The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Naroon House

Provider: Naroon House

Date of Inspection: 21 April 2026

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:	Naroon House
Responsible Person:	Miss Mary Kelly
Registered Manager:	Miss Mary Kelly
This home is a registered residential care home which provides health and social care for up to 12 people under and over 65 years of age, with a learning disability or a mental health disorder excluding learning disability or dementia. Residents' bedrooms are located over two floors and residents have access to communal lounges, a dining room and a garden.	

2.0 Inspection summary

An unannounced inspection took place on 21 April 2026, from 10.00 am to 4.15 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 determine if the home is delivering safe, effective and compassionate care and if the service is well led.

Evidence of good practice was found in relation to care delivery and the resident dining experience. There were examples of good practice found in relation to the culture and ethos of the home in maintaining the dignity and privacy of residents and maintaining good working relationships. Staff were knowledgeable and well trained to deliver effective and compassionate care.

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

As a result of this inspection, one area for improvement was assessed as having been addressed by the provider. This inspection resulted in no new areas for improvement being identified. Details can be found in the main body of this report.

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 spoken with said that they were well looked after by the staff and felt safe and happy living in Naroon House. They confirmed that staff offered them choices throughout the day which included preferences for what clothes they wanted to wear and where and how they wished to spend their time. They told us that they could have a lie in or stay up late to watch TV if they wished and they were given the choice of where to sit and where to take their meals; some residents preferred to spend time in their room and staff were observed supporting residents to make these choices.

Residents said, "I'm happy and settled here. The manager wants to do the best for everyone and pulls out all the stops to make it good for us" and "The staff are nice. I'm well cared for and we get good food".

Staff told us that the manager was approachable and they felt well supported in their role. They said they could speak freely to the manager if they had any concerns and would be confident that anything raised would be sorted out promptly. Staff said that they enjoyed working in the home and knew the residents well. They confirmed that staffing levels are satisfactory, there is enough time to complete daily tasks and the staff team are reliable and supportive.

A staff member said, "The manager is supportive and brings the best out in staff. I never dread coming into work and look forward to it, as I want to do my best for the residents".

Following the inspection no resident, resident representative or staff questionnaires were received within the timescale specified.

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.

Residents told us that they felt safe and well cared for; they enjoyed the food and that staff were kind. They said that Naroon House is a good place to live; the manager and staff are approachable and they felt if they had any issues that they could discuss them and were confident any concerns would be addressed accordingly.

Staff spoken with said there was good teamwork and that they felt well supported in their role. Staff also said that, whilst they were kept busy, staffing levels were satisfactory in order to meet residents' needs.

Staff told us they were aware of individual resident's wishes, likes and dislikes. It was observed that staff responded to requests for assistance promptly in an unhurried, caring and compassionate manner. Residents were given choice, privacy, dignity and respect.

3.3.2 Quality of Life and Care Delivery

The atmosphere in the home was welcoming, homely, friendly and inclusive.

Staff met at the beginning of each shift to discuss residents' care, to ensure good communication across the team about any changes in residents' needs. Staff were knowledgeable about individual residents' needs, their daily routine, wishes and preferences; and were observed to be prompt in recognising residents' needs and any early signs of distress or illness, including those residents who had difficulty in making their wishes or feelings known.

Staff were observed to be skilled in communicating with residents. It was observed that staff respected residents' privacy and dignity by knocking on doors to request entry, offering personal care to residents discreetly and discussing residents' care in a confidential manner. They were observed offering residents choice on how and where they spent their day or how they wanted to engage socially with others.

Arrangements were in place to meet residents' social, religious and spiritual needs within the home. Birthdays and annual holidays were celebrated and on occasions residents, their families and staff attended larger events.

Activities for residents were provided which involved both group and one to one activities such as outside entertainment, reminiscence therapy, board games, jigsaws and arts and crafts. A daily record is kept of all activities that residents take part in. Residents spoken with said they enjoyed the activities that were provided.

We observed the serving of the lunchtime meal for residents in the dining room and noted that this meal time provided residents with an opportunity to socialise together. The food was attractively presented and smelled appetising. There was a variety of drinks available. Staff had made an effort to ensure residents were comfortable throughout their meal and they were knowledgeable regarding residents' individual needs, likes and dislikes, to ensure they had a pleasant experience and had a meal that they enjoyed.

A variety of drinks and snacks were available for residents throughout the day.

3.3.3 Management of Care Records

Residents' needs were assessed 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. 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.

3.3.4 Quality and Management of Residents' Environment

The home was clean, tidy and well maintained. Residents' bedrooms were personalised with items important them. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable. A variety of methods was used to promote orientation. There were clocks and photographs throughout the home to remind residents of the date, time and place.

The manager confirmed environmental and safety checks were carried out, as required on a regular basis, to ensure the home was safe to live in, work in and visit. Corridors and fire exits were clear from clutter and obstruction.

Personal protective equipment, for example, face masks, gloves and aprons were available throughout the home. Dispensers containing hand sanitiser were seen to be full and in good working order. Staff members were observed to carry out hand hygiene at appropriate times and to use PPE in accordance with the regional guidance.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Miss Mary Kelly has been the manager in this home since 28 August 2015.

Review of staff supervision records evidenced that they had commenced. The manager advised they are ongoing and that arrangements are in place that all staff members have regular supervision and an appraisal completed this year.

Staff commented positively about the manager and described her as supportive, approachable and able to provide guidance. Staff confirmed that there were good working relationships.

Review of a sample of records evidenced that the manager had processes in place to monitor the quality of care and other services provided to residents. There was evidence that the manager took measures to improve practice, the environment and the quality of services provided by the home.

It was established that the manager had a system in place to monitor accidents and incident that happened in the home. Accidents and incidents were notified, if required, to residents' next of kin, their care manager and to RQIA.

A complaint's file was maintained to detail the nature of any complaints and the corresponding actions made in response to any complaints. There were no recent or ongoing complaints.

Staff meetings were held on a regular basis. Minutes of these meetings were available.

Cards and letters of compliment and thanks were received by the home. Comments were shared with staff. This is good practice.

4.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0	0

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

The Regulation and Quality Improvement Authority

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