



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

**Date Inspection Completed**

08/04/2024

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## 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	21 <sup>st</sup> July 2022
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 are happy with the care and support they receive from care staff who they know well. People are promoted to maintain their independence and be a part of their local community. The service considers individual circumstances which are included in person centred plans. People are involved in reviewing their care. People, their relatives, and professionals are asked for regular feedback which is used to improve the service. We found some oversight measures in place. The manager and the Responsible Individual (RI) appear to know people very well. People and care staff know how to raise concerns. Care staff told us they are happy working at the service and have everything they need to do their job effectively. The environment is homely and inviting. There are plans to decorate bedrooms to make them more personal. The RI and manager are working to enhance current systems in place to improve oversight.

## Well-being

People are treated with dignity and respect by care staff who know them well. People's independence is promoted and they are supported to develop living skills. People's individual circumstances are considered and recorded in person centred plans. People can contribute to decisions that affect them via meetings, surveys, and discussion. People also have regular opportunities to liaise with advocates and other professionals like social workers.

People are supported to maintain their health and well-being. People can access medical support and treatment if required and have access to specialists regarding their health. We found people contribute to weekly menus, and they told us they enjoy the food. We discussed the need for better nutritional options to be available. People regularly access the community to enjoy activities of their choice. People told us they are happy.

People told us they know the care staff well and feel safe at the service. Care staff are appropriately recruited and receive core training. Supervisions include checks to ensure care staff knowledge remains up to date. Feedback is regularly sought from people and their relatives. There are safeguarding details available for people and care staff know how to raise concerns with managers and externally.

People are supported to maintain positive relationships with friends and family. People regularly access the community independently. Some people have well-being goals to work towards, such as completing educational courses. People told us they enjoy the activities they do throughout the week.

People live in an environment that best supports them to achieve well-being. The service is homely and inviting. People appear comfortable and content. There are plans to personalise people's bedrooms to make these spaces more individual to them. The home is secure. People who access the community on their own do not have a way of entering the building independently and rely on staff to let them back in. The RI will consider how people can have their own access to the property, whilst maintaining the safety of other people who live there.

## Care and Support

Personal plans are person centred and provide a good level of detail. These documents help staff to understand the person, their likes, wishes, needs, and risks. Risks assessments are in place and identify people's main risk areas. More detail regarding the measures in place to reduce risks to people would help the service evidence how they keep people safe. People are involved in regular reviews of their plans. Care staff approach people with dignity and respect and consistently provide choice. Care staff have training to provide support with medication. We found Medication Administration Records (MAR) are completed in full and the manager has oversight of this. People are supported to maintain their well-being and their health. We saw care staff are quick to contact professionals where they have concerns. Social workers, doctors and advocates are involved in people's care when required. Some people have regular contact with their advocate to ensure that their voices are being heard.

People and care staff work together to create weekly food menus. Some people enjoy being involved in cooking which helps promote their independent living skills. Menus do not always promote a healthy lifestyle and should offer a greater variety of well-balanced meals. We discussed with the manager the need for better recording of specific risk areas such as diet and nutrition, we were given assurances this would be actioned. People are regularly invited to provide feedback, whether directly to staff in resident meetings or in surveys. We found this feedback to be very positive. People are encouraged to maintain and develop life skills. Some people plan on attending educational courses in the future. People regularly access the community either independently or with support. People enjoy a range of activities such as shooting club, swimming, day centre, and going to the local shops. Peoples' personal outcomes and goals could be better recorded and monitored within their plans.

## Environment

The service is homely and inviting. Care staff checked our identity on arrival and made us sign in to a visitors' book. This ensures the visit is logged and safe. The front door is secure and care staff open this using a fob. We discussed the need for people who can leave the service independently to have their own access method and do not have to rely on care staff. The RI and manager assured us this would be put in place. People appear relaxed in their surroundings. We heard conversations between people and the manager about decorating their room in a colour of their choice. This will help to personalise the space and enable a deeper sense of belonging. We saw some pictures on display of people enjoying activities in the community. Notice boards include important information such as the management on-call rota and safeguarding information. Where people notice an issue in relation to the environment there are useful QR codes available for staff to efficiently report and record this.

The communal areas of the home are clean. We found some health and safety systems regarding the storage of food are not being correctly followed such as, items in the fridge incorrectly labelled or out of date. Some bathroom supplies had run out. We spoke to the management regarding the need for better oversight of the environment to ensure regular checks are completed as required, the service was quick to put measures in place to address this. There are fire safety systems in place including a sprinkler system. Regular health and safety checks are carried out to ensure the service is safe. The RI is responsible for completing health and safety checks regarding fire. People have a Personal Emergency Evacuation Plan (PEEP) in place which identifies the support a person needs in the event of an emergency evacuation.

People's individual circumstances have been considered. During initial assessments managers consider whether individuals are suited to live with each other. This is to ensure that people who live together can get along well. We found rooms have been identified for people in relation to their personal needs, wants, and wishes.

## Leadership and Management

Care staff are extremely welcoming. People told us they get along with care staff and know who the manager and the RI is. Care staff are appropriately recruited and receive a Disclosure and Barring Service (DBS) check. This ensures care staff are safe to work with vulnerable people. Care staff receive regular core training and supervision. Care staff told us if they need additional support this is provided. Supervisions are of good quality and ensure that care staff can discuss their needs. Supervisions also ensure that care staff are aware of their safeguarding responsibilities and are praised for the work they do. Care staff told us they are happy at the service and feel senior members of staff are very responsive and supportive. Care staff describe senior staff as "*Brilliant.*" Some staff told us that managers of the service could be more visible and more regular meetings would be of benefit.

There are some systems in place to maintain oversight of the service. Managers and seniors conduct surveys, complete checks, and quality assurance audits, but these have not been regularly maintained. This means managers do not always have complete oversight of the overall running of the service. A Quality of Care Review is completed. This document provides a good level of information to evidence the quality of the service and how the service meets peoples needs. People and care staff told us they know the RI and could talk to them if they needed to. We discussed with the RI the need to better evidence their visits to the service and document their oversight.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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