

Inspection Report

Name of Service: Rosemount Care Centre

Provider: Zest Investments (Portadown) Limited

Date of Inspection: 16 September 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Zest Investments (Portadown) Limited
Responsible Individual:	Mr Philip Scott
Registered Manager:	Mrs Patricia Purvis
<p>Service Profile – This home is a registered residential care home which provides health and social care for up to 32 residents who are living with dementia. The home is divided into two units; Willow and Cherryblossom. All residents are accommodated on the ground floor in single bedrooms with ensuite facilities. Residents have access to shared communal areas and a secure outdoor area.</p> <p>There is a separate registered nursing home within the same building and the registered manager for this home manages both services.</p>	

2.0 Inspection summary

This unannounced inspection took place on 16 September 2025, from 9.30am to 3.30pm. The inspection was conducted by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to assess progress with the areas of improvement identified by RQIA, during the last care inspection on 24 August 2024.

The inspection found that safe, effective and compassionate care was delivered to residents and the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

The home was found to be clean and bedrooms were personalised with items which were important to residents.

Residents reported that they were happy with the care provided to them and praised the activity provision in the home. Refer to Section 3.2 for more details.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable in relation to the needs of the residents.

As a result of this inspection, six areas for improvement from the previous care inspection were assessed as met. One area relating to medicines management was carried forward for review to the next inspection. Full details, including one new area for improvement, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from residents', relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards. Inspectors will also observe care delivery and may conduct a formal structured observation during the inspection.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

3.2 What people told us about the service

Residents commented positively on their experience of living in the home. Such comments included; "the food is good, they know me, they know what I like and what I don't," "It's a good place here," "there is always a choice available" and "I am very happy in here, the staff are very good and they are kind to me. I am well looked after and I feel very safe in here."

Residents commented positively on the activity provision in the home stating "they have good activities in here for the residents to keep them occupied."

Staff spoke positively in terms of the provision of care and advised that there was good care provided in this home. Staff told us that the manager was supportive and available for advice and guidance.

3.3 Inspection findings

3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of residents. There was evidence of robust systems in place in relation to staff recruitment, induction and training.

Staff were readily available and responded promptly to call bells. Staff knew what they were required to do each day and understood the needs of the residents. Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels.

Observation of the delivery of care evidenced that residents' needs were met by the number and skills of the staff on duty during the inspection.

3.3.2 Quality of Life and Care Delivery

Staff met at the beginning of each shift to discuss any changes in the needs of the residents. Staff were knowledgeable of individual residents' needs, their daily routine wishes and preferences. Staff interactions with residents were observed to be polite, friendly, warm and supportive and the atmosphere was calm and pleasant.

Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs. Observations of the staff and resident's interactions found staff to be reassuring and compassionate.

Staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly. Staff were offered residents choice in how and where they spent their day or how they wanted to engage socially with others. Expressions of consent were observed during interactions with staff and residents.

At times some residents may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard residents and to manage this aspect of care.

The risk of falling was well managed and referrals were made to other healthcare professionals as needed.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

The dining experience was an opportunity for residents to socialise and the atmosphere was relaxed and unhurried. The food was attractively presented and included a choice of meal.

There was a variety of drinks available. It was observed that residents were enjoying their meal and their dining experience.

There was enough staff supervision in place throughout the serving of the meal. Discussion with residents confirmed that the food provision was good and there was always a choice of meal offered.

Activities for residents were provided which included both group and one to one activities. On the day of the inspection, the residents were involved in musical activities. For those residents who preferred not to participate in the planned activity, staff were observed sitting with them and engaging in discussion. Residents also had opportunities to listen to music, watch television, or engage in their own preferred activities.

Arrangements were in place to meet patients' social, religious and spiritual needs within the home.

3.3.3 Management of Care Records

Residents' needs were assessed by a suitably qualified member of staff at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents' needs and included any advice or recommendations made by other healthcare professionals.

Residents care records were held confidentially.

Care records were person centred and staff recorded regular evaluations about the delivery of care.

3.3.4 Quality and Management of Residents' Environment Control

The home was clean, warm and comfortable for residents. Bedrooms were tidy and personalised with photographs and other personal belongings for residents. Communal areas were well decorated, suitably furnished and homely.

Systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

The grounds of the home were well maintained with good accessibility for residents to avail of.

The home's most recent fire safety assessment was dated 26 November 2024. An area of improvement was made for a time bound action plan to be submitted to RQIA detailing how the remaining five out of nine recommendations from this assessment would be addressed.

Fire safety training, safety drills and safety checks in the environment were maintained on an up-to-date basis.

Cleaning chemicals were stored safely and securely.

3.3.5 Quality of Management Systems

Mrs Patricia Purvis is the registered manager of the home. Staff spoke positively about the managerial support, saying that they would have no hesitation in reporting issues of concern and felt these would be dealt with appropriately.

There was evidence of auditing across various aspects of care and services provided by the home, such as environmental audits, care records, and care needs.

Expressions of dissatisfaction were taken seriously and managed appropriately, with relevant records maintained.

It was established that the manager had a system in place to monitor accidents and incidents that happened in the home. Accidents and incidents were notified to all relevant stakeholders.

The home was visited each month by a representative of the Responsible Individual to consult with patients, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail; where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed. These are available for review by patients, their representatives, the Trust and RQIA.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with regulations and standards.

	Regulations	Standards
Total number of Areas for Improvement	2*	0

* the total number of areas for improvement includes one area which has been carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with Patricia Purvis, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 30 Stated: First time To be completed by: From the date of inspection (23 November 2023)	The registered person shall ensure that all medicine related incidents are investigated to identify learning and reported to the appropriate authorities including RQIA. Ref: 2.0
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.
Area for improvement 2 Ref: Regulation 27(4) (a) Stated: First time To be completed by: 17 October 2025	The registered person shall submit to RQIA a time bound action plan detailing how the outstanding recommendations in the fire safety risk assessment dated 24 November 2024 would be addressed. Ref:3.3.4
	Response by registered person detailing the actions taken: The fire risk assessment has been fully actioned, signed and updated.

Please ensure this document is completed in full and returned via the Web Portal



The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA



Tel: 028 9536 1111



Email: info@rqia.org.uk



Web: www.rqia.org.uk



Twitter: @RQIANews