



Inspection Report on

Bellavista Care Cardiff Limited

**2 Harrowby Place
Cardiff Bay
CF10 5GB**

Date Inspection Completed

13/12/2024

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About Bellavista Care Cardiff Limited

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Bellavista Care (Cardiff) Limited
Registered places	77
Language of the service	English
Previous Care Inspectorate Wales inspection	06 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

A newly qualified manager has been appointed since the last inspection and feels well supported by the service provider.

Staff offer prompt, kind support, creating a warm atmosphere with positive interactions. Activities are arranged and staff respect people's preference around these. Personal plans generally reflect care needs and risks, but updates can be delayed. Nutritional needs are well-considered, with appetising meals enhancing health. Specialist advice is sought when needed, and dietary requirements are documented. People have good access to healthcare and medication, with trained nurses and secure records. Strong links with the community general practitioner ensure prompt health monitoring.

A regular staff team offers prompt, kind support, creating a warm atmosphere with positive interactions. Staffing levels are maintained, ensuring unhurried care. The key worker system fosters strong relationships and consistent care. Socialisation is encouraged, but individuals can choose to spend time alone.

Improved maintenance oversight is needed for safety of people. Infection control measures need addressing to minimise the spread of infection. All service records must be accurate and current to ensure reliability, as inaccuracies can lead to incorrect care for individuals. The service provider is actively addressing the areas for improvement.

The Responsible Individual (RI) conducts regular visits to evaluate the quality of care. Despite having good auditing tools in place, they are not always fully accurate, leading to incomplete care records in many areas and unaddressed issues. Staff feel recognised and valued, and safe recruitment practices protect people. They receive good support and training for their roles.

Well-being

People are happy and do things which makes them happy. Positive interactions, meaningful conversations, and laughter contribute to a warm and supportive atmosphere, enhancing emotional well-being. The service provides a range of activities to cater to people's hobbies and interests and is eager to further develop individual sessions for those unable to attend group events.

People have good access to healthcare and medication, with trained nurses administering medication and maintaining secure records. Strong links with the community general practitioner and other professional agencies ensure prompt referrals and health monitoring. Nutritional needs are well-considered, with varied and appetising meals provided. Positive mealtime experiences are promoted through staff interactions, enhancing nutritional intake and overall health. Specialist advice is sought when needed, and dietary requirements are documented and updated. Personal plans mostly reflect a person's care and health needs, but the service provider is working to ensure these are updated promptly.

People are happy with their environment. Bellavista is warm and welcoming. A programme of re-decoration is mostly complete. People personalise their bedrooms if they wish. The service provider is addressing the need to oversee the routine maintenance and hygiene of the home as audits are not identifying issues. Staff have completed training in health and safety, infection control, and safeguarding awareness. Therefore, they should recognise the importance of maintaining vigilance in these areas to protect individuals.

The continuity and availability of staff foster strong working relationships. People reported knowing the staff well and their preferences. Staffing levels are maintained and adjusted as needed, ensuring prompt responses and unhurried care. Call bells are within reach, and visual checks are conducted when people spend time alone and unable to call for assistance. The key worker system assigns a carer to each individual daily, fostering strong relationships and consistent care.

People's well-being is prioritised through effective governance and leadership, but further development is needed in some areas. The RI visits regularly to gather feedback, and the quality of care evaluated to identify areas to improve. However, some auditing tools have been ineffective, resulting in incomplete or outdated care records and unaddressed service issues. The service provider gave assurance this was being addressed. Staff feel recognised and valued through well-being events, incentives, and open communication. Staff are recruited safely, with all necessary vetting checks in place to protect people from harm. Individuals benefit from staff who feel well-supported and trained to understand their needs and conditions.

Care and Support

People and their relatives were highly complementary about the care and support they receive. They told us, "*The staff are lovely and so caring,*" and "*They always help me with what I need.*" We observed polite and respectful interactions, with staff engaging in meaningful conversations and sharing lots of laughter with people.

There are opportunities for people to positively occupy their day. There is a motivated activities coordinator employed at the service. Records show various activities, including arts and crafts, pampering sessions, and pet therapy. During the inspection, they were celebrating Christmas, and people were looking forward to upcoming events and entertainers. The activities coordinator is eager to further develop individual sessions for those unable to attend group events, while respecting the wishes of those who prefer not to participate are respected.

Personal plans are generally in place to inform care staff of individuals' needs and associated risks. The service provider assures us that personal plans and risk assessments will be fully established before new admissions to the service. These plans are routinely reviewed to keep them up to date and accurate, though we found instances of delays in updating information, which is crucial to prevent incorrect care and support. Staff report having access to these plans and being familiar with individual needs. The service is enhancing their review process to ensure people, and their relatives, are included.

People's nutritional needs are considered. Personal plans document people's food likes and dislikes. People told us the meals are varied, and alternatives are provided. The meals are warm and appeared appetising. The menu is not easily accessible, but this is being addressed. We saw that people are benefiting from a positive mealtime experience. Mealtimes are unrushed and people get the right support to promote nutritional intake. We found that weights are monitored, and specialist professional advice has been sought when needed. People's personal plans are reflective of people's dietary requirements. This is also kept up to date in the kitchen, so all catering staff are aware of people's needs. The food standards agency rated the service as (3) "generally satisfactory" in January 2024.

People have good access to healthcare and medication when needed. Nurses are trained and their competency is assessed to administer medication. Nurses provide people with their medication on time. The service provider is addressing the need to strengthen records around medication only required from time to time and monitoring its effectiveness. Medication audits are regularly completed, but identified actions need to be followed through to prevent repeated issues. There are strong links with the community general practitioner, who regularly visits the service. Referrals to health and social care professionals are promptly made when needed. A relative mentioned that staff are quick to notice changes in health, promptly seek advice, and keep them well informed of any changes.

Environment

The service has improved some decor and there are suitable furnishings in place. Since the last inspection, the two entrances have been extensively furnished to provide a communal space for individuals and their visitors to socialise. Refreshments are available in these areas. The communal lounges are welcoming and homely. People are encouraged to personalise their own spaces with items important to them, giving them a sense of belonging. Bedrooms have ensuite bathrooms, and there are communal bathrooms available for those who prefer a bath. Specialist equipment is available to promote people's independence and comfort. While people are encouraged to socialise, they also have the choice to spend time alone when they wish.

The service provider needs to improve oversight of maintenance and repairs to ensure people's safety. Areas and items which could pose a risk to people are not always kept locked. We found the medication storage to be secure. We noted the use of some frayed towels and uncovered quilts, and some individuals did not have the option of a duvet, with one person reporting feeling cold. A relative also mentioned that quilts were sometimes missing. Staff used bedrails without proper assessment. Some areas of the service require redecoration, and the communal kitchen, though in disrepair, is still in use. Environmental audits failed to identify these issues, questioning their effectiveness. The service provider assured us that items are on order, but they should be provided as needed. Inadequate maintenance increases the risk of accidents, infections, and overall discomfort for people. We have identified this as an area for improvement, and the service provider is already taking action.

The service employs a dedicated maintenance team. There are regular servicing arrangements in place to ensure that all equipment and facilities are safe for use. Staff carry out regular fire safety checks and people have personal emergency plans (PEEPs) in place. There are fire evacuation tests being completed but further work is needed to ensure all staff are responding as required in the event of an emergency. A fire risk assessment is in place, and all care staff have received fire safety awareness training.

An infection control policy is in place, and staff understand their responsibilities. All staff receive infection control training. PPE stations are available in each community, but some were not adequately stocked and easily accessible for staff when providing direct care. Expiry dates of PPE need to be checked, as expired PPE may be less effective, increasing infection risk. Domestic staff have daily cleaning schedules, but we found some communal areas were dirty and heavily stained. Bedding needs to be checked before making a bed. Care staff have received trained infection control awareness. We have identified this as an area for improvement, and the service provider is already taking action.

Leadership and Management

Since the last inspection, a newly qualified manager has been appointed. Staff described the manager as approachable and helpful. The manager feels well supported by the service provider.

The Responsible Individual (RI) visits the service at least every three months to gather feedback from people, their relatives, and care staff. A quality-of-care report is compiled every six months to highlight the service's strengths and areas needing improvement. Although auditing tools are in place to monitor the service's delivery and safety, some have been ineffective in identifying issues and ensuring follow-up actions. Consequently, this information cannot be fully relied upon to keep the RI informed of the service's quality. We found that while people received the care and support they need, care records are not always fully complete or up to date. Additionally, instructions from professionals were communicated to staff, but people's personal plans were not promptly updated. This can lead to people receiving incorrect care and support. We have identified this as an area for improvement, and the service provider is already taking action. The provider is not always notifying the regulator of events when they should.

The service provider ensures there is continuity of staff, and they feel supported. The service has actively recruited permanent staff to reduce future reliance on agency staff. Staff rotas show maintained and adjustable staffing levels to meet personal outcomes. Staff respond promptly, call bells are within reach, and visual checks are conducted when people are alone. Care staff generally have enough time to provide unhurried care. Staff cover each other's leave, and people report knowing the staff well and building good relationships. Staff told us, *"I feel well supported and the nurses always help the carers,"* and *"We can always ask for help, and all the management team are approachable and supportive"*. Relatives appreciate the consistency of staff. The service has implemented a new key worker system, assigning a carer to each person daily, responsible for all their care and support. Families are encouraged to ask the assigned carer for any assistance they need. Staff reported feeling recognised for their hard work and commitment through well-being events, monetary incentives, and regular treats. They also feel confident in raising concerns with the service provider and manager, trusting that these will be addressed.

The service has robust recruitment processes, with all required pre-employment checks conducted to protect people from harm. Staff are appropriately registered with the workforce regulator and receive regular individual supervision sessions to discuss professional development and practice issues. All staff reported that they work well as a team, communication within the home is good, and they are kept well informed. The training matrix indicates that essential core training is provided to help staff recognise and understand the conditions and needs of the people they support.

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
44	The service provider to ensure the environment is well maintained and free of hazards that may pose a	New

	health and safety issue to individuals using the service.	
56	The service provider to ensure there are safe and adequate arrangements in place to maintain satisfactory standards of hygiene to control infection and minimise the spread of infection.	New
59	The service provider to ensure that the service maintains accurate and up to date care records to protect the people they support	New

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