The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Bradley Manor**

Provider: **Healthcare Ireland (Belfast) Limited**

Date of Inspection: **28 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:	Healthcare Ireland (Belfast) Limited
Responsible Individual:	Ms Amanda Mitchell
Registered Manager:	Mrs Julie Watson
Service Profile – This home is a registered residential care home, which provides health and social care for up to 21 residents living with dementia. There is in internal garden which residents have access to.	

2.0 Inspection summary

An unannounced inspection took place on 28 January 2026 between 10.00 am and 2.40 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 assess progress with the areas for improvement identified, by RQIA, during the last care inspection on 11 June 2025, and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

RQIA also received information from a relative, and the Northern Health and Social Care Trust (NHSCT), which raised concerns in relation to staffing arrangements; restrictive practices; the mealtime experience; and the management and governance arrangements in place regarding Adult Safeguarding.

The inspection established that safe, effective and 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 evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable and well 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.

As a result of this inspection three areas for improvement were assessed as having been addressed by the provider. One area for improvement will be reviewed at a future medicines management inspection. No new areas for improvements were identified. Full details, 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 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 spoke positively about life in the home. Comments included, "The staff are excellent," and, "The girls know me, the care is excellent." Residents who were less well able to share their views were observed to be at ease in the company of staff and to be content in their surroundings.

One resident told us, "I have no concerns over the care, the staff are brilliant and there is plenty to do." Another resident said," I have no concerns over the care, the staff are very attentive and the food is good. There is plenty of activities."

A visiting professional spoke of how, "The staff are excellent, very organised, and that communication was good with staff."

Residents told us that staff offered them choices 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.

3.3 Inspection findings

3.3.1 Staffing arrangements

There was evidence 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.

Residents said that there was enough staff on duty to help them. Staff said there was good teamwork and that they felt well supported in their role and morale was good. Staff said that they were satisfied with the staffing levels in the home, to meet the needs of residents.

It was observed that there was enough staff in the home to respond to the needs of the residents in a timely way; and to provide residents with a choice on how they wished to spend their day.

3.3.2 Residents environment and restrictive practices

The home was clean, tidy and well maintained. Resident's bedrooms were personalised with items important to the resident. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable. A new covered smoking area was in pace for residents in the internal garden.

Internal doors to exit the home all had an electronic system for access and exit. Staff spoken with were satisfied with the security of the unit.

Bedroom doors were not locked unless a resident themselves held a key, and locked their own door.

3.3.3 Mealtime experience, care records and activities

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. The dining experience observed was an opportunity for residents to socialise; music was playing, and the atmosphere was calm, relaxed and unhurried. Staff provided support and supervised the lunchtime meal; and residents were enjoying their lunch. It was evident that staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed. Staff commented positively on the mealtime experience for residents and demonstrated their knowledge of residents' specific mealtime care needs.

Care records examined were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care plans directed staff sufficiently in how to deliver one to one care for those residents requiring this level of care. Care staff recorded regular evaluations in residents' records about the delivery of care.

The activity therapist was doing an arts activity with residents in the lounge with residents on the morning of the inspection, residents commented on how much they enjoyed this.

Review of records, discussion with staff and observation of the activities delivered evidenced that residents' needs were met through a range of individual and group activities such as musical activities, arts and crafts, bingo and chair exercises. Staff also recorded if a client did not wish to participate in an activity, which is good practice.

3.3.4 Management and governance arrangements in place regarding adult safeguarding.

There has been no change in management of the home since the last inspection. Mrs Julie Watson has been the manager in this home since 10 December 2018.

While the Belfast Health and Social Care Trust (BHSCT) are the lead safeguarding agency and have the responsibility to protect and/or investigate any safeguarding concerns about individual residents, the Provider also has the responsibility to ensure there are safe and effective systems in place to ensure vulnerable adults are safeguarded from harm. Review of records and discussion with the manager and the staff team demonstrated that safe systems are in place and kept under review. For example, the manager was the appointed person for safeguarding. Staff spoken with were able to demonstrate their knowledge regarding adult safeguarding, and staff training compliance figures for safeguarding were at 99%.

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*

* the total number of areas for improvement includes one standard which is carried forward for review at a future medicines management inspection.

This inspection resulted in no new areas for improvement being identified. Findings of the inspection were discussed with the manager and regional manager as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (version 1.1 Aug 2021)	
Area for improvement 1 **Ref:** Standard 30 **Stated:** First time **To be completed by:** From the date of the inspection onwards (9 April 2024)	The registered person shall ensure that the administration of liquid medicines and inhaler preparations is appropriately monitored to ensure they are administered as prescribed. Ref: 2.0
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.

The Regulation and Quality Improvement Authority

The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel: 028 9536 1111

Email: info@rqia.org.uk

Web: www.rqia.org.uk

Twitter: @RQIANews