

Inspection Report

Name of Service: Beltany House

Provider: Western Health and Social Care Trust (WHST)

Date of Inspection: 24 July 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:	Western Health and Social Care Trust (WHSCT)
Responsible Individual:	Mr Neil Guckian
Registered Manager:	Mr Sean Greene
Service Profile This home is a registered residential care home which provides health and social care for up to three residents who are living with a learning disability on a short stay basis. Accommodation is provided on ground floor level and all residents are accommodated in single bedrooms. Residents have access to communal areas and a secure outdoor space.	

2.0 Inspection summary

An unannounced inspection took place on 24 July 2025 from 10.20pm to 3pm, 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 home was found to be clean and bedrooms contained items which were important to residents.

Residents reported that they were happy with the care provided to them and praised the activity provision in the home. Refer to Section 3.2 for more details.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable in relation to the needs of the residents.

Full details, including one new area for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

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 resident'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

Residents commented positively on their experience of the home. Such comments included; "staff make me happy and relaxed" and "I love coming in here."

Residents told us that the staff offered choices to them throughout the day which included preferences for getting up and going to bed, what clothes they wanted to wear, food and drink options, and where and how they wished to spend their time.

Residents praised the activity provision in the home.

Staff spoke positively in terms of the provision of care and advised that there was good care provided in this home. Staff told us that the manager was supportive and available for advice and guidance.

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.

Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels. Staff were always available and responded promptly to

residents' needs. Staff knew what they were required to do each day and understood the needs of the residents.

Observation of the delivery of care evidenced that residents' needs were met by the number and skills of the staff on duty.

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

Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs. Observations of the staff and resident's interactions found staff to be reassuring and compassionate.

Staff were offered residents choice in how and where they spent their day or how they wanted to engage socially with others. Residents reported that they could choose what time they could get up in the morning; if they wanted to participate in the activity available or spend time privately. Expressions of consent were observed during interactions with staff and residents.

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

The risk of falling was well managed and referrals were made to other healthcare professionals as needed.

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.

The dining experience was an opportunity for residents to socialise and the atmosphere was relaxed and unhurried. The food was attractively presented and included a choice of meal. There was a variety of drinks available. It was observed that residents were enjoying their meal and their dining experience.

There was enough staff supervision in place throughout the serving of the meal. Discussion with residents confirmed that the food provision was good and there was always a choice of meal offered.

Activities for residents were provided which included both group and one to one activities. The importance of engaging with residents was well understood by the manager and staff. Residents were able to decide their own activities during their stay in the home. On the day of the inspection the residents were doing some baking in the morning and went out on a bus trip in the afternoon.

For those residents who preferred not to participate in the activity; staff were observed sitting with them and engaging in discussion. Residents also had opportunities to listen to music or watch television or engage in their own preferred activities.

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 and staff recorded regular evaluations about the delivery of care.

3.3.4 Quality and Management of Residents' Environment

The home was clean, warm and comfortable for residents. Communal areas were well decorated, suitably furnished and homely.

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.

Fire safety measures were in place and well managed to ensure residents, staff and visitors to the home were safe.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mr Sean Greene is the registered manager of this home.

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

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.

A review of the accidents and incidents records evidenced that, whilst these were appropriately managed these were not always notified to RQIA as required. The notifications identified by RQIA were submitted to RQIA retrospectively following the inspection. This was identified as an area for improvement.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with Regulations and Standards.

	Regulations	Standards
Total number of Areas for Improvement	0	1

Areas for improvement and details of the Quality Improvement Plan were discussed with Sean Greene, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (Dec 2022)	
Area for improvement 1 Ref: Standard 20.15 Stated: First time To be completed by: As from the date of this inspection (25 July 2025)	The registered person shall ensure that as required accidents, incidents or other events are reported to RQIA. Ref: 3.3.5 Response by registered person detailing the actions taken: All incidents, accidents or significant events will be reported to RQIA in accordance with the Guidance for Registered Providers and Managers of Regulated Services.

Please ensure this document is completed in full and returned via the Web Portal



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