



Inspection Report on

Belle Vue South Wales Ltd

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

Date Inspection Completed

21 February 2022

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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	28 June 2021
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Care and support is provided by care workers who are appreciated and highly regarded by people and their families. People are happy and like living at Belle Vue. Activities are provided to support well-being, and care provision is considered to be good.

The deputy manager currently provides support to the care team and ensures the smooth running of the service in the absence of the manager. All staff are recruited safely, ensuring they are fit to work with vulnerable people.

A responsible individual (RI) has oversight of the home and has worked to secure improvement of the service since the last inspection. They carry out their duties with due diligence.

The provider has identified improvements needed to refurbish part of the home and this is underway. Equipment is routinely tested, serviced and used safely. Consideration needs to be given to improving the safety of the home for people who lack capacity.

Well-being

People or their representatives receive information about the service before they go to live at the home. They are consulted about their care and day-to-day choices. When required, people have representatives to help them make bigger decisions. Families compliment the service on their communication and appreciate being kept informed. All staff show respect for people. Care plans are easily accessible and reflect the individual person and their needs. This information helps care workers support people in the best way possible. The responsible individual consults with people using the service to help understand how the service can improve. The home makes an active offer of providing a service in Welsh.

Care is provided to support daily needs. Professionals are involved when required to provide additional support around health and mental well-being. Activity co-ordinators and sufficient staff provide opportunities for people to socialise or have one-to-one interaction to support their well-being. Contact is maintained with families, even during difficult periods when the home has been closed due to the Covid-19 virus. One family told us "*it's the little things that matter,*" and explained how the service does more than expected, helping people and families not to worry about things such as laundry.

The environment supports people's needs and is being refurbished to support improved well-being. As the home is not fully occupied at present, the bathing facilities are adequate, but improvement is required in the type of bathing facilities available for people who are less mobile. Consideration is needed to the safety of people due to one open stairwell. Lifts, hoist and other equipment is in place and is safely maintained. There is adequate space, people like their bedrooms, and individualise these with personal possessions. Care workers have an understanding how to safeguard people, supported by a current policy and suitable training.

People are treated as individuals. Personal plans contain relevant information to ensure people receive the right care, in the right way, using the right language or communication method. Care workers deliver the care in a dignified way, showing respect for the individual's wishes. People are encouraged to socialise, and when they form friendships within the home, they are supported to maintain these.

Care and Support

People are asked about their needs before they go to live at the home. This helps to ensure the person's needs can be met and personal plans contain necessary documentation. Care plans are developed and stored electronically. Care workers can easily see the agreed support someone needs to be offered. People's dietary needs are noted and the cook is made aware, but more formal records need to be kept to prevent errors. Most care plans are detailed. Daily records are clear, contain detail such as nutrition, professional visits and weight. Activity records are also completed to show if individuals choose to participate in organised activities. Good outcomes for people are observed. One person who struggled with health and mobility has been encouraged and supported, gaining strength and ability following a difficult period of ill health and hospitalisation. Their family acknowledges the care given by the home for this to be achieved.

The deputy manager is currently undertaking all reviews of care plans, which involves speaking to the individual or their representative. Not all reviews are formally recorded but the deputy is aware and working towards this. Families tell us they feel part of their loved one's care as they are consulted about this by the home. One family member told us *"the deputy manager is wonderful, a good communicator, knows all the residents and can tell us about the care. It's what we need."*

The organisation and administration of medication is conducted in a safe way. Improvements have been made to ensure medication that is taken 'when necessary' is documented appropriately. Other records are maintained accurately. The service has identified an issue with timely delivery of some medication from the pharmacy, such as antibiotics, so has taken action to change providers.

Staffing levels are observed to be good. People receive appropriate care in a timely manner. People look clean and presentable. The service is finding difficulty sourcing a good hairdresser, so some people's hair is not as well kempt as usual. There is a current focus on recording nutrition and hydration. This impacts on the dining experience at times as some care workers are forgetting to engage with people as they support. However, we observed lovely interactions between care workers and people, showing a mutual respect for each other. We are told by people or their families' staff are *"kind"*; *"friendly"*; *"polite"*; *"knowledgeable"*; *"always caring"* and are *"welcoming"*.

People have choice of where to be, who to be with and what to do. Activity co-ordinators support a variety of group and individual activities. People tell us they enjoy the activities offered. One family member told us that their loved one found a new talent for singing as she was encouraged by the home to participate in a singing group.

Environment

The provider has agreed a refurbishment program for the home to improve flooring, décor and some equipment. We saw the replacing of flooring in corridors on the ground floor being well-managed. One person told us they liked their room and families told us that some traditional pictures around the home suited the people who live there. The provider has identified that some furnishings need replacing as part of the improvements, this includes beds and chairs where infection control could be an issue due to worn covers. These were not removed immediately as we would expect.

Mechanisms are in place, including audits to check the environment. Regular testing and maintenance of equipment and services such as gas are undertaken. Some doors have a number keypad to help keep people safe and stop them from entering areas where they may be at risk, such as stairwells. One keypad was not working on the day of inspection. We noted that one stairwell did not have a means to prevent people from accessing this independently, so some people could be at risk. The provider needs to address this as part of the refurbishment. We found tall furniture was not secured to walls, increasing the risk of these items falling on people.

The home mostly has suitable equipment to support people with their mobility needs, including hoists and a bath seat that rises and lowers. Several bathrooms have a standard bath with no physical support mechanisms to aid people with mobility issues. Whilst this is not a concern at the present time as the home is not fully occupied, the provider needs to ensure there is enough accessible facilities to support people and offer choices of bathing or showering without moving from floor to floor.

Though the provider has identified the environment as an area for improvement, people's well-being and safety are being affected. While immediate action is not required, this is an area for improvement and we expect the provider to take action. This will be considered at the next inspection. The provider has given assurances that this will be addressed immediately.

Communal areas provide enough space for people. An enclosed garden is accessible and used during warmer months. Fish tanks internally, and a fish pond externally provide points of interest for people. Bedrooms are individualised with items people have chosen to bring with them to the home.

Infection control measures are undertaken. A laundry service provided by the home is of a high standard. The member of staff who supports this is commended by families and residents. One family member told us "*very impressed with the laundry*" and another told us "*laundry service is excellent.*" Care is taken to launder garments well but also to ensure individuals have their own clothes returned to them.

Leadership and Management

The responsible individual has continued to improve oversight of the service. They visit the home regularly and evidence that they engage with people and staff to gain their views. They also check documents, discussing findings with the management team. Reports are made available to authorities to evidence oversight of the service by the RI. A statement of purpose, which is a document to show how the service is provided, has been updated. The resident's handbook has yet to be updated to reflect current management arrangements, but is user-friendly and easy to read. Policies are reviewed and updated as necessary. The manager receives appropriate supervision from the RI. The deputy manager is currently undertaking the duties of the manager, as the manager is absent.

Pre-employment checks are conducted for all staff to ensure they are fit to work with vulnerable adults. Personnel files contain appropriate documentation. Training is mostly completed through on-line learning, but some compulsory subjects such as 'First Aid,' are completed face to face. Care workers receive regular supervision meetings and annual appraisal meetings with a line manager to support them in their development. A core of experienced care workers support less experienced members of staff, addressing any concerns as they arise. There have been challenges within the team to improve the culture amongst staff; this continues to be the case, but care workers tell us they are supported by the deputy manager. Care workers appreciate the standard set by the deputy manager who shows dedication, flexibility and knowledge. Staffing levels are observed to be good.

Systems are in place to manage all aspects of the service, including auditing of the environment, equipment, documentation and medication. We saw how audits are effectively used to inform management of patterns so that appropriate action is taken. In the absence of a manager, the deputy manager requires support in order to sustain improvements secured since the previous inspections.

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
43	The service provider is not ensuring the environment is suitable for the needs of the people living at Belle Vue	New

66	Regulation 66. The responsible individual must provide the manager is supported by supervision and training, and has opportunities to gain new skills for professional development	Achieved
13	Regulation 13 (a) and (b) - The service provider must promote a positive work culture and have a system in place to identify and address concerns with their professional duty of candour	Achieved
15	Regulation –15 (1), (a to d) – Care plans and risk assessments to be reflective of people’s needs and the associated risks. Better oversight if accident and incidents in the home to ensure the necessary action is taken.	Achieved
59	Regulation 59 (3) (a) – Care records are accurate and up to date	Achieved
58	Regulation 58 (1) - The service provider must have the arrangements in place for the safe administration of medicines - This is in relation to better management of 'when required' (PRN) medication	Achieved

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