



Belmont Court



Belmont Court, Heywood Lane, Tenby, SA70 8BN



01834 842770

Date(s) of inspection visit(s):

23/05/2025, 23/05/2025, 20/05/2025,
04/06/2025

Service Information:

Operated by:	RCH(wales) Ltd
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	29
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture, or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Belmont Court provides care and support to adults who may have nursing needs. The service is situated in the seaside town of Tenby, near a leisure centre, restaurants and places of interest. The home has an accessible garden area. The aim of the service is to maintain people's physical, emotional and mental wellbeing, whilst maintaining family and personal relationships.

At this inspection, we found the care and support people receive and the environment they live in support them to achieve good well-being outcomes. The service is currently reviewing how to improve activities at the service to further enhance people's wellbeing. Leadership and management at the service is good because staff are supported by an approachable and accessible leadership and management team.

Findings:



Well-being

Good

People live with dignity and respect and receive appropriate, kind, and caring support from care staff they know. Staff have good rapport and professional relationships with people. We observed a relaxed and friendly atmosphere at the service. Positive interactions were observed. Empathy and care are shown to people, who have as much autonomy over their own lives as possible. People, their representatives and an external professional told us care staff are '*friendly*' and '*helpful*'.

People have opportunities to engage in activities organised by a part-time activities co-ordinator. People also benefit from planned events at the service. We heard about a visiting singer who had entertained people in the lounge. Though a few people noted feeling '*lonely*' and '*bored*' at times. The service is currently undertaking a consultation review with all people using the service, into how to improve the wellbeing of people and activities available. We were told the review is particularly focussing on the wishes of people and those who may not utilise the lounge. People enjoy the choice of foods available. Visiting family and friends benefit from an open invitation to dine at the service with their loved ones. A person who uses the service told us, '*We [my relative] have dinner here together. They are good like that*'.

People are safe and protected at the service. People receive care and support from staff who have been safely recruited. Disclosure and Barring Service (DBS) checks are carried out on staff. Staff are trained, supported and are appropriately registered with Social Care Wales or the Nursing Midwifery Council, the workforce regulators. Staff know how to raise concerns. People and their representatives know how to raise a complaint and have confidence in this being dealt with by the manager. People and staff describe an open-door policy in accessing the manager or nursing team.

People live in accommodation which meets their needs and supports people's well-being. The service is a pleasant place to live; bedrooms are nicely decorated and reflect personal tastes. The environment offers people access to communal areas, an accessible garden with sheltered aspects, as well as the privacy of their own rooms.



Care & Support

Good

People are content. The provider uses a variety of information from people, professionals and others involved in people's care to assess their needs and develop personalised plans. An electronic care record system provides instant access to all relevant information staff need to support people well. Personal plans are kept under regular review and are updated as required. Records show people are supported to access medical advice in a timely manner.

Many people experience care and support that is dignified and respectful. People are cared for by a sufficient number of kind, patient, and caring staff. The service does not routinely rely on agency staff. This means consistent staff are knowledgeable about people they support and have developed effective relationships. We saw people and staff laughing and chatting throughout the inspection. A person using the service told us, *'It's alright here'*. A family representative told us, *'My relative seems happy anyway'*.

People choose where to spend their time throughout the day. We saw some people preferred to stay in their own rooms and others sat in the communal areas. A part-time activities coordinator is employed. We were told staff spend time with people in their rooms when their preference is not to use the communal spaces. A few people told us they can feel *'lonely'* and *'bored'* at times. We heard how the service is undertaking a review of people's wishes to further develop how people's wellbeing outcomes are met at the service. We were told the review is particularly focussing on the wishes of people and those who may not utilise the lounge. We will follow this up at next inspection.

People's physical health and overall well-being are promoted. Care records show people receive support to access social and health care professionals when needed. The service understands people's health conditions, the support they require and can promptly identify changes in the usual presentation of people they support. People are supported to maintain a healthy weight and diets are reviewed when required. People have access to a nutritious and balanced diet.

People are protected from harm and abuse because their care needs are referred to healthcare and other professionals quickly, resulting in positive outcomes for people. Medication is consistently stored as required to ensure safety. We read medication audits demonstrating the procedures for maintaining appropriate medication administration standards. There are supplies of Personal Protective Equipment (PPE) in the service for staff to use as required. Good infection control practices were observed with regards to cleaning in the home, helping to reduce the risk of infection.



Environment

Good

The environment supports people to achieve their personal outcomes. The home is welcoming, comfortable, clean and has a relaxed atmosphere. The home provides space for socialising, with comfortable communal living areas and an accessible garden area. Visiting is unrestricted and people can meet with their family members whenever they want, in their own rooms or in one of the communal areas. Rooms are decorated to people's personal preferences and interests if they choose. Individuals have photos of loved ones, keepsakes, and ornaments.

People benefit from a safe and secure environment. We saw procedural oversight of health and safety at the service. Records show checks are carried out around the home to identify and address issues promptly. The service has a maintenance officer with arrangements in place for ongoing maintenance of the service. People are safe from unauthorised visitors entering the building, with visitors having to ring the door to gain access to the service.

The service promotes people's safety. Regular checks of the fire alarms take place at the home. Throughout the course of the inspection, the provider ensured people living at the service have appropriate personal emergency evacuation plans (PEEPs) in place. Copies of PEEPs are available in an easily accessible file should these be required in the event of an emergency.

The home has a five-star rating from the food standards agency which means that hygiene standards are very good. Hygienic practices are followed, and the service manages the risk of infection. We saw Personal Protective Equipment (PPE) and hand sanitising stations located around the home.



Leadership & Management

Good

The service provider has governance arrangements in place. The Responsible Individual (RI) documents their visits to the service and spends time talking to people. The service routinely seeks the views of people about the care and support provided. The statement of purpose (SoP) clearly states what people can expect from the service.

The manager is suitably qualified for the role and is registered with Social Care Wales (SCW), the social care workforce regulator. The manager is in regular communication with the RI. The manager knows people well and is accessible to them and their representatives. The manager is supported closely by a senior nurse. Nursing staff base themselves in a central part of the home, so they are visible and accessible to people at the service. Staff told us management and the nursing team are approachable and always there to help or advise when required. Staff told us they have daily discussions with the management team to inform their work. We were told the service is refining internal quality assurance oversight, including staff training, through the addition of a new administrators post. We will follow this up at next inspection.

We reviewed the service staffing rota and saw that sufficient numbers of care staff are deployed consistently. Newly appointed staff complete an induction programme which includes training and shadow shifts to ensure they can perform specific care tasks in line with their role. The service has systems in place for the safe recruitment of staff. Disclosure and Barring Service (DBS) checks are in place and current. Care staff are registered with SCW and nursing staff are registered with the Nursing and Midwifery Council (NMC), the workforce regulators. Staff personnel files read contained all the information required by Regulations to ensure they are safe and fit to work at the service. Staff training records indicate staff have access to a variety of training opportunities, and staff have completed an acceptable level of training overall. Staff are provided with ongoing support through supervisions, annual appraisals and daily support from the management team. A member of care staff told us, *'It is nice to work here'*.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

Welsh Government © Crown copyright 2025.

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.gov.uk You must reproduce our material accurately and not use it in a misleading context.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

Welsh Government © Crown copyright 2025.

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.gov.uk You must reproduce our material accurately and not use it in a misleading context.