



## Inspection Report on

**Bellavista Nursing Homes (Wales) Limited**

**Bellavista Care Home  
106-108  
Tynewydd Road  
Barry  
CF62 8BB**

**Date Inspection Completed**

27/02/2024

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## About Bellavista Nursing Homes (Wales) Limited

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Bellavista Nursing Homes (Wales) Limited
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	17/10/2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Bellavista Care Home can accommodate 39 residents with nursing and personal care needs. This inspection was unannounced. There is a manager in place who is registered with Social Care Wales, the workforce regulator, in accordance with legal requirement. Jacob George is the responsible individual (RI) for the service.

People receive appropriate care and support from a friendly established care team. There are sufficient staff to provide care, support and assistance with suitable arrangements in place to cover any shortfalls. People live in an environment which is suitable for their needs. The provider has ensured all areas for improvement identified at the previous inspection visit have been met and there is a schedule of ongoing redecoration throughout the home. People live in a pleasant, clean environment which is suitable for their needs. Activities and support in accordance with people's interests and wishes are conducted daily.

The management team are visible and engaged in the day-to-day running of the service. Systems are in place to ensure the quality of care and support are provided. Care documentation reflects the care and health needs living at the home.

The home environment is secure. People are consulted about the care and support they receive. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home.

## Well-being

People have positive relationships with care staff. Care and support is personalised to enable people to achieve their personal outcomes. People told us they are happy living at Bellavista and enjoy positive relationships with staff. Comments included *“Staff are very kind here”* and *“there is lots to do if you want to do it almost every day.”* Care staff are enthusiastic about working at the service. Comments included *“I have worked here many years and would not think of going anywhere else”* and *“we all support each other we are a really good team now.”* Visitors told us they are always made to feel very welcome and offered lunch with relatives/friends if they wish.

People are safeguarded and protected from harm. Their wishes and aspirations are considered, and care staff demonstrate a friendly and kind approach. Care documentation supports the delivery of care provided and we highlighted areas which would improve the documentation further with the management team. Care staff are trained in safeguarding and have policies and procedures to guide them. Safe recruitment checks are undertaken to ensure care staff are suitable to work with vulnerable people. Staff training is up to date and the RI offers additional training as required. The service makes safeguarding referrals when appropriate and informs CIW of notifiable events in a timely manner. Feedback about the service describes it as ‘very good’ from people living in and visiting the home.

The service is suitable for the needs of the residents and management ensure is a safe place for people to work, live and visit. Management oversees the training and supervision needs of the staff. Team meetings take place specific to each worker’s role. The RI demonstrates appropriate oversight of the home to ensure it operates safely and in accordance with its statement of purpose.

Whenever possible, people are supported to have control over their day-to-day life. People mostly follow their own routines each day with support and encouragement from the care staff team. The care staff we spoke with were familiar with people’s individual preferences and these are recorded in the care documentation. People told us their views and preferences are listened to and they can raise any concerns with care staff or the management team.

People are encouraged to have visitors to the home and supported to stay in touch with important contacts.

## Care and Support

Systems are in place to protect people who use the service. People told us they felt safe and happy living at the service. Comments from people using the service included *"I am very happy living here, (resident) I visit every day and staff are kind and can't do enough for us," staff are polite and always helpful.*" (relative) We saw people's body language and expressions indicated they felt safe and secure around the care staff who support them. Systems are in place to ensure people remain safe whilst promoting their independence. A safeguarding policy is available which informs staff of their roles and responsibilities in relation to protecting adults at risk from harm, abuse, and neglect. Records we saw evidence staff have received up to date safeguarding training.

The service has systems in place for medication management. People receive their medication as prescribed. We looked at the medication administration records (MARs) and saw they are appropriately completed. Fridge and room temperatures are recorded daily by staff and we saw the medication room to be clean and organised. However, we identified at the sink/worktop area required replacing. The RI told us this issue would be addressed immediately. The service promotes hygienic practices and manages risk of infection and we saw staff wearing appropriate personal protective equipment (PPE) when required.

Care staff interact with residents in a friendly and extremely respectful manner and show good knowledge of people's wishes, needs and how to respond to them. People's choices are promoted, for example regarding meal, drinks and various snack options and how people wish to spend their time. We observed the meals provided and the dining experience and saw people enjoying the meals provided. We spoke with the chef on duty who told us they always cater for everyone's likes and preferences. We saw special effort goes into presentation at each mealtime, including catering for special events. People told us how they had thoroughly enjoyed special celebrations at the home including birthdays. The chef told us they can cater for any meal that a resident may request and, when a meal is returned uneaten, an alternative is sought and encouraged. The home has achieved a score of four (good) food hygiene rating.

People have timely access to health and other services to maintain their ongoing health and well-being. Information within people's care files evidence referrals and contact with various health and social care services. We saw these referrals were made in a timely manner and whenever people's needs changed. Personal plans include details of people's individual preferences, we found these were respected by staff and management. We highlighted areas which would improve the care documentation further, which included information in the 'All about me section.' We observed care and support being designed through involvement with people and tailored to achieve personal outcomes.

## Environment

People are protected from environmental health and safety risks. There are two floors to the home, each accessible via passenger a lift. The home offers suitable accommodation for the residents and management has shown a commitment to developing and improving it for their benefit. People can be confident that there are effective arrangements at the home that will protect public safety and minimise cross infection. There is oversight to ensure staff follow the correct infection guidance. We found call bell checks are conducted and call bells available throughout all areas of the home.

People have a sense of belonging. The home is large and spacious and offers a wide choice of communal areas for people to sit and enjoy time with others or spend quiet time if preferred. Each area of the home has small dining/lounge areas and we saw people can access all areas of the home for activities or any special events. Bedrooms are personalised with items of people's choice and personal belongings. There are pleasant gardens and people told us they enjoy spending time in these areas during the warmer weather. There is good access and egress for people with reduced mobility living or people visiting the home.

Management oversees the home's health and safety requirements. We considered various records relating to health and safety, which evidenced the provider maintained effective oversight to ensure the environment was safe. From our walk-around we noted window openings that may pose a potential risk to resident's are secure. Staff conduct regular safety checks and people have emergency evacuation plans (PEEP) in place. There is a fire risk assessment in place and staff have training in fire safety and manual handling with all current training up to date including first aid. Environmental audits to ensure areas are clean and safe are conducted daily/weekly and any shortfalls addressed immediately. However, we identified that the keypad/bell at the entrance to the home was not working which we brought to the attention of the RI to address immediately. The maintenance person ensured this was prioritised and repaired the same day.

The home environment and garden area provide a safe, secure, appropriately adapted, and well-maintained home which people told us they enjoy and appreciate. All confidential files including care and staff files were stored securely in lockable areas. All areas identified for improvement at the previous visit have been met.

## Leadership and Management

People can be confident that management monitors the quality of the service they receive. Systems and processes help promote the smooth running of the home. Management oversee incidents, accidents and complaints. The home conducts internal audits to monitor standards and practice. Daily handovers ensure pertinent information is shared between staff at shift handover. We looked at some key policies and saw they are currently under review. The statement of purpose describes the home and its facilities.

People can be confident that staff are competent to undertake their roles and there is a robust recruitment process. We looked at three staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Management oversees staff training and supervision needs, and we saw one-to-one supervision in accordance with regulatory requirements. Supervision provides each staff member with opportunities to discuss their performance, development, and any concerns they may have. Care staff benefit from learning and development opportunities provided and we saw evidence care staff had conducted mandatory training courses as well as any additional training needs required. Staff are supported to register with professional bodies such as Social Care Wales the workforce regulator and the Nursing and Midwifery Council.

People have opportunities to express their views and lodge complaints. The home has a complaints policy in place and the written guide to the service informs people how to raise their concerns formally. Residents/relatives can be confident that the home is operated with their best interests at the forefront of care provision. Mechanisms are in place to protect people. Documents set out and provide people with an understanding of the service they can expect to receive. People using the service and staff know who to approach if they have concerns and people have access to independent advocates if they wish should the need arise. The management team, work with external agencies and notify the Regulator of any incidents in a timely manner.

People benefit from the leadership and management in place to support the smooth running of the service. The RI spends time at the home and engages with staff, relatives, and residents seeking feedback. We requested information relating to monitoring and we saw the recent quality monitoring visit dated 21 December 2023. The information demonstrated the RI undertakes formal monitoring as legally required.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
8	The provider has failed to ensure there is appropriate monitoring and oversight of the home.	Achieved

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