



Inspection Report on

Millbrook Care Home Ltd

**Millbrook Residential Home
Gelligroes Road Pontllanfraith
Blackwood
NP12 2JU**

Date Inspection Completed

15/08/2024

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About Millbrook Care Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	HILL VIEW CARE HOME LIMITED
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

People enjoy living at Millbrook, they receive good quality care and support from an experienced and dedicated care team. The service benefits from a calm and relaxed atmosphere. The environment is clean, homely, and well maintained.

Personal plans are individualised and clearly inform care staff about each person, their care needs and how they would like to be supported. People are supported and encouraged to engage in a range of stimulating activities. Potential risks are identified and managed effectively. Prompt referrals are made to health and social care professionals when required which helps people to maintain good health.

The management team are experienced and committed to maintaining high standards. Care staff enjoy working at the home and feel well supported in their roles. The Responsible Individual (RI) visits the home regularly and has good oversight of the management of the service, however some improvements are required with their reporting.

Well-being

People are supported to achieve positive outcomes and have control over their day-to-day lives as much as possible. People choose what time they get up in the morning, what time they go to bed, what they do and where they spend their days. Choices of meals are offered, and people are supported to understand meal choices using peoples preferred communication methods. Alternative meals and snacks are provided where people do not want choices from the main menu. Where restrictions are required to keep people safe, the correct procedures are followed by the home. Applications are made promptly to the local authority for any Deprivation of Liberty Safeguards (DoLS) required. Care staff are trained to ensure they support people in the least restrictive way by following plans and understanding the potential impact of restrictions.

Care records include detailed information on each person's background and their life story. For people who have memory or other cognitive difficulties, the service encourages family members to be involved in personal plans and reviews to ensure their voice is heard. This detailed social history, allows care staff to get to know people better and offers reference points for discussion. There is a positive and open culture within the home, people are treated with dignity and respect. Regular meetings are held for residents and their family members to discuss and be involved in decisions relating to the home. Topics include, upcoming events, choices of décor, activities, and entertainers.

People are kept safe from harm. The service has a safeguarding policy which is aligned to current guidance. Care staff are trained in the safeguarding of vulnerable adults and know what to look out for, and how to report any concerns.

People are supported to maintain positive relationships with their loved ones. Visitors are made to feel welcome at the service, and staff encourage people to socialise with other residents within the home. People told us they had made good friendships with others living at the home. The accommodation is maintained to a high standard and supports people to maintain their well-being.

Care and Support

The manager considers a range of information about new residents before they come to live at the home. This ensures the service can meet people's needs and preferences. Care staff know the people living at the home well and treat them with compassion, dignity, and respect. We observed call bells being responded to promptly and confident reassurance being given when people required support with moving from one place to another. People told us care staff are always quick to help with anything they need. People have choices about the activities they engage in, menu options, and with their daily routines, such as whether they prefer to shower or take a bath.

People's care preferences and needs are recorded clearly in their personal plans. The plans evidence best practice by focussing on what the person can do for themselves in each identified area before informing care staff how best to support them. Plans are reviewed regularly to ensure they reflect any changes as they occur. Potential risk areas are clearly identified and planned for to keep people well, whilst continuing to promote their independence.

Care records are completed to evidence people are being supported as described in their personal plans. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP) who visits the home every week to review residents who require it. The home has a positive relationship with the GP. All appointment records and outcomes for review are recorded in the care notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle. Effective handovers of information take place between each shift, to ensure all staff are well informed and up to date with changes.

Systems are in place for the safe management of medication. Care staff support people with their medication, which helps to maintain their health. Medication records are completed accurately, but some other information, like storage temperatures is not always recorded. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The environment supports people to maintain their well-being and achieve their desired outcomes. The layout of the home, together with the provision of aids and adaptations, helps promote independence. The home is kept clean, light, and well maintained. Communal areas are arranged to promote people socialising in small groups of their choice. People's bedrooms are personalised to their own taste, people have family pictures, posters, and ornaments in their rooms.

The home is well equipped and spacious. Furniture and fittings are all in good condition. Investment has been made into the environment since our last inspection. Corridors have been redecorated, new laundry machines have been purchased, and a new call bell system installed. Communal bathrooms and shower rooms contain specialist equipment to support people with mobility needs, as required. The home has a fully equipped hair dressing salon, a local hairdresser visits every week. PPE such as gloves and aprons are situated tidily throughout the home, to support good hygiene practices. Potential environmental risks are assessed, and measures put in place to manage the identified risks. Regular audits are carried out on the environment to ensure safe standards are maintained.

The front door is kept locked, and our identity was checked on entry. Care staff follow procedures to ensure safety is maintained. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support them to leave the premises safely in the case of an emergency. The home has a rating of five from the food standards agency which means food hygiene standards are very good.

Leadership and Management

People benefit from effective leadership and management at the home. The manager oversees the day-to-day running of the home, supported by the deputy manager. There is a clear structure of responsibility. The management team know the people living at the home well and are supportive of care staff. The RI visits the home frequently and has good oversight of the service provided. Quality of care reports are completed every six months. The reports reflect the service, what is going well, and areas the service aims to improve but they lack detailed analysis of key events. While no immediate action is required, this is an area of improvement, and we expect the provider to take action.

The provider employs sufficient staff to meet the care needs of people living at the service. People are supported by care staff who are caring, knowledgeable and competent. Staff told us they enjoy their jobs, feel valued, and well supported by the management team. One care worker told us *"I really enjoy my job and working with the residents, we have a great team here."* Another care worker said, *"I love it here, I can go to the manager with anything, and she always listens. I feel very well supported and the training is good."* Communication is good within the staff team and with other agencies. We saw care staff following the principles of person-centred care by placing people at the forefront of their care. Care staff told us they have enough time to support people and are not rushed.

Care staff receive one-to-one supervision which provides them with the opportunity to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance. Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. Some refresher courses have not been completed in recent years, the RI assured us they would address this and implement a clear system of how frequently courses should be refreshed. Care staff are safely recruited. The staff files are well organised, and contain the required information, including Disclosure and Barring Service checks and professional registration with Social Care Wales, the workforce regulator.

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	
58	Medication temperatures are not recorded consistently for all areas where medication is stored.	Not Achieved
80	The Quality of care report does not provide clear analysis of the key areas required	Not Achieved

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