



Inspection Report

Name of Service: Trevenna Lodge

Provider: Trevenna Lodge

Date of Inspection: 17 October 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:	Trevenna Lodge
Responsible Person:	Mr Tom Corr
Registered Manager:	Mr Tom Corr – not registered
Service Profile: This home is a registered residential care home which provides health and social care for up to 9 residents with physical disability under 65 years of age and frail elderly over 65 years of age. Bedrooms are located over two floors. Residents have access to a lounge, dining room, conservatory and garden.	

2.0 Inspection summary

An unannounced inspection took place on 17 October 2025, from 10.10 am to 4.20 pm 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 area for improvement identified, by RQIA, during the last care inspection on 3 October 2024; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

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.

It was evident that staff promoted the dignity and well-being of residents and the staff were knowledgeable and trained to deliver safe and effective care.

Residents said that living in the home was a good experience. Residents were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

It was positive to note that all of the areas for improvement from the previous inspection were assessed as having been addressed by the provider. This inspection resulted in no areas for improvement being identified.

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 spoke positively about their experience of life in the home; they said they felt well looked after by the staff who were helpful and friendly. Residents' comments included: "I am very happy here", "I have everything I need", "Everyone (staff) is very kind and caring", "I feel very safe here" and "This is a lovely place".

Residents told us that they were able to choose how they spent their day; that they could remain in their bedroom or go to a communal room when they requested.

Staff spoke positively in terms of the provision of care in the home and their roles and duties. Staff said there was good teamwork and that the residents were well cared for. Staff told us that the manager was supportive and available for advice and guidance.

There was no response to the online survey or questionnaires within the timeframe provided.

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 to manage staffing.

Observation of the delivery of care evidenced that the number and skills of the staff on duty met residents' needs. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner.

3.3.2 Quality of Life and Care Delivery

Staff interactions with residents were observed to be polite, friendly, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual residents' needs, their daily routine, wishes and preferences.

It was observed that 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 also observed offering residents choice in how and where they spent their day or how they wanted to engage socially with others.

Where a resident was at risk of falling, measures to reduce this risk were put in place. For example, mobility aids and assistance from staff.

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. There was a menu on display within the home.

The dining experience was an opportunity for residents to socialise, and the atmosphere was calm, relaxed and unhurried. It was observed that residents were enjoying their meal and their dining experience.

Residents commented positively about the food provided within the home with comments such as: "The food is exceptional here", "The food is great and plenty of it", "The food is nice" and "Great food".

The importance of engaging with residents was well understood by the manager and staff. An activity schedule was on display within the home offering a range of individual and group activities such as bingo, board games, movies, gardening, music, and armchair exercise.

Care assistants completed activities within the home and were observed positively engaging with residents and encouraging them to participate in activities. Daily newspapers, the radio and television were taking place in the morning and country music was provided in the afternoon; residents appeared to enjoy the activities provided.

Some residents were engaged in their own activities such as; watching TV, resting or chatting to staff. Residents were seen to be content and settled in their surroundings and in their interactions with staff. Comments included: "There is always something going on here to keep you going", "Plenty of things to do" and "Very kind people working here".

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, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care staff recorded regular evaluations about the delivery of care. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

3.3.4 Quality and Management of Residents' Environment

The home was clean and tidy and residents' bedrooms were personalised with items important to the resident. The floor covering in one bedroom required repair/replacement and the paint on a number of bedroom walls was worn. Details were discussed with the manager who advised that refurbishment was ongoing throughout the home including the painting of walls. Following the inspection, written confirmation received that relevant action had been taken to address these issues.

Identified windows on the ground floor did not have restrictors in place. This was discussed with the manager and following the inspection, written confirmation was received that relevant action had been taken to address this.

There was evidence that systems and processes were in place to manage infection prevention and control (IPC) which included policies and procedures and regular monitoring of staff practice to ensure compliance.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mr Tom Corr has been the Acting Manager in this home since 11 September 2017. Mr Tom Corr is also the Registered Provider and discussed plans for an application to have a manager registered.

Residents and staff commented positively about the manager and described him as supportive, approachable and able to provide guidance.

There was evidence that a number of audits were being completed on a regular basis to review the quality of care and other services within the home or were being reviewed as part of the monthly monitoring visit.

The home was visited each month by a representative of the registered person to consult with residents, their relatives and staff and to examine all areas of the running of the home. Written reports were completed following these visits and available within the home.

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 Mr Tom Corr, Manager, as part of the inspection process and can be found in the main body of the report.



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