

Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Hillcroft Residential Care Home
Hillcroft Residential Home
11 Howells Crescent
Llandaff
Cardiff
CF5 2AJ

Type of Inspection – Focused
Date of inspection – Monday, 19 January 2015
Date of publication – 17 February 2015

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Summary

About the service

Hillcroft Residential Care Home is located in Llandaff, Cardiff and is operated by Farrington Care Homes Ltd. It is registered with Care & Social Services Inspectorate Wales (CSSIW) to provide accommodation together with personal care for up to 25 people over the age of 65 who have a diagnosis of dementia. The registered manager is Rachael Rogers.

What type of inspection was carried out?

We (CSSIW) carried out a focussed inspection at Hillcroft Residential Home in response to anonymous concerns we had received. We made an unannounced visit to the care home on Monday 19 January 2015. We talked with residents, staff and the registered manager. We examined one person's care records and carried out a visual inspection of parts of the building and grounds.

What does the service do well?

As the inspection was in response to concerns raised about the service we did not focus on this area.

What has improved since the last inspection?

Following our last inspection of the home, one of the bedrooms had been refurbished.

We were informed that areas of flat roofing that were leaking had been repaired and renewed.

What needs to be done to improve the service?

The home is not compliant with regulation 24(4)(c)(i).

This is because one of the bedroom doors did not close securely and there was also a significant gap between the base of the door and the floor. This means that the door would not provide protection in the event of a fire. We are not issuing a non-compliance notice on this occasion because the registered manager stated that the door would be attended to without delay.

Recommendations

- the collapsed area of garden wall to the rear of the care home should be attended to as soon as possible and a check made to ensure that the rest of the wall is safe.
- we would recommend that all staff are reminded of the procedure for dealing with emergencies. Where necessary staff should telephone the emergency services rather than contacting the GP or out of hours service
- we advise that a falls risk assessment and a pressure ulcer risk assessment are completed as soon as possible for residents where it has been identified that they are at risk
- where people are staying at Hillcroft on a respite basis, the home should have a

clear understanding of the arrangements for obtaining medical help should the person fall ill

Quality Of Life

We visited the home to consider the way in which support was being provided to two specific residents and the background to a number of incidents involving them.

In one instance we found that there had been a delay in obtaining help to enable a person to get up from the floor after they had fallen. It was reported to us that staff had attempted to use a hoist to lift the person but that none of the hoists kept at the home were suitable for this purpose. Staff had alerted the manager of the home (who was off duty) by text message but the manager did not see this message. The staff decided to make the person comfortable on the floor until assistance could be obtained. We discussed with the registered manager the need for staff to have clear procedures for emergencies occurring out of normal working hours which would include, where necessary, contacting emergency services. The registered manager informed us that the home is considering purchasing a hoist that would operate at floor level and that in the meantime procedures would be reviewed.

We examined the care records of another resident who was relatively new to the service. We saw that care plans had been written based upon the person's assessed needs. We could see that additional information was being included as staff got to know the person better. We would recommend that given the resident's history, a falls risk assessment is completed. We would also advise that given the person's current presentation and choices, a pressure ulcer risk assessment is completed and their skin integrity is monitored. Furthermore, the home should review the arrangements in place to support the resident at mealtimes to help ensure that they are receiving sufficient food and fluids and also to help prevent food from being disposed of inappropriately.

An incident was also brought to our attention concerning a resident who had sustained a fall. There had been a delay in them receiving the medical treatment they required. We discussed this incident with the registered manager and found that the home had been in contact with local GP but there had been some confusion around which GP practice should attend to the person. This had led to a delay in a GP visiting the home and a delay in the subsequent referral to the hospital for an x-ray. The home should review its' procedures regarding caring for people staying at the home for respite to ensure that should it be needed, medical assistance can be obtained promptly.

Quality Of Staffing

We did not focus on the theme of quality of staffing on this occasion. This theme will be considered at future inspections.

Quality Of Leadership and Management

We did not consider the theme of quality of leadership and management on this occasion. This theme will be considered at future inspections of the service.

Quality Of The Environment

We were shown a bedroom where there had been issues identified at a previous inspection. Improvements had been made including the installation of new windows, a wall and door built around the en-suite bathroom, electrical sockets rerouted and repairs made to the ceiling.

An issue that had been brought to our attention concerning the provision of hot water in one bedroom had been addressed. We were also informed that repairs had been made to two flat roofs which had been leaking.

We had been alerted that there was a problem with a resident's bedroom door and that the hinges were not securely affixed to the door frame. We observed that the door was firmly attached to the frame but it would not close properly. In addition there was a considerable gap between the bottom of the door and the floor. This gap would compromise the function of the door in the event of a fire and should be attended to immediately.

In the home's garden we observed that part of a boundary wall had fallen down leaving a pile of stone and debris on the ground. The wall should be repaired so that it poses no danger to people using the garden.

How we inspect and report on services

We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.