

# Inspection Report

<b>Name of Service:</b>	<b>Belvedere</b>
<b>Provider:</b>	<b>Belvedere Residential Care Ltd</b>
<b>Date of Inspection:</b>	<b>29 August 2025</b>

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>	Belvedere Residential Care Ltd
<b>Responsible Individual:</b>	Mr Patrick Samuel MacMahon
<b>Registered Manager:</b>	Mrs Catherine McConville
<p><b>Service Profile –</b>  This home is a registered residential care home which provides health and social care for up to 21 residents.  Resident bedrooms are located over two floors. Residents have access to communal lounges, a dining room and an outdoor seating area. The home is surrounded by a mature garden.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 29 August 2025, from 10.00 am to 4.00 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.

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

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.

As a result of this inspection all of the previous areas for improvement were assessed as having been addressed by the provider and no new areas for improvement were identified. Details and examples of the inspection findings can be found in the main body of the 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, 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 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**

Residents spoken with described staff as, "great" and "very good to me." Comments included, "I'm well looked after," and "the staff are very good to me."

Staff provided positive feedback about their experiences working in the home. Comments shared included, "I like working here."

Discussion with staff confirmed that residents were able to choose how they spent their day and that there was flexibility to facilitate activities dependent on the wishes and needs of the residents residing in the home.

No additional feedback was received from residents, relatives or staff following the inspection.

### **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 residents' needs were met by the number and skills of the staff on duty.

Staff told us that the residents' needs and wishes were important to them. Staff responded to requests for assistance promptly in a caring and compassionate manner. It was clear through observation of the interactions between the patients and staff that the staff knew the residents well.

### **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 resident's needs, their daily routine, wishes and preferences.

Discussion with staff confirmed that they were aware of the falls protocol and the actions to take in the event a resident sustained a fall.

Observation of the lunchtime meal and discussion with residents and staff evidenced that there were robust systems in place to manage residents' nutrition and mealtime experience. It was observed that residents were enjoying their meal and their dining experience.

The importance of engaging with residents was well understood by the manager and staff. There was a programme of activities available to include individual and group activities; and some residents were observed listening to music or watching television.

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

### **3.3.3 Management of Care Records**

Residents' needs were assessed by a 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.

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

Residents care records were held confidentially.

### **3.3.4 Quality and Management of Residents' Environment**

The home was clean, tidy and welcoming. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable.

Fire safety measures were in place to ensure residents, staff and visitors to the home were safe. Corridors were clear of clutter and obstruction and fire exits were also maintained clear.

There was evidence that systems and processes were in place to manage infection prevention and control which included regular monitoring of the environment and staff practice to ensure compliance.

### **3.3.4 Quality of Management Systems**

There has been no change in the management of the home since the last inspection.

Staff commented positively about the manager and described them as supportive, approachable and able to provide guidance.

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.

#### **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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