The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Thackeray Place

Provider: Western Health and Social Care Trust

Date of Inspection: 20 January 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:	Western Health and Social Care Trust (WHSCT)
Responsible Individual:	Mr Neil Guckian
Registered Manager:	Miss Carrie Simpson – not registered
Service Profile – This home is a registered residential care home which provides health and social care for up to 21 residents. The home is divided into two units. One unit provides care for 14 residents under the old age category of care and the other unit provides care for seven residents under the dementia category of care. Both units are on a ground floor level with each having shared communal lounge and dining areas.	

2.0 Inspection summary

An unannounced inspection took place on 20 January 2026, from 9.25 am to 2pm. The inspection was conducted by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to assess progress with the three areas for improvement identified by RQIA, during the last care inspection on 24 June 2025; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

Two previous areas of improvement were met and one previous area of improvement was stated for a second time.

There was safe, effective and compassionate care delivered in the home and the home was well led by the manager.

It was evident that staff promoted the dignity and well-being of residents.

Two new areas requiring improvement were identified during this inspection. These were in respect of submitting a time bound action plan in response to the fire safety risk assessment and making good the external fire exit paths.

Residents said that living in the home was a good experience. Residents were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Positive feedback was also received from two visiting relatives.

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 said they were very happy in the home and that staff were kind and attentive. They also said that they enjoyed the meals and there was a nice atmosphere in the home. Some of the comments made included the following statements "The staff have been very good and kind to me", I am very happy here. All is lovely" and "They (the staff) look after me well."

Two visiting relatives said that they were very happy with the care provided and they felt it was a lovely home.

Staff spoke positively about the provision of care, their workload, teamwork, training and managerial support. Staff also said that there was a good staff morale and the home was a nice place to work.

3.3 Inspection findings

3.3.1 Staffing Arrangements

Residents said that there was enough staff on duty to help them. 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.

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

Staff training was maintained on a regular and up-to-date basis, other than dementia awareness training for care staff. This area of improvement has been stated for a second time.

3.3.2 Quality of Life and Care Delivery

Staff were knowledgeable of individual residents' needs, their daily routine wishes and preferences.

Staff 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 skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs.

It was observed that staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly. Staff were also observed offering residents choice in how and where they spent their day or how they wanted to engage socially with others.

3.3.3 Quality and Management of Residents' Environment

The home was clean, tidy and fresh smelling throughout, with a good standard of décor and furnishings being maintained. Residents' bedrooms were suitably furnished and personalised. Communal areas were suitably furnished and comfortable. Bathrooms and toilets were clean and hygienic.

The catering and laundry departments were tidy and organised.

Cleaning chemicals were stored safely and securely.

All staff were in receipt of up-to-date training in fire safety. Fire safety records were appropriately maintained with up-to-date fire safety checks of the environment and fire safety drills.

The home's fire safety risk assessment dated 2 July 2025. There were recommendations from this assessment which were outstanding. An area of improvement was made for a time bound action plan to be submitted detailing how these recommendations will be addressed.

Fire safety exits were free from obstruction, however some external fire exit paths had excess moss which posed as a slip hazard. An area of improvement was made to make good.

Review of records, observation of practice and discussion with staff confirmed that effective training on infection prevention and control measures and the use of PPE had been provided. Staff were also seen to adhere to correct IPC protocols.

3.3.5 Quality of Management Systems

Miss Carrie Simpson is the acting manager of the home. Staff spoke positively about the managerial arrangements in the home, saying that they would readily feel comfortable about raising any issue of concern.

It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk. Discussions with staff confirmed knowledge and understanding of the safeguarding policy and procedure. Staff also said that they felt confident about raising any issues of concern to management and felt these would be addressed appropriately.

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 the resident's next of kin and their aligned named worker, and as appropriate to RQIA.

The home was visited each month by a representative on the behalf of the responsible individual to consult with patients, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail. These reports are available for review by residents, their representatives, the Trust and RQIA.

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	1	2*

* The total number of areas for improvement includes one that have been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with Miss Carrie Simpson, 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 Regulations (Northern Ireland) 2005	
Area for improvement 1 **Ref:** Regulation 27 (4) (a) **Stated:** First time **To be completed by:** 20 February 2026	The registered person must submit a time bound action plan detailing how the recommendations from the fire safety risk assessment, dated 2 July 2025, will be addressed. Ref: 3.3.4
	Response by registered person detailing the actions taken: A time bound action plan has been completed outlining how the recommendations from the fire safety risk assessment, dated 02.07.25 will be addressed.
Action required to ensure compliance with the Residential Care Homes Minimum Standards (Dec 2022)	
Area for improvement 1 **Ref:** Standard 23.4 **Stated:** Second time **To be completed by:** 20 March 2026	The registered person should ensure all care staff are in receive of dementia awareness training. Ref: 3.3.1
	Response by registered person detailing the actions taken: All staff have completed Dementia Awareness eLearning.
Area for improvement 2 **Ref:** Standard 27.5 **Stated:** First time **To be completed by:** 20 February 2026	The registered person shall make good any slip hazards to the external fire exits paths. Ref: 3.3.3
	Response by registered person detailing the actions taken: Estates have attended and power washed the external fire exit paths.

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

The Regulation and Quality Improvement Authority

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