

# Inspection Report

**Name of Service:** Mullaghcarn Care Home

**Provider:** East Eden Ltd

**Date of Inspection:** 8 April 2025

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

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	East Eden Ltd
<b>Responsible Individual:</b>	Dr. Una McDonald
<b>Registered Manager:</b>	Mrs. Louise Donnelly
<p><b>Service Profile</b> – This home is a registered nursing home which provides nursing care for up to 20 patients who are living with a physical disability.</p> <p>The home is all ground floor accommodation, with single occupancy bedrooms and a number of self contained units. There are a range of communal areas throughout the home and patients have access to enclosed garden areas.</p> <p>The home shares the same site with a separate registered nursing home.</p>	

## 2.0 Inspection summary

An unannounced post registration inspection took place on 8 April 2025, from 9.50am to 11.45am by a care inspector.

This inspection was undertaken to evidence how the home is performing in relation to the regulations and standards.

The home was clean, well decorated and furnished to a high standard.

Systems of staffing, training and governance were in place to accommodate admissions to the home.

## 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 registration information, and any other written or verbal information received from patient's, 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.

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**

There has been no patients admitted to the home since it was registered in December 2024.

## **3.3 Inspection findings**

### **3.3.1 Staffing Arrangements**

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

A check is undertaken on a monthly basis to ensure all staff are up-to-date with their registration with the Nursing & Midwifery Council (NMC) or the Northern Ireland Social Care Council (NISCC). These checks were maintained appropriately.

### **3.3.2 Quality and Management of Patients' Environment**

The home was clean, tidy and fresh smelling throughout, with a good standard of décor and furnishings being maintained. Residents' bedrooms were comfortable and suitably facilitated. Communal areas were suitably furnished and comfortable. Bathrooms and toilets were clean and hygienic.

Cleaning chemicals were stored safely and securely.

The grounds of the home were well maintained with good accessibility for patients to avail of. The staff car park had yet to be surfaced and cleared but the manager reported that this would be undertaken in the near future.

### **3.3.3 Quality of Management Systems**

Mrs Louise Donnelly is the registered manager of the home since 10 December 2024.

The home's Certificate of Registration was displayed in a conspicuous place and the details of such were correct.

It was established that good systems and processes were in place to manage the safeguarding and protection of vulnerable adults. Staff safeguarding training was up-to-date.

The home was visited each month by a representative on the behalf of the responsible individual to consult with residents, their relatives and staff and to examine all areas of the running of the home. These reports are available for review by patients, their representatives, the Trust and RQIA.

#### **4.0 Quality Improvement Plan/Areas for Improvement**

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs. Louise Donnelly, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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