

# Inspection Report

<b>Name of Service:</b>	<b>Fairways - Duncreggan</b>
<b>Provider:</b>	<b>Fairways Duncreggan Ltd</b>
<b>Date of Inspection:</b>	<b>24 October 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>	Fairways - Duncreggan
<b>Responsible Individual:</b>	Mr Robert Anthony (Tony) Dunlop
<b>Registered Manager:</b>	Mrs Sonia Bradley
<b>Service Profile –</b> This home is a registered residential care home which provides health and social care for up to 14 residents within the category of learning disability. The home is over three floors with resident bedrooms located on all three floors. Residents have access to communal lounges, a dining room and outside space.	

## 2.0 Inspection summary

An unannounced inspection took place on 24 October 2025, between 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. Details and examples of the inspection findings can be found in the main body of the report.

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

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 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. 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 who were able to share their opinions on life in the home said or indicated that they were well looked after. Residents who were less able to share their views were observed to be at ease in the company of staff and to be content in their surroundings.

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

Questionnaires returned from staff confirmed that they were very satisfied that the care provided in the home was; safe, effective, compassionate and well led. Comments included "The home fosters a true sense of community" and "Everybody works together".

Questionnaires returned from residents and relatives noted positive responses. Comments included "The staff are kind, thoughtful and caring", "staff make me feel safe" and " My sister is happy with all staff"

### 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. Discussion with the manager confirmed that there had been no new recruitment since the previous care inspection and confirmed systems were in place to ensure staff were recruited safely.

Staff should have recorded individual, formal supervision at least twice per year; and a recorded annual appraisal to enhance their role and assist with personal development. Discussion with the manager and review of records confirmed that a supervision and appraisal matrix had been developed and was ongoing.

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, staff and the manager 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, using colouring pencils or watching television.

#### 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, where a shortfall was noted in one record, the manager provided assurance that the record would be addressed. 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, tidy and welcoming. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable

Discussion with staff and observation identified two areas within the home that required new glazing. The management confirmed that this was being addressed and additional measures were in place to maintain the safety of residents and staff.

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.

Review of records and observations confirmed 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. Mrs Sonia Bradley has been the Manager in this home since 30 October 2005.

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

There was evidence that the manager 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.

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 Sonia Bradley, Registered Manager as part of the inspection process and can be found in the main body of the report



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