



Inspection Report on

**No 1 Belle Vue
Pontypridd
CF37 1TQ**

Date Inspection Completed

14/10/2024

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

About No 1 Belle Vue

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	16 March 2023
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

No 1 Belle Vue is a respite service for adults with a learning disability. People enjoy staying at the service, receive person-centred care when they are there, and are supported to have control over their day-to-day lives. Care staff have up to date, detailed knowledge of people's needs. The service supports people to stay as healthy as possible during their stay. Systems are in place to help protect people from abuse and neglect. Appropriate measures are in place to promote the safe management and storage of medication. Infection control measures help reduce the risk of transmission of potential sources of infection. The environment is extremely positive, appearing clean, safe, and adapted to people's needs. The service takes appropriate measures to ensure the home is as safe as possible. The service is well-run, with appropriate governance, auditing and quality assurance arrangements in place. The service ensures staff are recruited safely and are suitably trained. Care staff are positive about working at the service and feel supported in their role. The service provides good information to the public.

Well-being

People are supported to have control over their day-to-day lives when they stay at No 1 Belle Vue. Care staff have information on people's decision-making capabilities, know people well and know their preferences. Where a person needs help to make their voice heard, people's families and representatives are supported to do this, being involved in reviews of personal plans before a respite stay takes place. The service has good relationships and lines of communication with relatives, who tell us staff keep them informed and updated.

The service supports people to stay as healthy as possible. Guidance from specialist health professionals is incorporated into people's files and records show this is followed. Care staff receive specialist training where a person has complex health needs. Personal plans are detailed, person-centred, and reviewed each time before a person stays. The service has appropriate infection prevention and control measures. The management of medication is safe.

People are supported in an environment that helps them achieve their well-being. No 1 Belle Vue is an adapted house that caters for a wide variety of needs. Specialist equipment is in place on the ground floor to aid people with mobility needs. Rooms are a good size and comfortable. The service is comfortable and homely and is well-located to local facilities and amenities.

Systems are in place to help protect people from abuse and neglect. Staff know their safeguarding responsibilities and how to report issues if they are concerned for a person's well-being. Staff feel confident if they raise an issue with the management team, it will be responded to. Ongoing training ensures staff are sufficiently skilled. Policies and procedures help support staff to ensure people are safe. Recruitment is effective, and regular staff supervision supports continued development. Incidents and accidents are logged, with appropriate actions taken by the service. Access to the service is restricted to authorised individuals. People's families told us they feel people are safe. The service identifies potential risks to people or staff and how to manage these.

While the service does not routinely provide a service to people in Welsh, it employs some Welsh-speaking members of care staff, all care staff undertake level 1 Welsh language training, and could potentially facilitate a service in Welsh if required.

Care and Support

People receive person-centred care and support. People's relatives told us "*they love it there*", "*they can't stop talking about it after they've been*", and "*they're always happy coming back*". The service assesses respite requests to consider compatibility of people as far as possible, so everyone can enjoy their stay and be safe. Care staff know the people they support well and told us information about their needs, which corresponded with information in people's care files.

Care staff have up to date, detailed knowledge of people's needs. Personal plans are individualised and contain information about people's goals. They are produced in partnership with people and their representatives, with reviews undertaken each time a person stays to ensure they remain up to date. Risk assessments cover relevant areas of care specific to people's needs, which helps promote positive risk taking. Care files contain assessments and guidance from other professionals, such as learning disability psychiatrists and nurses, which supplements and informs people's plans. Service contact sheets contain detailed information about a person's stay, with personal spending records showing people are supported to manage their money. This information is shared with people's families following their stay.

Appropriate systems are in place to promote the safe management and storage of medication. Medication is stored securely. Records show care staff administer medication in line with the prescriber's directions. Care staff receive training in how to manage and administer medication. The service has an up-to-date medication policy in place.

Infection control measures help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place which staff are aware of and understand their responsibilities. Care staff use a cleaning rota to direct them to clean the home daily, with the service appearing very clean and well kempt.

Environment

People are provided with an extremely positive environment that is clean, safe, and adapted to their needs. The service is an adapted two storey house, located within a residential area of Pontypridd. It is environmentally secure, with only authorised people able to gain entry. Bedrooms are comfortable and a good size, with specialist tracking hoist equipment in the ground floor bedroom and an adjoining accessible bathroom, meaning people with mobility needs can make use of the facility. There are sufficient toilet and bathing facilities on both floors. Communal areas are very well-decorated, modern and homely, presented to a very high standard. The kitchen facilities allow people to take part in preparing food if they wish, with an adjoining dining area for people to have their meals and undertake activities such as arts and crafts and board games. All areas of the home are clean and tidy. There is a secure patioed garden area at the back of the home with seating for people to use.

The service takes appropriate measures to ensure the home environment is as safe as possible. Fire exits are clear of clutter and obstructions. There are no obvious trip hazards. Daily cleaning duties are maintained by care staff. There are fitted window restrictors in all bedrooms and bathrooms viewed. Hazardous substances are stored in locked cupboards. Maintenance and repair arrangements are managed by the Local Authority's Corporate Estates team. Maintenance records confirm the routine completion of utilities testing, such as electrical items, gas and water facilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place and are accessible in the event of an emergency.

Leadership and Management

The service is well-run, with appropriate governance, auditing and quality assurance arrangements in place. The management team use these processes to self-evaluate and identify where improvements are required. The Responsible Individual (RI) has good oversight of the service, undertaking the legally required three-monthly service visits to meet with people and staff, and completing six-monthly quality of care reviews. The service is open and transparent and makes the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service. Policies and procedures provide guidance to care staff around their roles and responsibilities. Care staff understand their roles around key areas of care, such as safeguarding and medication. The service gathers the views of people, their representatives, and care staff.

The service ensures staff are recruited safely and are suitably trained. Care staff files show appropriate recruitment arrangements and contain all legally required information, such as proof of identity and employment references. Care staff are registered with the workforce regulator, Social Care Wales, with new care staff completing an induction before starting work. Training records show care staff have up to date training in core areas of care. Additional training is in place for specialist health conditions relevant to people who stay at the service, such as percutaneous endoscopic gastrostomy (PEG) feeding and epilepsy management. Staff told us they feel well trained and can perform their duties safely and effectively.

Care staff are positive about working at the service and feel supported in their role. They told us *"I love it here"*, *"there's a really good team"*, and *"the manager's supportive"*. Many of the staff team have been in post for some time, helping facilitate continuity of care and consistent support. Care staff have regular supervision to reflect on their performance, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on the number of people staying and their level of need. This is adjusted as needed and is planned based on respite bookings.

The service provides good information to the public. The Statement of Purpose sets out the service's aims, values, and how it delivers support. A written guide contains practical information about the home and the care provided. Information about the Local Authority's complaints process is available if needed.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
--	------------	--

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 22/11/2024