

Inspection Report

Name of Service: Our Lady's Home
Provider: Macklin Care Homes Ltd
Date of Inspection: 8 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:	Macklin Care Homes Ltd
Responsible Individual:	Mr Brian Macklin
Registered Manager:	Mrs Isabel Neves – not registered

Service Profile – This home is a registered nursing home which provides nursing care for up to 84 patients. The home is divided into three units over one floor; the Beechmount unit provides general nursing care and the Clonard and Donegal units provide care for patients living with dementia. Within each unit patients have access to individual bedrooms, communal lounges, dining rooms and outside spaces.

There is a residential care home which occupies another floor of the building. The residential care home is under separate management arrangements.

2.0 Inspection summary

An unannounced inspection took place on 8 September 2025 from 9.40 am to 5.00 pm by care inspectors.

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 for improvement identified, by RQIA, during the last care inspection on 13 June 2024; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

Patients said that living in the home was a good experience. Patients unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff.

It was evident that staff promoted the dignity and well-being of patients and that staff were knowledgeable and well trained.

The inspection evidenced that safe, effective and compassionate care was delivered to patients and that the home was well led.

This inspection resulted in no areas for improvement being identified. All of the previous areas for improvement from the inspection undertaken on 13 June 2024 were addressed by the provider.

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 patients, 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

Patients who were able to share their opinions on life in the home said they were well looked after. Some patients had difficulty telling us about their care experiences. Patients who had communication difficulties looked relaxed in their environment and during interactions with staff.

Patients' comments included; "The care is brilliant, I get everything I need, the staff treat me with dignity and respect", "The staff are very good", "The staff are brilliant, they do everything for me", "I'm treated well", and "The staff are more than good".

A number of relatives shared their experiences of the home. They told us; "The home is excellent, the place is spotless and the staff work as a family, I never wanted my wife in a home but this place is incredible". "The level of care here is unbelievable", "We are very happy with the care, xx is getting well looked after", "absolutely brilliant home" and "I have no complaints at all, the staff keep me up to date and I can leave and go home content".

One completed questionnaire was received from a relative; the relative commented, "The care is absolutely brilliant, the staff are thoughtful, kind, caring and cheery. The staff always have a smile and make time to chat. The environment is lovely, with music, chatter and laughter. Nothing could be done better".

Staff spoken with said that Our Lady's Home was a good place to work. Staff said that they were satisfied with staffing levels and teamwork, the manager and all the management team were approachable and they thoroughly enjoyed working in the home. Staff comments

included; “I love working here because I feel valued”, “I love the wee residents” and “I am privileged to work in this home”.

One staff member completed the online survey and shared positive responses to all the questions asked they left the following comment, “As an employee, I feel very valued and supported by the management team. Since starting work in Our Lady’s I have received nothing but kindness, support and feel very included by the management team and staff alike. The management team work very hard to make sure the staff, no matter who, all feel like part of the Our Lady’s family...and that’s just what we are, I love working here!”.

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 patients. There was evidence of robust systems in place to manage staffing.

The staff duty rota accurately reflected the staff working in the home on a daily basis. Observation of the delivery of care evidenced that patients’ needs were met by the number and skills of the staff on duty.

Staff said there was good teamwork, that they felt well supported in their role, and that they were satisfied with the staffing levels.

There was a system in place to monitor that all relevant staff were registered with the Nursing and Midwifery Council (NMC) or the Northern Ireland Social Care Council (NISCC).

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 patients. Staff were knowledgeable of individual patients’ needs, their daily routine wishes and preferences.

Patients looked well cared for and were seen to enjoy warm and friendly interactions with the staff. Staff were observed to be chatty, friendly and polite to the patients at all times.

Staff were observed to be prompt in recognising patients’ needs and any early signs of distress or illness, including those patients who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with patients; they were respectful, understanding and sensitive to patients’ needs.

At times some patients 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 patients and to manage this aspect of care.

Patients may require special attention to their skin care. These patients were assisted by staff to change their position regularly and care records accurately reflected the patients' assessed needs.

Examination of care records and discussion with the staff confirmed that the risk of falling and falls were well managed and referrals were made to other healthcare professionals as needed. Review of records confirmed that staff took appropriate action in the event of a fall, for example, they commenced neurological observations and sought medical assistance if required.

Good nutrition and a positive dining experience are important to the health and social wellbeing of patients. Patients 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 patients to socialise, the atmosphere was calm, relaxed and unhurried. An effective system was in place to identify which meal was for each individual patient, a meal time champion is identified and there was evidence of the implementation of a "safety pause" to ensure patients were served the right consistency of food and their preferred menu choice. Meals were appropriately covered on transfer to patients' preferred dining area. There was a variety of drinks available. Patients wore clothing protectors if required and staff wore aprons when serving or assisting with meals. Patients told us they enjoyed their meal; they said the food was "really lovely" and "dead on".

The importance of engaging with patients was well understood by the manager and staff. There was a range of activities provided for patients by activity staff. The planned activity schedule was displayed in each unit if the home. The range of activities included social, community, cultural, religious, spiritual and creative events. Patients' needs were met through a range of individual and group activities. Activity records were maintained which included patient engagement with the activity sessions.

Patients have the opportunity every Friday of joining entertainment in the large downstairs activity room; the entertainment would usually involve outside musicians or the screening of a movie. One patient commented fondly to the inspector of their recent trip to the bowling alley.

3.3.3 Management of Care Records

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

Patients care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the patients' needs. Nursing staff recorded regular evaluations about the delivery of care.

3.3.4 Quality and Management of Patients' Environment

Examination of the home's environment included reviewing a sample of bedrooms, bathrooms, storage spaces and communal areas such as lounges. The home was clean, warm and

comfortable. Patients' bedrooms were tidy and personalised with items of importance to each patient, such as family photos and sentimental items from home. The manager advised of an ongoing refurbishment and redecoration plan for the home.

Review of records confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the home's was safe to live in, work in and visit.

Review of records and observations confirmed that 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.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mrs Isabel Neves has been the manager of Our Lady's home since June 2021.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the management team responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided by the home.

Staff told us that they would have no issue in raising any concerns regarding patients' safety, care practices or the environment.

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 the management team, as part of the inspection process and can be found in the main body of the report.



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