercise their personal, professional and collective accountability to provide an effective and safe service and supports
- if there are procedures in place to protect staff, managers and volunteers and minimise the risk to their safety. If risk to staff, managers and volunteers' safety is identified, are procedures followed is appropriate action taken?
- if all staff receive regular formal supervision and support from managers every three months at a minimum, or more frequently if required
- if individual staff members' skills and competencies are reviewed as part of their ongoing performance appraisal
- if there is a written record kept of all supervision, support and performance appraisals, and is the record provided to staff
- if there is an up-to-date, accurate and secure personnel file maintained for all staff and managers
- if there is a policy and procedure on protected disclosures. If staff in the service are aware of who they can report a protected disclosure to, and can they do so without fear of adverse consequences to themselves

JUDGMENT – Please select which best reflects your performance under Standard 2.3:				
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant	
ou selected:				
	fly outline the initiatives or measures you h			
• 3 or 4, please brief	fly outline why the service is failing to meet	t this standard.		

## Standard 2.4

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

- if all staff have 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
- if all staff working in the accommodation centre have received appropriate training and development opportunities, equivalent to their role, to meet the needs of residents and to promote safeguarding in the centre
- if management and supervision training is provided to new managers with line management responsibility
- if a training needs analysis is undertaken periodically with all staff. If relevant training is provided as part of a continual professional development programme, taking into account the assessed needs of residents
- if all staff are 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
- if staff and residents are aware of health and safety procedures in the accommodation centre
- if all staff and residents are aware of policies, procedures, guidelines and practice documents in place in the centre; for example, a child protection and welfare policy and a complaints procedure. If these are implemented.
- if all staff and managers are provided with training and refresher training in line with the national standards

JUDGMENT – Please select which best reflects your performance under Standard 2.4:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
If you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly o	outline why the service is failing to meet	tilis Stallualu.	

# **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.

- if there is a risk management policy in place that is implemented
- if the risk management policy includes a risk system and does it address:
  - o the ongoing identification and assessment of risks throughout the service
  - o the measures and actions in place to control the risks identified which are regularly reviewed
- if contingency planning is 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
- if emergency plans take into consideration the needs of all residents including those with a disability
- if all residents are informed about fire drills and any emergency protocol at or close to the time of their admission to the centre
- if fire evacuation routes and exits are clearly marked throughout the centre
- if there is an appropriate fire detection, alarm and emergency lighting system in the centre, which is known to residents

•	if the centre's emerg needs and or langua		ghout the centre which is accessible	e to people with communication
•			f they are aware of the exits from the eyed in residents' living and or sleep	
	JL	UDGMENT – Please select which be	est reflects your performance under S	tandard 3.1:
	1. Compliant	2. Substantially Compliant	at 3. Partially Compliant	☐ 4. Not Compliant
•	•	utline the initiatives or measures youtline why the service is failing to n	ou have in place to meet the standard meet this standard.	

# **Dimension 2. 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.

- if rooms are 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
  - o the specific health conditions or disabilities of the resident and their requirement for individual rooms
  - $\circ$  the preference of the resident, in so far as these can be accommodated
- if the design and allocation of the accommodation is informed by:
  - o familial links
  - o gender
  - o cultural, linguistic, religious background
  - o age specific concerns
  - o the availability of shared accommodation for LGBTI+ residents

Integration and Yo	oriate and timely liaison arrangements outh in the event of the accommodationts or the best interests of the child				
JUDGMENT – Please select which best reflects your performance under Standard 4.1:					
☐ 1. Compliant	Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant		
If you selected:					
	$\prime$ outline the initiatives or measures you h	-			
<ul> <li>3 or 4, please briefly</li> </ul>	outline why the service is failing to meet	t this standard.			

#### Standard 4.2

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

- if there is written confirmation in place of compliance with the Housing Act 1966 and building regulations (3<sup>rd</sup> party confirmation)
- if the accommodation:
  - o provides a minimum space of 4.65m<sup>2</sup> for each resident per bedroom
  - o provides additional space for persons with a disability where required
  - o has a minimum bedroom ceiling height of 2.4m
  - o has bedrooms with sufficient space to cater for residents' assessed needs
  - o has bedroom fixtures and fittings that meet residents' assessed needs
- if residents have bedrooms which:
  - o facilitate the range of activities likely to be carried out
  - o offer adequate floor area
  - o have a well-proportioned footprint outline
  - o provide good-quality living environments for residents
  - o adequately accommodate appropriate furniture and equipment while allowing free circulation within that area
  - o receive sufficient natural light
  - o are allocated in a manner determined by the provider on the basis of fair and transparent criteria
- if high-quality wireless internet access is available to residents throughout the centre and if information on online safety is available to children, young people and their parents
- if residents have access to a telephone in a private setting

- if shared bedrooms for single persons contain:
  - o a television
  - o appropriate seating
  - o a table
  - o a bed for each person sharing
  - o a wardrobe/chest of drawers
  - o a lockable unit
- if all people aged 15 and over are provided with a bed (unless they specifically request a bunk bed)
- if 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
- if the accommodation centre is appropriately decorated and maintained in good structural condition
- if arrangements are in place to report maintenance needs and to ensure a prompt response

JUDGMENT – Please select which best reflects your performance under Standard 4.2:					
☐ 1. Compliant	2. Subst	antially Compliant	☐ 3. Pai	rtially Compliant	☐ 4. Not Compliant
<ul><li>you selected:</li><li>1 or 2, please briefly ou</li><li>3 or 4, please briefly ou</li></ul>					

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.

- if all rooms (assigned to residents for their personal use; such as, bedrooms and living quarters) have a working lock
- if residents have safe, secure and reasonable access to an adequate number of high-quality, clean and accessible bathroom facilities
- if there is a centre-specific health and safety statement in place which is known to centre staff
- if there are 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
- if all residents are provided with a bedroom locker for safe storage of personal items
- if residents have access to a secure storage facility outside of shared areas in the service to store items such as suitcases

JUDGMENT – Please select which best reflects your performance under Standard 4.3:			
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
u selected:			
	ly outline the initiatives or measures you h		
• 3 or 4, please briefl	ly outline why the service is failing to meet	this standard.	

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.

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

JUDGMENT – Please select which best reflects your performance under Standard 4.4:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly o	outline why the service is failing to meet	tnis standard.	

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

- if residents are 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, which are accessible, well-furnished and equipped
- if children and young people are 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. If they have access to these spaces; for example, for celebratory events
- if 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
- if adults have access to adequate indoor and outdoor recreation and sports facilities which meet their needs
- if residents are supported to integrate with their local community through community access to onsite facilities
- if children and young people are supported and facilitated to participate in social and recreational activities appropriate to their developmental level and age
- if the recreational needs of children are promoted through appropriate centre transport
- if residents are supported and facilitated to practise their religion and worship through the provision of a nondenominational space in the accommodation centre
- if children and their families have access to an appropriate space to host family and friends
- if fair and transparent processes and procedures are in place for residents to access any communal or multipurpose areas

•			nulti-purpose spaces are suffici pility, clean and regularly maint			acce	ssible for all residents
	JUDGMENT – Please select which best reflects your performance under Standard 4.5:						
	1. Compliant		2. Substantially Compliant		3. Partially Compliant		4. Not Compliant
If you			he initiatives or measures you have when the service is failing to meet t				

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.

- if children and young people have access to appropriate and adequate study and homework facilities and spaces in the accommodation centre which are:
  - o adequately furnished, equipped and resourced
  - o clean and fit for purpose
- if children have access to an appropriate on- or off-site crèche as required
- if children are facilitated to attend an appropriate off-site pre-school
- if children and young people are provided with:
  - o 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
- if arrangements are in place for the centre to support young people to access schools and other educational, mentoring and training facilities

JUDGMENT – Please select which best reflects your performance under Standard 4.6:			
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
u selected:			
	ly outline the initiatives or measures you h		
• 3 or 4, please briefl	ly outline why the service is failing to meet	this standard.	

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.

- if arrangements are in place to ensure:
  - o 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
  - o residents are actively involved in decisions about laundry provisions
  - o residents have access to indoor and outdoor clothes drying facilities

JUDGMENT – Please select which best reflects your performance under Standard 4.7:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.	

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.

- if residents are 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
- if all security staff are trained in cultural sensitivity, equality, diversity and non-discrimination, and safeguarding
- if residents, staff and visitors to the centre are protected from assault and other forms of violence, including sexual and gender-based assault and harassment
- if arrangements are 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. If these measures known to residents
- if arrangements are in place to ensure the safe recruitment of all security personnel, and that all security personnel are licensed by the appropriate authority
- if the privacy of each resident is respected and upheld by the security measures in place
- if residents have access to private visiting areas in the service
- if policies and procedures are in place for the use of closed-circuit television (CCTV) in the accommodation centre, having regard to the residents' right to privacy and safety

- if rooms are available in the accommodation centre without CCTV for residents to receive visitors and meet in private with for example, professionals and advocates
- if information governance arrangements are in place, including staff training, to ensure that the service complies with legislation, uses information ethically, and protects residents' personal information
- if arrangements are in place to ensure appropriate sharing of information, for example, for the protection of children
- if arrangements are 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
- if there is a policy for the retention and destruction of records in line with legislative requirements
- if there is a policy in place for managing requests and access to information

JUDGMENT – Please select which best reflects your performance under Standard 4.8:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.	

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

- if residents are provided with:
  - o 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
  - o a minimum of two sets of adequate and appropriate bed linen and towels for each person on arrival at the centre
  - o adequate pillows, duvets, blankets and other necessary items that are in a good condition and suited to the local climate
- if residents are facilitated to access free contraception
- if residents are informed of the availability of, and actively involved in decisions about, the non-food items available in the service
- if the resident's preference and right to choose is respected in relation to the provision of all non-food items and products
- if the resident's right to choice, comfort, dignity, health and wellbeing is promoted in the provision of non-food items and products in the accommodation centre

JUDGMENT – Please select which best reflects your performance under Standard 4.9:				
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant	
	line the initiatives or measures you ha line why the service is failing to meet			

## 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.

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

JUDGMENT – Please select which best reflects your performance under Standard 5.1:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.	

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.

- if a resident avails of the service provider's food catering option, are they actively included and involved in decisions about:
  - o the planning and development of the 28 day menu cycle
  - o the provision of adequate supplies to ensure a variety of nutritious and ethnically-appropriate food
  - o the availability of healthy snacks and beverages
  - o arrangements for opening times and mealtimes to ensure their needs are met; for example, study timetables and external activities
  - o opening times of the centre shop (where applicable)
- if residents who avail of the service provider's food catering option can exercise choice in relation to:
  - o mealtimes and menus
  - o the availability of nutritious food which meets their medical, cultural, religious and dietary needs
- if healthy eating and good habits are promoted
- if residents have access to freely available drinking water outside of their living quarter
- if all food provided by caterers is prepared by a suitably-qualified person, traceable and sourced in line with national quidelines
- if nursing mothers and infants are provided with the facilities and provisions they require

if residents have a communal dining	access to a o	dining hall which provides t	hem v	with sufficient space to eat	and facilitates both private and
JUDGMENT – Please select which best reflects your performance under Standard 5.2:					
☐ 1. Compliant	<b></b>	. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant
		initiatives or measures you h y the service is failing to meet			

## **Theme 6: Person Centred Care and Support**

#### Standard 6.1

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

- if the rights of each resident are protected, respected and promoted in line with national legislation and international human rights standards and legislation
- if residents are informed of their rights in an accessible and age-appropriate format, and are supported to understand their rights
- if residents are treated with dignity, respect and kindness. If equality is promoted and respected in relation to the residents' age, gender, gender identity, sexual orientation, disability, family status, civil status, race, religious beliefs and or membership of an ethnic group
- if 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. This includes help to access legal advice and representation in any forum where their rights are being determined
- if residents are facilitated to access advocacy services, and receive information about their rights
- if all residents are treated equally. If staff and management ensure that all residents are treated equally

- if the preferences and needs of each resident are taken into account when supports are being put in place for them, and if the outcomes of and obligations from the vulnerability assessment (where these outcomes are shared with the permission of the resident) are considered
- if residents can exercise their right to observe or abstain from religious practice in line with their wishes
- if residents can exercise their right to be informed and to vote, in line with their wishes and national law, and if they are supported to do so
- if children have their:
  - o rights explained to them in an age-appropriate way
  - o needs and perspectives heard and considered in relation to plans for the service provided
  - o right to participate in the decisions which affect them recognised and fulfilled
- if children who identify as LGBTI+ get the support they may require to exercise their rights

JUDGMENT – Please select which best reflects your performance under Standard 6.1:					
1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant
		he initiatives or measures you h why the service is failing to meet			

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

- if residents have the opportunity to be alone, and if their rights to privacy and dignity are respected at all times, particularly in relation to:
  - receiving visitors
  - personal communications
  - o expressions of intimacy and sexuality
  - personal consultations
  - o personal examination
  - o circumstances where confidential or sensitive information is being discussed
  - o access to bedrooms, toilets and bathrooms
- if each resident receives 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
- if residents are 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. If the views of residents in this regard inform service improvements
- if there are arrangements in place to ensure each resident has their own bed, which is not used by another resident in their absence
- if residents' bedrooms and or family accommodation are inaccessible to others unless with their consent, with the exception of staff who require access in the event of an emergency

- if locks fitted to doors of single occupancy bedrooms and family accommodation meet the capabilities of residents living there and fire safety guidelines
- if residents have facilities to store personal and important items
- if a resident has been deported, are their belongings packaged in a dignified manner and stored for a reasonable period of time
- if staff demonstrate an understanding of the individual needs of residents and show respect for their dignity, modesty and privacy
- if residents' wishes regarding how they would like to be addressed are determined and respected
- if residents are supported and facilitated to act and speak on their own behalf
- if information shared by residents with staff is 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)

	JUDGMENT – Please select which best	reflects your performance under Sta	andard 6.2:
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
u selected:			
	ly outline the initiatives or measures you l		
• 3 or 4, please briefl	ly outline why the service is failing to mee	et this standard.	

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

- if all necessary safeguards are in place to ensure residents are protected from harm, and that there is an open and supportive environment in the centre
- if there is 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
- if there is a system in place to address any disclosures of concern by residents in a timely way
- if there is a policy and procedure on protected disclosures. If staff in the centre are aware of who they report a protected disclosure to and if they can do so without fear of adverse consequences to themselves
- if residents receive care and support at the end of their life that meets their needs and which respects their dignity and independence
- if residents affected by bereavement and loss are 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
- if residents who are being removed or transferred from the accommodation centre are treated in a humane, dignified, proportionate and non-discriminatory way which ensures each resident's human rights are protected
- if residents who are transferred or removed from the accommodation centre are provided with sufficient information about how to contact support services they may require

	JUDGMENT – Please select which best	reflects your performance under St	andard 6.3:
1. Compliant	☐ 2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
u selected:			
	y outline the initiatives or measures you l		
• 3 or 4, please briefly	y outline why the service is failing to mee	et this standard.	

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

- if residents are communicated with in a way that is appropriate and accessible to their individual information and communication needs
- if arrangements are in place to ensure that the centre uses appropriately-trained interpreters and translators
- if the consent of the resident is routinely sought for the use of intermediaries to interpret, translate or represent the resident's interests
- if there are 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
- if, in as far as is practicable, there are communications by the centre provided to residents in a way they understand. If residents' communication needs are considered by the centre. If the centre communicates important information to residents where language barriers exist, and in particular those who communicate in lesser spoken languages

JUDGMENT – Please select which best reflects your performance under Standard 6.4:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.	

## 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.

- if residents' friends and family are welcomed by the staff and management, and if they are facilitated to participate in, and be regularly involved in residents' lives
- if families are provided with opportunities for intergenerational learning, knowledge transfer and preservation of culture
- if family unity is respected and promoted by ensuring that families of every kind are accommodated together where appropriate. If family members are facilitated to visit together. If the best interests of the child is considered
- if residents can receive visitors in a private area and in their private rooms, having regard to residents' privacy and safety
- if arrangements are 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

JUDGMENT – Please select which best reflects your performance under Standard 7.1:			
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
you selected:			
	outline the initiatives or measures you ha		
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.	

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.

- if residents are facilitated to have appropriate access to local recreational, educational, medical, health and social care, religious and other public or private services they require
- if residents have access to centre provided transport provided based on their needs, including any accessibility needs of people with a disability
- if transport is made available to appropriate retail outlets to residents who require it
- if transport plans are in place which are regularly reviewed, and if reviews take into consideration the views of residents. If these plans cater for exceptional circumstances
- if residents are informed about all available public transport services and transport options available from the centre
- if documentation is in place in the accommodation centre to demonstrate the roadworthiness, service history, tax and insurance of all centre-provided vehicles
- if each centre-provided vehicle is equipped with appropriate safety equipment
- if all centre-provided vehicles are driven by appropriate, vetted persons, who are insured
- if children and young people are transported to off-site crèche, pre-school, extra-curricular and socialisation activities, including youth groups where necessary

JUDGMENT – Please select which best reflects your performance under Standard 7.2:					
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant		
<ul> <li>you selected:</li> <li>1 or 2, please briefly outline the initiatives or measures you have in place to meet the standard</li> <li>3 or 4, please briefly outline why the service is failing to meet this standard.</li> </ul>					

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.

- if there is a communication strategy and plan in place to support residents to build links with the local community, including access to services and activities. If other agencies were engaged with during the development of this plan. If there is ongoing engagement with other agencies
- if a "Friends of the Centre" Group is 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
- if partnership agreements are in place with 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
- if residents are supported to integrate into their local communities; for example, through the provision of language learning supports
- if public and private spaces in the accommodation centre are clearly demarcated and respected by all
- if fair and transparent criteria are 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
- if residents are adequately supported and empowered to develop skills in preparation for transitioning out of the accommodation centre

JUDGMENT – Please select which best reflects your performance under Standard 7.3:					andard 7.3:	
☐ 1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant	
<ul> <li>you selected:</li> <li>1 or 2, please briefly outline the initiatives or measures you have in place to meet the standard</li> <li>3 or 4, please briefly outline why the service is failing to meet this standard.</li> </ul>						

Standard 7.4							
Staff and management support and encourage community initiatives and a sense of community within the centre.							
Please consider the following in assessing your performance:							
The second control of the second seco							
• if activities and events within the centre reflect and celebrate the diverse cultures, interests, age profile, identity and needs							
of residents							
or residents							
<ul> <li>if groups and activities</li> </ul>	orga	anised or managed by external	gro	ups and held within the cer	ntre are in compliance with relevant		
policy and legislation related to protecting children and vulnerable persons							
pond, and regionalist		and the processing commences and the		,			
JUDGMENT – Please select which best reflects your performance under Standard 7.4:							
□ 1 Compliant		2 Cubatantially Compliant		2. Doublelly Compliant	□ A Net Compliant		
☐ 1. Compliant		2. Substantially Compliant	П	3. Partially Compliant	☐ 4. Not Compliant		
If you selected:							
<ul> <li>1 or 2, please briefly outl</li> </ul>	line t	he initiatives or measures you hav	ve in	place to meet the standard			
<ul> <li>3 or 4, please briefly outl</li> </ul>	line v	why the service is failing to meet t	his s	tandard.			

## **Theme 8: Safeguarding and Protection**

#### Standard 8.1

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

- if policies and procedures are 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. If policies and procedures include prompt and effective mechanisms to ensure concerns identified are addressed without delay
- if residents are aware of and are actively supported to engage with the complaints processes in place
- if effective risk assessment and risk management policies and procedures are in place to manage risks to residents' safety
- if documented and effective measures taken by the provider to protect residents if a concern regarding their safety arises are in place
- if policies and procedures are in place and implemented to address allegations of abuse and or harm
- if policies, procedures and systems are in place to manage conflict and associated risk in the centre
- if there is 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

• if there is an awareness of relevant community and national support services, and if this information is clearly displayed for residents and staff in the centre
• if safe and secure storage areas are available to residents for their valuables in both their rooms and elsewhere in the centre
if clear emergency protocols are in place and if they are known to residents and staff
if residents are provided with information and skills training in relation to keeping themselves safe
if residents are consulted on policies and procedures developed for their safeguarding and protection

JUDGMENT – Please select which best reflects your performance under Standard 8.1:						
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant			
you selected:						
	outline the initiatives or measures you ha					
• 3 or 4, please briefly	outline why the service is failing to meet	this standard.				

#### 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.

- if the centre operates in line and complies with national policy as outlined in Children First 2017 and relevant legislation. If parents are informed of their right to contact The Child and Family Agency (Tusla) should they need to
- if staff and managers work in partnership with children and families to promote the safety and wellbeing of children, and if all residents are aware of the centre's child safeguarding policy and procedures
- if policies and procedures are in place to protect children from all forms of abuse and neglect, and to minimise their effects
  whenever they may occur. If these are in line with Children First 2017 and relevant legislation and policy. If these policies
  and procedures include prompt and effective mechanisms to ensure concerns are dealt with effectively. If there are 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
- if the accommodation centre has a designated liaison person (DLP) who acts in line with Children First. If the name and contact details for the DLP is prominently displayed in the in the centre
- if parents are supported and facilitated to provide age-appropriate supervision to children, and if there are procedures in place for the care of children in parents' absence, including arrangements between residents for the care of children
- if the identified needs, best interest and views of children inform the development and delivery of services and supports

•	• if information is 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									
	JUDGMENT – Please select which best reflects your performance under Standard 8.2:									
	1. Compliant	2. Subst	tantially Compliant	☐ 3. Par	rtially Compliant	☐ 4. Not Compliant				
If you	selected: 1 or 2, please briefly or 3 or 4, please briefly or		=							

#### Standard 8.3

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

- if policies and procedures are in place for the timely reporting, response, review and evaluation of adverse incidents and events. If affected residents are included in any such review or evaluation
- if adverse events are treated sensitively and confidentially
- if residents are fully and openly informed when an adverse event which affects them has occurred and in a timely way. if information and support is provided to residents as needed
- if emergency contacts are displayed in each appropriate room of the centre

JUDGMENT – Please select which best reflects your performance under Standard 8.3:							
☐ 1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant		
		the initiatives or measures you haw the service is failing to meet					

## 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.

- if all residents are 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
- if all communications with residents is 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
- if there are clear referral protocols and links established for residents to community or specialist services and supports
- if the health, wellbeing and development of residents are promoted and supported through a healthy diet, good nutrition, and opportunities for recreation, exercise and mental and physical activities
- if spaces are 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
- if specific groups of residents can 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, anti-bullying and online safety, older people's needs and prostitution. If this is done in a dignified way
- if staff liaise with relevant Government departments to ensure residents particularly those who are newly arrived are aware of their welfare and social protection rights

- if the contact details for organisations or groups of people who are able to inform residents about available health, social care and support services are publicly displayed
- if open days where community support services come to the accommodation centre to talk and meet with residents on the support services they offer take place
- if staff and managers develop and maintain links with family support services in the area
- if access to preventative and early intervention family supports is facilitated
- if parents are supported to make decisions regarding their welfare and the welfare of their children
- if parents are fully informed about national legislation and policy on child protection and safety and the supports available
- if parents and guardians are recognised and respected as the primary caregivers and decision-makers with regards to their children's welfare and development. If parents are provided with supports and education on acceptable parenting practice under Irish law and national policy
- if cultural-competence training is provided and encompasses awareness of different parenting cultures and styles, rights, equality and non-discrimination, and if it is available to parents and staff and managers
- if there are arrangements in place to assist and enable residents to access medical appointments and psycho-social services and supports; for example, childcare and transport supports
- if access to sexual, reproductive and LGBTI+ health and family planning and crisis pregnancy information and services is facilitated
- if effective hygiene and sanitary practices are in place and promoted to control the spread of infectious diseases
- if a substance use statement is in place, in line with relevant departmental policy, and if all staff and residents are advised about their rights and responsibilities in relation to this

_	-	oositive risk management strate and drugs) misuse	egies	to identify and safely mana	ge t	the risks associated with	
JUDGMENT – Please select which best reflects your performance under Standard 9.1:							
1. Compliant		2. Substantially Compliant		3. Partially Compliant		4. Not Compliant	
ou selected:							
		he initiatives or measures you have					
• 3 or 4, please briefly	y outline v	why the service is failing to meet t	his s	tandard.			

#### 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.

- if the manager of the accommodation centre promotes effective and accessible communication between residents and health and social care professionals involved in the provision of supports and treatment
- if there is an appropriate private setting for visits with health and other professionals
- if initiatives to promote the health, wellbeing and development of residents, including preventative initiatives, are developed and provided in consultation with residents
- if staff and managers promote healthy lifestyles, interests and wellbeing in residents by encouraging them to participate in and develop social and community activities
- if staff and managers continually inform residents of self-care activities available in the community, and if 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

ected: or 2, please briefly outline the initiatives or measures you have in place to meet the standard or 4, please briefly outline why the service is failing to meet this standard.	JUDGMENT – Please select which best reflects your performance under Standard 9.2:						
or 2, please briefly outline the initiatives or measures you have in place to meet the standard	Not Compliant						
or 4, please briefly outline why the service is failing to meet this standard.							

#### 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.

- if residents are supported and enabled to:
  - o access and participate in further education and training opportunities in the community
  - o access appropriate and adequate study materials and facilities
  - o participate in employment opportunities (where eligible)
  - o participate in volunteering opportunities
  - o develop skills in preparation for transitioning out of the service
- if up-to-date information is available and actively provided to residents on employment, education, volunteering and training supports, services and opportunities
- if accessible, dedicated, local transport service is available to residents, taking into consideration their needs when attending education, training, support services and volunteering opportunities

JUDGMENT – Please select which best reflects your performance under Standard 9.3:							
1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant				
	fly outline the initiatives or measures you h fly outline why the service is failing to mee						

## 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.

- if there is a written work plan in place which outlines how the requirements of residents with special reception needs are supported, which is implemented and continually reviewed for its effectiveness
- if any special reception needs, including those identified through initial and subsequent vulnerability assessments, are clearly communicated to the reception officer, to assist them in the performance of their duties, while respecting the confidentiality of the resident
- if special reception needs inform the:
  - o allocation of a room or rooms
  - o delivery of supports and services
  - o information and referrals to relevant external supports and services
- if arrangements are in place to liaise with the relevant Government department if:
  - o the service is unable to accommodate or cater for the special reception needs of a resident
  - o supports and services are not available in the locality to meet the special reception needs of a resident
  - o special arrangements or measures need to be put in place to meet the assessed needs of the resident

<ul> <li>if there is a syste special reception</li> </ul>	•		hich is informed by the needs	of other residents when meeting the
	-	otion needs of residents an confidential manner	d how they are met, have be	en met or plan to be met, is kept and
	JUDGMENT -	- Please select which best ref	flects your performance under	Standard 10.1:
☐ 1. Compliant	□ <b>2.</b>	Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant
• •	•	initiatives or measures you har the service is failing to meet	ave in place to meet the standard: this standard.	rd

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

- if each staff member receives initial and ongoing specialised training and support to identify and respond to the special reception needs and vulnerability of residents. If there is a written record of staff training
- if staff are debriefed in a timely manner after incidents or responding to residents in crises
- if there are measures in place to support and promote the self-care of staff who regularly deal with residents with special reception needs
- if there are measures in place to prevent work overload, burnout and vicarious trauma, including stress management training for staff and managers
- if there are measures in place to encourage and actively facilitate staff to share experiences, best practice and lessons learnt. If lessons learned are documented and used to improve processes and delivery of supports and services within the accommodation centre
- if the delivery of supports for people requiring special reception needs is person-centred and provided in such a way as to affirm, promote and empower the person's strength and resilience

JUDGMENT – Please select which best reflects your performance under Standard 10.2:						
☐ 1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant	
		he initiatives or measures you l why the service is failing to mee				

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

- if there is a systematic, fair and transparent mechanism in place to assess all residents for special reception needs, and to ensure special reception needs are identified where these needs become apparent after being placed in a service
- if the accommodation centre's reception officer is proactive in identifying the special reception needs of residents on an ongoing basis
- if the centre manager liaises with the relevant Government department if:
  - o the accommodation centre is unable to accommodate or cater for the special reception needs of a resident
  - o 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
- if the special reception needs of residents and how they are met, have been met or plan to be met is documented and stored in safe and confidential manner
- if written plans to meet the needs of vulnerable residents are in place and monitored for implementation and effectiveness
- if the relevant Government department is kept informed of a resident's special reception needs
- if the special reception needs of residents are responded to promptly and adequately, and if referrals are made to relevant health and social care services, Governmental agencies, statutory bodies or support organisations, as required

•	if the centre's reception officer cooperates and collaborates 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
•	if there is a mechanism in place to ensure residents with special reception needs are regularly monitored in conjunction with the centre's reception officer
•	if residents are encouraged and actively supported to attend follow-up vulnerability assessments
•	if arrangements are in place to assist and enable residents with special reception needs to access appropriate supports and services, including childcare and transport supports
•	if information in relation to vulnerability assessments is held in line with relevant legislation and centre policy

JUDGMENT – Please select which best reflects your performance under Standard 10.3:						
☐ 1. Compliant		2. Substantially Compliant		3. Partially Compliant	☐ 4. Not Compliant	
		he initiatives or measures you l why the service is failing to mee				

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.

- if there is a dedicated reception officer in place in the centre
- if the reception officer is appropriately qualified and skilled to identify and respond to residents with special reception needs
- if the reception officer is a member of the senior management team of the centre
- if the reception officer receives regular external specialised training to identify and respond to residents with special reception needs, and if a written record of training attendance is maintained
- if a copy of the reception officer policy and procedure manual is made available to residents. If there is a mechanism in place to ensure the reception officer adheres to the requirements set out in this manual
- if the reception officer is the principal point of contact for residents, staff and managers for any issues concerning special reception needs
- if the reception officer has 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
- if the relevant Government department is notified of the availability or otherwise of support services in the locality and in the accommodation centre

- if the reception officer provides information and advice to residents and staff on issues about special reception needs within the accommodation centre
- if the reception officer supports 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
- if the manager reports any special reception needs of residents that become apparent after the resident has been placed in the centre to the relevant Government department
- if the manager liaises with and makes 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
- if any changes to a resident's accommodation needs are communicated to and discussed with the resident in a timely and appropriate manner
- if the reception officer has links with relevant services and supports where appropriate, and in line with vulnerability assessments and the identified special needs of residents. If the reception officer communicates effectively with the designated liaison person in this regard where necessary

JUDGMENT – Please select which best reflects your performance under Standard 10.4:						
☐ 1. Compliant	2. Substan	ntially Compliant		3. Partially Compliant	☐ 4. Not Compliant	
<ul> <li>you selected:</li> <li>1 or 2, please briefly o</li> <li>3 or 4, please briefly o</li> </ul>				place to meet the standard tandard.	i	

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.

- if sufficient staff are available with the appropriate qualifications and skills to respond to the needs of exceptionally vulnerable residents
- if there is 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 entre
- if staff are trained to meet the assessed needs of exceptionally vulnerable residents. If a written record of staff training is maintained
- if staff are provided with supervision and supported in line with their professional requirements if they are responding to exceptionally vulnerable residents
- if residents' needs are subject to ongoing review by staff to ensure their needs are met and that relevant supports and referrals are in place
- if 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
- if the manager regularly liaises 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

<ul> <li>if staff demonstrate an understanding of the impact of the protection process on a resident's health and wellbeing, and if they support residents at key phases of the protection process</li> </ul>									
cater for such resider arrangements in place	• if in accommodation centres where a significant proportion of residents are exceptionally vulnerable, or in centres which cater for such residents, whether there are appropriate, proportionate and rights-based safety and security measures and arrangements in place. If these measures are regularly reviewed, taking into account the views of the resident or residents, for their effectiveness, necessity and proportionality								
JUD	DGMENT – Please select which best r	eflects your performance under St	andard 10.5:						
☐ 1. Compliant	2. Substantially Compliant	☐ 3. Partially Compliant	☐ 4. Not Compliant						
* * * * * * * * * * * * * * * * * * * *	utline the initiatives or measures you utline why the service is failing to me	•	I						

# **Section 2: Quality Improvement Plan**

Action Number	Dimension	Corresponding Standard	Action Details	Person(s) Responsible	Due Date for Completion	Action Status

Action Number	Dimension	Corresponding Standard	Action Details	Person(s) Responsible	Due Date for Completion	Action Status

Action Number	Dimension	Corresponding Standard	Action Details	Person(s) Responsible	Due Date for Completion	Action Status

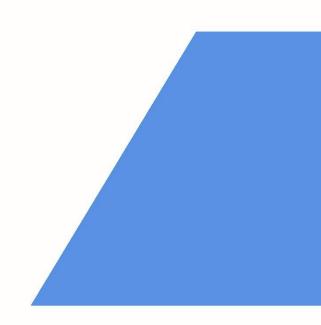
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## Published by the Health Information and Quality Authority (HIQA).

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