



Inspection Report on

Belmont Court

**Belmont Court
Heywood Lane
Tenby
SA70 8BN**

Date Inspection Completed

16/04/2024

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About Belmont Court

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	RCH(wales) Ltd
Registered places	29
Language of the service	English
Previous Care Inspectorate Wales inspection	22 August 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 receive person centred care at Belmont Court. The staff team is led by an experienced and well-regarded manager who is supported by a knowledgeable senior nurse. Care workers are motivated and feel valued. The manager and Responsible Individual (RI) have oversight of the service and representatives have a high level of confidence in the manager.

Some decorative work is needed to the outside of the service, and this is being done imminently. The provider is looking to make the care records more person centred and to make sure all relevant information is accurately and fully recorded, also to increase the amount of time for activities and engagement.

People, and their representatives feel they made a good decision to make Belmont their home.

Well-being

The relationships people have with those who care for them is good. We saw some friendly, relaxed, and supportive interactions. Care workers are motivated, with one saying, “*we really do try our best to do everything we can*” and another said “*I love the bones of them*” when talking about their work and the people they care for. Care workers know people well, knowing what and who is important to them, and this knowledge is built up by spending time with people and those important to them, as well as by the records. Representatives have a high level of confidence in the service and appreciate the homely atmosphere.

Wellbeing could be improved by extending the opportunities for activities and engagement. The provider has plans to recruit to be able to increase the time for activities. Wellbeing could be further enhanced by improvements to the physical environment by both general maintenance and some greater attention to detail. The service is clean and people appreciate that it feels comfortable and homely.

People are safe and protected from abuse and harm. Care workers understand their responsibilities in relation to safeguarding and are confident the manager would deal with any concerns raised and take the actions needed to make sure people are safeguarded. Care workers have completed training in safeguarding. The front door is kept locked and visitors are required to sign in to a visitors’ book so staff know who is in the service at all times. Greater rigor is needed with regard to the administration of medication.

Care and Support

Care records are comprehensive and contain a helpful personal summary which provides information about the individual's personal history as well as who and what is important to them. Daily entries are comprehensive and demonstrate a range of care areas are met including personal care, oral care, nutrition and hydration. However not all the entries are wholly person-centred and the provider plans to discuss this with the company who manages their electronic system. There are requirements for care plans to be written within certain time frames after moving into the service, as this is not always done. We discussed this and there appears to have been some misunderstanding of the regulatory requirements and the provider gave assurances that this would be addressed immediately. Risk assessments are written as soon as a person moves into the service, and these are for a range of care needs, and they are used to inform care plans.

There is an understanding of the importance of good nutrition. People have a good choice, and most meals are made using fresh ingredients. Food cupboards are well stocked, and the catering team are satisfied with the quality of ingredients. Special diets and events are catered for, and the team take pride in their work to make sure meals are well presented. Food is available outside mealtimes. People are encouraged to use the dining room, but if they decline then this is respected. Improvements to the physical environment would enhance people's dining experience.

People's physical health needs are met. A nurse is always on duty and offers advice and guidance to care workers. Referrals are made to health professionals as necessary and these visit individuals at the service. Care workers know how to recognise signs of skin pressure damage and have the pressure relieving equipment they need. Some people need assistance from care workers to reposition themselves and this is done largely in line with care plans and risk assessments. Records show some gaps, but care workers are confident repositioning is carried out and that any gaps are attributed to errors in recording. Some people who were admitted to the service with pressure damage are seeing their wounds improving.

Medication is administered by a nurse. It is administered as prescribed, but the reasons for medication given on an as required (PRN) basis is not always recorded either on the medication record or in the daily notes. Some PRN medication is being given on a regular basis. One prescription record is unclear, and the provider has agreed to discuss this with the prescriber. This is an area for improvement and will be followed up at the next inspection. All medication is safely stored in a locked room.

There are limited opportunities for people to do things they enjoy and that matter to them. An activities co-ordinator is employed to work part time, but they are sometimes required to work as a carer. Some people and their representatives feel there is "enough" or "plenty" going on, while others say there is "nothing" in the way of activities or engagement, with

one representative saying “*they could do with a bit more*” when asked about activities. The views of the staff was mixed with some saying there is very little offered but the manager said there is a range of activities taking place. Care records do not demonstrate activities happen, but we were told there are activities at least once a week which may consist of watching a film or memory games. During the inspection we did not see evidence of any activities taking place. The provider has agreed to consider increasing the time available for activities and engagement. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

People are treated with dignity and respect. Those who have made Belmont their home are wholly positive about the service, with one saying “*staff are brilliant*” and another said “*they are all very good*”. Relatives and other representatives are equally complimentary, with comments including, “*I think it’s lovely... Staff are so helpful and nice... It’s immaculate... Staff are absolutely fantastic*”. There is a high level of confidence in the staff with representatives saying how staff go above and beyond what they are required to do which is appreciated. People can exercise choice, and this includes when to go to bed and get up, and when and how often to have personal care.

Environment

Improvements to the physical environment are needed to maximise people's well-being. The property retains some attractive and original features but there is a lot of equipment being stored in the communal areas. This includes kitchen and garden equipment as well as surplus chairs and other furniture. This makes the work of the housekeeping staff more difficult. Wheelchairs, slings and other equipment are stored in an area which was originally designed as a bar and storage space is limited. The provider has agreed to spend some time paying greater attention to the internal areas of the service.

Most bedrooms are spacious, and many have ensuite facilities. They are light and airy and some people have personalised their rooms with items of furniture, photographs and ornaments. Some internal painting was being done and overall, the bedrooms and corridors are in a reasonably good condition, with the maintenance team taking pride in their work.

The outside of the service needs some general maintenance and painting, especially the back of the property. Plans are in place to get scaffolding for the work to be done safely. The gardens are extensive and could provide people with a pleasant place to spend their time when the weather permits. Some work has been done to try and clean the patio slabs but more is needed. The maintenance worker has spent time getting the raised beds ready for those individuals who wish to, to plant and grow some vegetables and flowers. Additional ramps have been built to make the outside areas more accessible.

The service has a rating of three from the Food Standards Agency which means it was found to be generally satisfactory. The actions needed have been completed and the catering team have the equipment they need.

There are some robust processes in place to make sure equipment and services are checked and in good working order. This includes checks on the water temperatures, fire safety equipment, beds and wheelchairs.

Leadership and Management

Staff are appointed following a safe recruitment process. Staff files contain photographic identification as well as suitable references. DBS checks are up to date. Files are organised and easy to navigate but do contain a lot of old and out of date information.

Supervision is carried out and care workers consider they get balanced feedback on their work. However, it is not always carried out every three months as required. Care workers appreciate the 'open door' policy of the manager and can raise any ideas or concerns with them. They are confident of having a timely and helpful response. Staff meetings do not take place, and this is because the manager considers they are always accessible to staff, working some shifts to make sure they meet with all staff regularly.

The training matrix shows care workers have completed training in a range of areas including fire safety; moving & handling; dementia care and infection prevention & control. Most training is up to date but there are some gaps. Care workers consider they have the training needed to do the job safely and representatives consider workers are skilled.

There are some governance arrangements in place to monitor quality and the manager and RI work closely together, with the RI spending time at the service regularly. Reports are produced in accordance with regulation and are wholly positive about the service. The manager is receptive to feedback with the aim of improving quality for people living and working at the service.

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
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21	<p>People are not always supported to fulfil their potential and do things that matter to them and make them happy. There is no evidence of ongoing activities and opportunities for engagement. An activities worker is employed but often is required to work as a care worker. The provider is required to offer activities and opportunities for engagement which are person centred. Support plans do not always include sufficient detail to inform and enable staff to meet the individual's care and support needs. PRN medication is being given on a regular basis to one person and the reasons are not recorded. The provider is required to make sure all prescription records are clear and the reasons for the administration of PRN medication is clearly recorded.</p>	New
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