THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

Name of Registered Establishment: Holywood Care Home (RQIA ID: 1666)	**Name of Registered Person:** Beaumont Care Homes Limited Mrs Ruth Burrows Responsible Individual
Address of Registered Agency: Holywood Care Home, 221 Old Holywood Road, Holywood, BT18 9QS.	
Issue Date: 13 November 2025	**FTC Ref:** FTC000250

Regulation not complied with:

The Nursing Homes Regulations (Northern Ireland) 2005
Registered person: general requirements

Regulation 10.- (1) *The registered provider and the registered manager shall, having regard to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill.*

Specific failings to comply with regulations:

During the inspection on 16 October 2025, significant concerns were identified regarding the effectiveness of governance arrangements, managerial oversight and the overall culture in the home. Concerns were also noted in regard to a lack of progress relating to areas for improvement identified during previous care inspections conducted on 9 and 10 November 2022, 12 and 13 June 2023 and 27 February 2025.

Significant concerns were identified in relation to the management of the home's environment and infection prevention and control practices. For example, patient equipment, such as shower chairs and a shower table, had not been effectively cleaned between each use; corridor carpets in the dementia unit and Dunville unit were worn and stained; a number of hand sanitisers were either broken or empty throughout the home; and a number of patients' beds had been 'made up' with stained bed linen. In addition, bed linen was mismatched speaking to an overall culture within the home that this was the acceptable standard for patients.

Two baths in the home were out of order, one of which had an 'out of order' sign in place dated from April 2024. This lack of adequate bathing facilities within the home over a protracted period adversely affects patients' choice. The manager confirmed following the inspection that while one bath was now operational, a second one

remained unavailable to patients. RQIA are seriously concerned that these maintenance issues had not been addressed in a proactive and timely manner until RQIA intervened in the best interests of patients.

RQIA were also very concerned with the feedback from patients in the home regarding a lack of staff engagement and that care delivery was 'being rushed'. Specific examples were discussed with the Responsible Individual during an Intention to serve Failure to Comply Notices meeting, which was convened on 7 November 2025.

Staff in the Dunville and dementia units raised concerns regarding staffing levels and arrangements for staff deployment with the potential to affect the quality of care delivery to patients.

Observations during the lunch time meal service evidenced that staff were primarily task focused, attending to the functional aspect of the meal delivery with limited evidence of meaningful engagement and/or social interaction with the patients throughout their dining experience.

A number of patients were seated in the lounge area for their meal with round tables in front of them that were not conducive for patients to enjoy their meals in a comfortable and relaxing manner. The use of these tables had been discussed at the previous inspection on 27 February 2025, but had not been addressed.

One patient was observed sleeping with their meal in front of them for at least 20 minutes. When asked, staff told us that the patient did not like the meal provided and inspectors had to intervene to ensure that an alternative meal was provided. It is very concerning that RQIA had to intervene to ensure a patient's needs were met.

A review of the home's activity programme and associated records evidenced the need for improvement in regard to the system in place for delivering meaningful and patient centred activities. For example, within patient records it was difficult to find evidence of any assessment of need in respect of activities or socialising, including information such as, individual preferences or wishes, life story work, patient participation levels or any evaluation of outcomes of activity for patients.

RQIA are concerned that an area for improvement in relation to activity provision, which was first identified during an inspection on 9 and 10 November 2022 remains unmet; the impact on patients was evident given the lack of meaningful engagement or interaction between patients and staff who were observed in addition to those comments made by patients during this inspection.

In addition, a number of concerns were evidenced within patient care records, for example, nutritional care plans, mobility risk assessments, wound care plans, records for patient admission / readmission to the home and the monthly and daily evaluations of care. Recording and review of care records was inconsistent resulting in care plans and/or risk assessments that did not reflect the current needs of patients.

Amendments made to patient records by registered nursing staff were not in keeping with professional guidance as stated in section 10 of the Nursing and Midwifery Council

(NMC) professional code in that, they were not attributed to the person making them, were not signed or dated and some entries were illegible.

RQIA were unable to determine the registration status of care staff with the Northern Ireland Social Care Council (NISCC) from the records provided during the inspection.

Whilst there was a programme of audits in place, there was a lack of evidence demonstrating that these were effective in driving the necessary improvements in an effective and sustained manner. The falls analysis and weight loss audit were not available and other audits such as the restrictive practice audit had not been updated since August 2025.

RQIA were not assured that this audit system is sufficiently robust to achieve compliance with previously stated areas for improvement and therefore enhance the quality of care delivery to patients which is focused on promoting their, health, safety and welfare.

Action required to comply with regulations:

The registered person shall ensure:

- a manager is appointed who is in day to day operational control of the home and meets the standards for registration with RQIA
- equipment is kept clean and in a good state of repair
- there is an effective system in place for staff to report maintenance issues, faults or required repairs and there is evidence of timely managerial oversight of same
- patients' beds are made up with clean, matching bed linen
- staffing levels in the home are reviewed to ensure they meet the assessed needs of patients in each unit at all times
- patients are supported to receive a meal that they will enjoy
- there is a system in place to evidence that management regularly monitor/review the quality of life as experienced by patients. This includes but is not limited to; the quality of patients' mealtime experience, the provision of activities and how patients are enabled to make choices about how and where they spend their day
- where activities are provided, this is evidenced within patients' care records
- staff are supported through training or other means, to meaningfully engage with patients
- there is an effective system in place to ensure that the patients' care plans are reviewed and updated regularly to reflect their current needs
- staff training is provided in relation to record keeping and accountability and this training is monitored to ensure it is embedded into practice
- a robust system is put in place to ensure that all staff are registered with the relevant professional body
- the home's governance systems, including the monthly monitoring reports conducted under Regulation 29, are reviewed to ensure they are sufficiently robust to identify, drive and sustain improvements.

The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 8 January 2026

Signed…… **……**

pp Director of Adult Care Services

This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Home Regulations (Northern Ireland) 2005

It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.

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Holywood Care Home (RQIA ID: 1666)	Beaumont Care Homes Limited Mrs Ruth Burrows Responsible Individual
Address of Registered Agency: Holywood Care Home, 221 Old Holywood Road, Holywood, BT18 9QS	
Issue Date: 13 November 2025	**FTC Ref:** FTC000251

Regulation not complied with:

The Nursing Homes Regulations (Northern Ireland) 2005

Further requirements as to health and welfare

14-(2) *The registered person shall ensure as far as reasonably practicable that –*
(a) all parts of the home to which patients have access are free from hazards to their safety;
(c) unnecessary risks to the health or safety of patients are identified and so far as possible eliminated;

Specific failings to comply with regulations:

RQIA first stated an area for improvement, specifically relating to the management of risk and hazards within the home's dementia unit in November 2022. This area for improvement was stated for a third time in February 2025.

During the unannounced inspection on 16 October 2025, a number of environmental hazards were observed which had the potential to place patients at risk of harm within the dementia unit and throughout the rest of the home.

In the dementia unit, toiletries were accessible within unlocked cupboards. Plastic locks were fitted to some cupboards, one was observed to be broken and another unlocked. A staff cloakroom containing water bottles, a bag and coats was left unlocked. The sluice door was propped open with a bin; cleaning chemicals such as Actichlor tablets were accessible in a cupboard alongside a box of chocolates which were stored there inappropriately.

A selection of food and drinks were accessible in a number of rooms throughout the dementia unit. Patients who were at risk of choking due to dysphagia, some of whom lacked the ability to manage risks to themselves, had unrestricted access to these foods.

In the Dunville unit, the nurses' station and treatment room was unlocked, unattended and therefore accessible to patients. Medicine cupboards and the medicine fridge within this room were also unlocked allowing unrestricted access to multiple medicines including thickening agents. Staff belongings were also accessible within this area.

A domestic trolley was left unattended in a bedroom on the first floor general nursing unit with cleaning chemicals accessible to patients/visitors.

RQIA are concerned that the management and staff have failed to recognise and robustly manage the potential and significant risks to patients resulting from the environmental hazards outlined above.

Action required to comply with regulations:
The registered person shall ensure:

- there is an effective system in place to identify and minimise risks to patients from environmental hazards as far as reasonably practicable
- observations of the environment demonstrate that it is well managed to reduce unnecessary risks to patients
- Staff can demonstrate their understanding of the system to identify, recognise and manage various types of hazards to patients commensurate with their role and responsibilities.

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