



## Inspection Report on

**Belle Vue South Wales Ltd**

**Belle Vue Care Home  
207-211 Newport Road  
Cardiff  
CF24 1AJ**

## **Date Inspection Completed**

19/06/2024

**Welsh Government © Crown copyright 2024.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk) You must reproduce our material accurately and not use it in a misleading context.*

## About Belle Vue South Wales Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	BELLE VUE SOUTH WALES LTD
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	23 March 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are happy, appeared well cared for and comfortable living at Belle Vue. Care staff are kind, attentive and respectful. People and their relatives are complimentary about the service and feel well informed. Personal plans are in place to help staff understand people's needs and preferences. Daily care records confirm people receive consistent care to meet their needs. There is good access to healthcare and people receive the right medication when needed.

People benefit from staff that feel well supported by management. The manager gave assurance that people will be involved in their reviews in the future. The responsible individual (RI) regularly visits the service to keep well informed. A new deputy manager has recently been appointed and is experienced and suitably qualified for their role.

We recognise that the service provider is committed to making improvements at the service. Since the last inspection, we noted steps have been taken to improve the environment and give staff the opportunity to undertake additional core training for the role. However, the areas for improvement will remain to allow additional time to fully meet the regulatory requirements.

## Well-being

People have control over their day-to-day routines, choices, and preferences. The home meets with people prior to admission to assess the home is suitable to meet their needs. We observed people being enabled to choose how they spend their day. Care staff provide people with kindness and empathy. Care staff provide people with choices of meals and menus confirm dietary requirements are met. People are encouraged to get involved in activities of their choice which they look forward to. People and their representative's views are important to the service and they have been complimentary about the service.

The service provided meets people's physical and emotional needs. There are personal plans in place to inform staff of the care needs of the person and the associated risks. Further work is taking place to make them detailed and more person-centred. Daily care records show people receive the consistent care and support they need. Records confirm that there are safe medication systems in place to ensure people receive the right medication. We found health referrals are made when required. Accidents and incidents are reported and we found that care staff took the appropriate action to safeguard the person.

The environment is clean and warm but further maintenance work is needed to ensure the home is safe for people to live in. The communal space encourages people to socialise together. A person told us "*I like spending time with my friends, I love the company.*" The environment is welcoming and homely. Most people's rooms have a homely feel because they include people's personal items of importance such as framed photos of their family. Since the last inspection, the service provider has financially invested to update some areas in the home but further improvement is required, particularly in the garden area. There is a refurbishment plan in place and being worked towards. We will review the progress at the next inspection.

There is good leadership and management in the home. The RI visits regularly to keep informed and to seek people's views about the service. There are effective quality assurance arrangements in place to monitor and evaluate the performance of the home. The manager feels well supported by the RI. The care staff receive consistent support and told us the management is always available and helpful. Since the last inspection, the staff have undertaken additional training but further improvement is required. This is important to help care staff to understand the conditions and needs of people they support. The manager gave assurance that this will be addressed.

## Care and Support

People are happy and benefit from positive interactions with care staff. People have the choice to socialise with others or spend time in their bedrooms. A person told us *"I love the company and made some friends which I like."* We saw care staff present in the lounges and frequent visual checks are made when people spend time in their rooms. Records show people receive timely support and care in a way that promotes dignity. The home is recruiting a dedicated person for activities. In the meantime, an extra staff member is available to organise and promote activities. During our visit, we saw people enjoying a sing along and other activities of interest. Care staff were attentive in their approach and people appeared very relaxed and comfortable. They described the care staff as *"lovely and kind."* We saw staff being very friendly, caring and respectful.

Personal plans are in place to promote people's well-being outcomes but could be further strengthened. Assessments are undertaken prior to admission to ensure the home is suitable. Personal plans are developed to help care staff understand people's needs, their preferences and associated risks. At the time of inspection, the management team was working on the personal plans to make them detailed and more person-centred. Regular reviews are taking place but people or their representatives must be given the opportunity to contribute. We agreed that this was an area that required strengthening and will follow up at the next inspection.

People's physical health and well-being is monitored. People have good access to healthcare services when needed. We found appropriate referrals are made to health professionals and people receive nursing care from community services. A relative told us *"The staff keep me well informed of any changes."* There are safe systems in place for the management of medications. Records confirm people receive the right medication. The manager intends to put personal plans in place for people that require ("PRN") when required medication. This is important to help care staff understand when to administer the medication and monitor the effectiveness. There are regular audits of the medication which show good safe practices from care staff. The medication policy is under review to reflect current guidance. People's diet and weight is monitored. People have access to regular drinks of their choice. There is a varied menu of homemade meals and dietary requirements are catered for. The meal appeared well presented and in good portions. Care staff positively engage with people and provide the right level of prompting and assistance to promote good nutritional intake. The home was awarded a Food Hygiene Rating of 4 (good) on the 08 March 2024.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Most care staff are trained in safeguarding and understand the importance of their role. The safeguarding policy is under review to reflect current guidance. Care staff feel able to raise concerns to the manager or the RI. A relative told us they are able to raise issues and feel confident that this will be acted upon. Accidents and incidents are reported

and we found the care staff take the appropriate action to safeguard the person. Deprivation of Liberty Safeguard (DoLS) applications are made where people lack mental capacity to make decisions about their care and accommodation to keep them safe. The manager gave assurance that personal plans will be updated to reflect the arrangements and the regulator will be informed.

## Environment

People benefit from living in a home which supports their personal outcomes, but further improvements are needed. Belle Vue is welcoming, homely, and comfortable. The entrance to the home appeared welcoming and colourful with flowers and there is a bench for people to spend time. The home comprises of a series of communal areas, where people can socialise and engage in activities. Most bedrooms are decorated to people's personal preferences and interests. The bathrooms are well-equipped and clean. Since the last inspection, investment has been made in the environment including, redecoration of many areas, new furniture, replacement fire doors and glass for windows and other developments. The manager informed us of the refurbishment plan, which is being worked on in priority order and there is good progress being made. Since the last inspection, we note the garden area has been tidied, but remains unsafe to use without staff support due to being poorly maintained and not fully secure, this would pose a risk to people. This is contrary to the information within the statement of purpose which informs people of what they can expect. The outside space is valuable to provide people with solitude and social opportunities. In addition, we noted other areas in the home that require maintenance and updating, which had already been identified in the refurbishment plan. Therefore, this area for improvement will remain outstanding from the last inspection. This will allow the service provider additional time to address these issues, and we will follow up at the next inspection. Visiting is unrestricted at the service and a relative told us that they always feel welcome and are offered private space to meet with their loved one.

There are servicing arrangements in place to ensure equipment and facilities are up-to-date and safe for use. The fire risk assessment is due to be reviewed and fire systems are regularly tested. Most staff have received training in fire safety and understand their role and responsibilities. People living at the service have a personal emergency evacuation plan (PEEP's) in place which is important to guide care staff on how to evacuate people safely in the event of an emergency.

There are good infection control measures in place. Housekeeping staff have the products they need to keep the service clean and follow schedules to ensure standards are maintained. Housekeeping staff are appropriately trained for their role and understand the importance of infection control and health and safety. We noted that the harmful chemicals are stored securely and safely. The environment was free from any hazards that would pose a risk to people with an impairment. There are arrangements in place to dispose of personal protective equipment (PPE) appropriately.

## Leadership and Management

People can access the statement of purpose and service information guide to inform them about what they can expect from the service. The manager told us that the information is due to be updated and will also be sent to the regulator, as required. This information should be available in other formats to meet the language needs of people living in the home. The service does not provide an 'Active Offer' of the Welsh Language. Currently there is a person living in the home that can communicate in the Welsh language. There are currently no Welsh speaking staff. The service provider is exploring ways to promote the Welsh language in the future. However, there is a multi-cultural staff team who are able to communicate in many other languages.

People benefit from good governance and leadership at the home. The RI regularly visits the service to communicate with people and observe service quality. The RI produces a quality of care review every six months to evaluate and improve the service. The quality assurance information shows that people and their relatives have been very complimentary about the service they receive. There are regular audits around medication, the environment and health and safety which helps to ensure practices remain at a good standard. The manager told us the RI is supportive and cares about the service. The care staff described the manager as *"Always supportive, helpful and works hard for the best possible outcomes for people."* In the last few months, a new deputy has been appointed and they are working closely alongside the manager.

The service has a safe system for recruiting staff. Staff personnel files contain the necessary checks to ensure they are safe and fit to work at the service. Disclosure and Barring Security (DBS) checks are in place and current. Care staff are registered with Social Care Wales (SCW), the workforce regulator.

Care staff receive support and training but some improvement is needed. Newly appointed care staff complete an induction programme which includes some training, shadowing experienced staff and competency checks to ensure they can perform specific care tasks. The care staff told us *"We work well together"* and *"We are supportive of each other."* Records show that care staff receive regular supervision and feel supported by the senior carers and the management team. They are working on improving the quality of the supervisions and offering annual appraisals to staff. This is important to give an opportunity for staff to self-reflect on their practice, seek support, and discuss their professional development. Since the last inspection, we recognise progress has been made to offer care staff core training for their role, but further improvement is required. This is important for care staff to understand the specific conditions and needs of people they support. Therefore, the area for improvement will remain outstanding from the last inspection to allow the provider additional time and we will follow up at the next inspection.



Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status

N/A	No non-compliance of this type was identified at this inspection	N/A
36	Staff to receive core training in all areas to enable them to understand the needs and specific conditions of people they support	Not Achieved
44	The home environment requires further work and the garden requires maintenance	Not Achieved

### **Was this report helpful?**

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

**Date Published** 15/07/2024