



**Inspection Report on**  
**Mill House Residential Care Home**  
**Cardiff**

**Date Inspection Completed**

21 July 2022

**Welsh Government © Crown copyright 2022.**

*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.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk) You must reproduce our material accurately and not use it in a misleading context.*

## About Mill House Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	CRS CARE LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify, or meet the Welsh language needs of people /children who use, or intend to use their service.

### Summary

Mill House provides a warm and welcoming environment where people can develop independent living skills. People receive support that promotes their health. The service assesses the needs of individuals and identify risks to their safety and well-being. Staff are respectful, well trained and understand the needs of people they care for.

Care documentation is personalised and evidence good engagement with external professionals. People live in a warm, clean, and safe environment. They have access to good standards of food and have choice and control in their day- to -day lives. People have many opportunities to engage in activities that are meaningful to them.

Policies, procedures, documentation, and systems are in place to evidence the home is run smoothly, considering the safety of people and visitors. The day-to-day running of the home is the responsibility of the manager.

The service provider has a responsible individual (RI) who has been nominated to have oversight of the service and evidence 'quality of care' provision.

## Well-being

People participate in pre-admission assessments and personal plan development. People receive a written guide to the service, the statement of purpose document, this clearly sets out what support the service provides. Compatibility with other residents is considered at assessment.

People have autonomy in their day-to-day lives, choose the way they want their care provided, and do things they enjoy, what they eat and when they go to bed. They meet regularly with staff and have opportunities to say how they would like their care provided. House meetings are held regularly and minutes of these kept on file, it would be beneficial for any actions arising from meetings to be recorded. Surveys, reviews and engagement with the manager and RI allow people and their families opportunities to give feedback on the quality of the care and service. When things need addressing, this is done in line with clear procedures. People contribute to their care planning and are routinely involved in reviews.

People are supported to pursue interests and hobbies of their choice. Staff are available to assist people with accessing the local community. Individuals tell us they can choose when they want to go to bed and what they want to eat. Care staff engage with people in a warm and friendly manner, enabling them to express their opinions.

The safety of the environment is routinely monitored and maintained, with immediate action taken if issues are identified. Care workers and support staff receive appropriate training around keeping people safe and know how to raise concerns if they believe a vulnerable person is at risk. Entry to the home is monitored. Hygiene standards are maintained, kitchens are clean and safe, and food is produced and stored to meet the 'Food Standard Agency' requirements. People who need support with finances are protected from abuse due to procedures and audited recording in place.

## Care and Support

Detailed assessments of people's needs take place, including the person's preferred language. This information, and that provided by the local authority care plans, form the basis of care plans in the home. People, or their families, are consulted to ensure as much information is gathered as possible so care staff can be informed of how best to support a person. People's wishes are recorded. Risk assessments are in place to support people to be as independent as possible. Care plans are reviewed regularly, involving the person or their representative. Personal plans are easy to understand and identify the specific needs of people. There is an independent advocate linked to the service who supports those residents who require assistance with decision-making.

People living at Mill House comment positively on the care workers and the support they receive. We were told "*staff are great,*" "*they're good here no problem doing anything for you.*" Carers are observed engaging with people with warmth and understanding. People, including those who lack capacity, are monitored, and encouraged to participate in activities. Staff would benefit from some further training in relation to facilitating people with cognitive impairment to identify and engage in meaningful activity. Care is individualised and where appropriate people are supported to carry out activities independently.

People receive support that promotes their health. Staff make referrals to other healthcare professionals as required. People have a choice of meals and drinks to suit their needs and preferences. A chef at the sister home, situated across the road, provides a wide range of homecooked, excellent quality food, residents at Mill house can go across to dine with residents there if they choose. Alternatively, people are supported to prepare their own choice of food. Cooking lessons are also run by the chef at the sister home. The chef engages in residents' meetings so people can influence the menu and give feedback on the quality of food. Records and charts are maintained concerning people's dietary needs, including weight. The provider should ensure that where poor nutritional intake is identified in daily notes, it is followed up with outcomes by the next shift of staff.

The service has procedures and measures in place to keep people safe. Staff know their responsibilities in recognising and reporting safeguarding concerns. Training for staff around protecting people is up to date. Staff are recruited safely with necessary checks in place. People tell us they feel safe at the home and trust the people who look after them. People had appropriate fire evacuation plans in place and staffing levels appear to meet the needs of people. Retention of staff is good within the service. The home is not using any agency staff. Medication records viewed are accurate. Medication stock control, storage and administration is safe. DoLS ensures people who cannot leave the service independently, have best interest decisions in place

## Environment

People live in an environment which meets their needs. Milhouse is a small home with four beds situated in a residential area of Cardiff. The service has safe outdoor space that is well maintained and benefits from outdoor furniture to enable people to use the space comfortably. Milhouse is warm, welcoming, and decorated to a high standard, and has sufficient communal space that enables people to spend time together. There are enough bathrooms and toilets which are clean and accessible. The home is well maintained and free of clutter and malodour. People have their own single bedrooms which are warm, clean, and decorated tastefully. We viewed a selection of rooms and saw that they are personal to the occupant.

People are cared for in a safe environment. On arrival, we found the main entrance secure, and we were asked for identification before being permitted access to the home. All people living at the service have a Personal Emergency Evacuation Plan (PEEP) in place which is an important document as it guides staff on how to evacuate people in the event of an emergency. Equipment and facilities are regularly checked and maintained. People have missing person procedures in place should they go missing.

## Leadership and Management

There is an RI who has oversight of the service. They visit the service to consult with people and care workers to assess the 'quality of care,' and required reports are produced around this. The first quality of care report for Mill House is due next month. In addition to the RI's visits. Policies and procedures are in place, regularly reviewed and updated. These are detailed and support care workers to understand how to conduct their work, including medication administration and keeping vulnerable adults safe. A 'Statement of Purpose' and 'Service User Guide' are in place to inform people what to expect of the service.

A manager has responsibility for the day-to-day running of the service. A senior care team supports the manager. On the day of inspection, we found care staffing levels to be good. The service provider has planned to introduce a different staffing format that will provide targeted support for people to attend activities. Systems are in place to monitor all aspects of the service. Where suggestions, concerns or complaints are received, these are addressed, and measures taken to correct any issues identified.

Personnel files have relevant documentation, with evidence that care workers are recruited safely. Care workers receive supervision meetings with their line manager, and these are recorded. Professional development is considered as part of these meetings, with training needs identified if required. The management team track staff training needs and ensure this is provided. Training includes face-to-face meetings. Additional bespoke training is also provided.

### 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
-----	--	-----

**Date Published** 21/09/2022