



Inspection Report on

Hillcroft Residential Care Home

Hillcroft Residential Home

9-11

Howells Crescent

Cardiff

CF5 2AJ

Date Inspection Completed

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About Hillcroft Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Farrington Care Homes Limited
Registered places	25
Language of the service	English
Previous Care Inspectorate Wales inspection	06 November 2020
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

People are happy living at Hillcroft Residential Home and speak positively about the care they receive. Care staff understand their needs of the people they support and do so with patience and kindness. People have a choice of activities on a daily basis and are supported to maintain relationships with family and friends. Care documentation is thorough and reflects the person being cared for. These documents are reviewed regularly and demonstrate that referrals are made to external professional when required. Medication processes are safe and robust. Care staff are trained to undertake their roles and feel well supported by the manager. The Responsible Individual (RI) has oversight of the service and visits the service regularly. There are quality assurance processes in place, but feedback from service users and staff need to be fed into the reports that support this process. There are policies and procedures in place for the running of the service and people are given detailed information about the service. Improvements have been made to the environment, which is now warm, clean, and decorated to a very high standard. There are measures in place to reduce the risk of Covid-19 entering or spreading throughout the home.

Well-being

People are supported to have autonomy over their lives. People have personal routines and decide when they get up, when they go to bed and how to spend their time in between. Care documentation is person centred and contains the views, wishes and feelings of the person being cared for. People have choice in regard to meals they eat and have alternatives available if they do not like any of the choices on the menu. There are various activities available for people to engage in and visiting to the home has now resumed. The home has adequate space for people to use and a welcoming garden offers people option to spend time outdoors. People have their own bedrooms which are personalised, warm, and clean and are free to use this space as they wish. There is a robust complaints process in place and people's views are sought as part of quality assurance monitoring and RI visits.

People receive care without delay. Care staffing levels at Hillcroft Residential Home are sufficient to meet people's needs and ensure that people do not wait for the care they need. Care staff have a good understanding of people's needs and are able to anticipate the needs of people who cannot verbalise these themselves. Care documentation is detailed, reviewed regularly, and includes risk assessments where required. Referrals are made to external professionals without delay and people are supported to attend appointments as required. Care staff receive appropriate training and supervision and tell us that they are happy working at the service. People are happy living at the service and speak positively about the care they receive and the staff who provide their care.

People are protected from abuse and harm. The service has a robust safeguarding policy in place and the manager has a good understanding of the safeguarding process. All staff receive training in the protection of adults at risk of abuse which is refreshed regularly. Staff recruitment is safe and robust with staff vetted appropriately prior to working at the service. The building is well maintained with all safety checks completed correctly and a fire risk assessment in place. The environment is clean, clutter free and generally safe, however we reminded the provider that toiletries should be in people's own rooms and tablet packets disposed of immediately. There are measures in place to reduce Covid-19 entering or spreading within the home.

Care and Support

People get the right care at the right time. Care staff understand the needs of the people they care for and do so with kindness and patience. We saw positive relationships between people and care staff and lots of laughter and friendly banter taking place. One person told us *"It is great here; staff are marvellous and the food is gorgeous"*. We noted that the conservatory area of the home is very warm and people were sat without drinks. We advised provider that drinks in front of people with dementia can be a visual prompt to assist hydration. The manager advised that fluids are constantly promoted but agreed with our advice and gave assurances that people will always have drinks available in front of them. People have a pre-admission assessment before moving into the service to ensure that their needs can be met. Care plans clearly outline people's needs and how they should be met which is important as these documents guide staff on how to care for people. Care plans are reviewed regularly to ensure that they remain current. We saw evidence that referrals are made to external professionals when required and any advice or guidance is fed into care plans and followed correctly. One person living at the home told us *"I'm a bit worried about my health, so I told staff and they got me a GP appointment as soon as they could fit me in"*.

People can be confident they have choice and control over their lives. Where possible people and/or their representatives are part of care planning and review processes which ensure that care is delivered in accordance with preference. Care documents are person centred and include information in regard to people's personal history, likes and dislikes. People have a choice of meals and are free to eat meals wherever they choose. We saw that people are offered their food choice at the time of service which is good practice for people with dementia. We noted at lunch time staff poured all residents at the dining table orange squash in advance. We advised that it would be better practice for staff to offer the drinks with choice before pouring. Since the last inspection activities within the home have significantly improved. There is an activity rota in place with various activities that people enjoy. We saw care staff using the homes smart speaker to play music of people's choice, which prompted people to sing along. Care staff supported and encouraged people to choose songs and sing along which people clearly enjoy.

Environment

People live in an environment that is suitable to meet their needs. Hillcroft Residential Home is located in a suburb of Cardiff that benefits from local amenities and good transport links. Since the last inspection, the home has undergone further renovations, internally and externally, which have been completed to a very high standard. The home is warm, welcoming, and decorated nicely throughout. There is ample communal space throughout the service including a dining area and a lounge with conservatory that enables people to spend time together, and an additional room that enables people to receive visitors in private. There are sufficient bathrooms and toilets throughout the service that are functioning and in good order. The service has pleasant, safe, external space that contains good quality garden furniture and a gazebo that enables people to spend time outdoors as and when they wish. People have their own bedroom which they are free to access as they wish. We viewed a selection of bedrooms and saw they are warm, clean and contain people's personal belongings. People are encouraged to make their bedrooms as homely and personal as possible. One person we spoke to said, *"I love my bedroom, it's a lovely space and has all my things"*.

People can be confident they live in a generally safe environment. On arrival to Hillcroft Residential Home we found the main entrance secure, and our identification was checked before we were permitted entry. We found the environment largely neat and tidy but in a communal area we found some empty tablet packets on a table and noted that one of the empty packets contained a drying agent that is harmful if ingested. We removed the packet and advised the manager who gave assurances that the issue would be addressed. Some bathrooms contained people's personal toiletries and so we reminded the manager that these should be kept in people's own bedrooms. There are window restrictors in place and cleaning chemicals are locked away safely. The building is well maintained and safety checks of the building are completed when required. There is a fire risk assessment in place and all people have a Personal Emergency Evacuation Plan (PEEP) which is important as this guides staff on how to evacuate people in the event of an emergency. The fire alarms and emergency lighting are tested regularly.

Leadership and Management

People benefit from the leadership and management in place. The service benefits from a Responsible individual (RI) who is accountable for the service and a manager who oversees the day to day running of the home. The manager is registered with Social Care Wales, the workforce regulator. Staff we spoke with were very positive about the manager and one person said, "*the manager is great, really approachable and helpful*". There are robust policies and procedures for the smooth running of the service and the manager understands legal requirements in regard to caring for vulnerable people. Applications are made to the Deprivation of Liberty Safeguards (DoLS) team when required. This ensures that placements at the service are legal when people lack capacity to make decisions in regard to their care and accommodation needs. People are given detailed information about the service and what care they provide which details information on how people can complain if they are unhappy with the care they receive. We note there has been no complaints to the service since the last inspection. The RI generally completes visits in line with regulations. We found one visit was late and one was completed virtually because of Covid-19 but we advised the RI that going forward all visits must be in person at a minimum of every three months. Quality assurance monitoring takes place regularly which indicates that the provider is committed to providing a quality service. The views of staff working at the service and people using the service are sought, but these views are not fed into reports. The provider has given assurances that this will be rectified.

People can be confident they are supported by staff who are safely recruited. We examined a selection of staff personnel files and saw that they contain all required information. Pre-employment checks including references and Disclosure and Barring (DBS) certificates are applied for prior employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. Since the last inspection improvements have been made to staff training and supervision. Care staff receive training appropriate to the role they undertake which is refreshed regularly. All staff receive a formal supervision in line with regulations and staff tell us that they feel supported and valued. Supervision is important as it is an opportunity to discuss practice issues or needs in a setting that is recorded.

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. 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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Date Published 30/08/2022