Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Hillside

15 Graigwen Place, Pontypridd, CF37 2HU

01443400885

Date(s) of inspection visit(s):

05/06/2025, 03/06/2025

Service Information:

Operated by:	Ucan Care Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	6
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture, or is working towards a bilingual service.

Ratings:

Well-being	Excellent
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Hillside provides care and support for people who experience needs associated with their mental health. The home provides accommodation for up to six people. The home is situated in the town of Pontypridd and is within walking distance of all the facilities the community has to offer.

People's well-being outcomes are excellent. Care staff support people to understand their rights and maximise their independence. Care staff know the people they support well, they know what is important to them and what approaches to use when delivering care and support. Care documentation is devised using a strengths-based approach capturing what people can do for themselves and interventions needed from care staff.

The service is very well-led and has a positive culture of promoting the well-being of supported people and staff. There are suitable governance and quality assurance systems in place helping the service operate smoothly. Care staff receive training relevant to the needs of the people they care for and receive the required level of formal support.

People live in an environment which is suited to their needs. The home is clean and comfortable. The provider undertakes regular maintenance and repairs, and ensures the environment is safe.

Findings:

Well-being — Excellent

With few exceptions people are supported to have as much control as possible over their day to day lives. We saw documented evidence showing people are provided with a platform to voice their opinions on the service they receive. Monthly meetings between people and their key worker gives people the opportunity to discuss matters which are important to them and set personal goals. Regular resident meetings are held where people get to discuss household matters and things like group activities and holiday plans. Satisfaction surveys are used to collate information on people's experiences of living at the service. People are actively involved in the production and review of their personal plans to ensure they can communicate their preferences in relation to the care and support they receive.

People are treated with dignity and respect. They are actively supported to identify their well-being outcomes and encouraged to use and build on their strengths. People are encouraged to set goals which are then closely monitored until achieved. We saw documents detailing people's goals and the support they require to achieve them. These documents are reviewed monthly so progress can be monitored, and new goals can be set. People say they have very positive relationships with care staff. One person said, *"The staff are excellent, I've got no complaints".* Another person commented, *"The staff are good as gold".* We observed positive interactions between care staff and people throughout the time we spent inspecting Hillside. It was clear care staff hold people in high regard and are very respectful of them.

People are protected from harm, abuse and neglect. Care staff are recruited in line with regulation. This ensures they are suitable to work with vulnerable people. Care staff receive training relevant to the needs of the people they support. This includes safeguarding, medication and Mental Capacity Act training. There are effective mechanisms in place to ensure people can voice their concerns. Medication management systems are robust, ensuring medication is stored and administered safely. Risks to people's health and safety are assessed and managed.

People live in an environment which supports their well-being. There are sufficient communal areas which are clean and comfortable. People's rooms are personalised to their preference. The home is well maintained with the correct checks and servicing in place for utilities and safety features.

Care & Support — Good

People receive a very good standard of care and support. Detailed assessments are completed prior to a person being admitted to the home. The provider gathers useful information from professionals and others already involved in the person's care. They talk to people about their needs and preferences. The information gathered fully informs the decision about whether they can provide a service to people. Following the initial assessment a personal plan is devised. Personal plans highlight people's care and support needs and any risks to their health and safety. We saw personal plans are devised using a strengths-based approach, which helps to promote people's independence. Personal plans are regularly reviewed to ensure they remain relevant as people's needs evolve.

People's liberty is protected in line with legislation. Where people lack the mental capacity to make decisions about their care arrangements, we saw Deprivation of Liberty Safeguards (DoLS) authorisations are in place if care arrangements deprive people of their liberty. Care staff receive training around DoLS and the Mental Capacity Act and personal plans are reflective of the conditions set out in peoples DoLS authorisations.

People are supported with their health needs. The service provider uses strong, established links with mental health, health, and social care services. This results in people experiencing positive health outcomes. People's health needs are detailed in their personal plans. Care staff have a good understanding of people's health needs, they can recognise changes in people's presentation and report to the relevant healthcare professional for advice or support. All appointments with healthcare professionals are recorded and all medical correspondence is saved on file. Support is available for people with medication needs. We saw medication is securely stored and administered in line with the prescriber's recommendations. There is a medication policy and care staff receive medication training. Medication audits are completed every month to ensure practice remains safe and effective.

Care staff are trained to understand and implement safe practices to prevent infection. Infection control training is part of the service's core training provision. There is also an infection control policy which promotes safe practice. We completed a visual inspection of the environment and identified one potential infection control risk. We discussed this with the manager who assured us action would be taken to resolve the matter.

Environment

Good

People live in an environment which is suited to their needs. There are a number of communal areas people can access to spend time with others and engage in activities. These communal areas consist of a main lounge area with dining facilities, a kitchen and an activities room. The activities room is equipped with a pool table, dart board and other entertainment equipment for people to use when they choose. Communal areas are clean, comfortable and nicely decorated. People have their own rooms which are personalised to their preference. There is an outdoor space which is safe and accessible. There is seating available and there are facilities for growing plants and vegetables. People we spoke to say they are happy with the environment, using words like *"its nice here"* and *"the home is perfect"* to describe it.

The service demonstrates a commitment to ensuring the environment and its facilities are maintained and serviced to a high standard. We saw up to date safety certification is in place for utilities such as gas, electricity and fire safety features. There is an up-to-date fire risk assessment and regular fire drills are held so people and care staff know what to do in emergency situations. We spoke to the manager about implementing a legionella risk assessment as there was not one present on the day of our inspection. The manager assured us this would be done at the earliest opportunity. We saw care staff follow a cleaning schedule to ensure the home is kept clean and tidy and environmental audits are completed to help identify and action any issues.

There are security arrangements in place to protect people. The home is secure to prevent unauthorised access. Visitors make themselves known on arrival and staff ensure they sign in and out of the premises. All confidential information is securely stored and can only be accessed by authorised personnel.

Leadership & Management — Good

The provider's oversight and governance arrangements promote a positive culture and supports the delivery of good quality care. The Responsible Individual (RI) also manages the home and has very good oversight of service delivery. The RI regularly discusses service provision with people and staff. In addition to this, satisfaction surveys are distributed to people and care staff to gather their views and help inform improvements. Audits are conducted and consider areas such as health and safety, the environment, medication and people's personal plans. These audits aim to highlight and action any issues quickly. Every six months a quality-of-care review is held to assess the services performance. We looked at the latest quality of care report and found it identifies what is working well and what needs to improve. This process ensures the service operates smoothly and promotes quality and continuous development.

The provider's policies and procedures are appropriate and help to promote safe practice within the service. Care staff know how to access policies and procedures if needed. Policies and procedures are reviewed regularly to ensure they align with current legislation and national guidance.

The service provider has strict selection and vetting processes for hiring staff to ensure they are qualified and trustworthy. Personnel files we examined evidence the provider completes all the required pre-employment checks. These checks include references from previous employers, employment history checks and Disclosure and Barring Service (DBS) checks. New staff have to complete a structured induction to help them understand their role and the care and support needs of supported people. We saw all care staff are registered with Social Care Wales, the workforce regulator.

People achieve positive outcomes because the provider has a strong commitment to ensuring skilled and knowledgeable staff are always at the service. We saw sufficient staffing levels on the day of our inspection. Care staff we spoke to said staffing levels are appropriate. Care staff are trained to meet the needs of the people they support. Records show care staff are up to date with their training requirements. In addition to training provided by the service, care staff are encouraged to complete recognised qualifications in health and social care. Care staff receive the required levels of formal support and feel supported by the management. One staff member told us, *"The manager is brilliant, really easy to get on with".* Care staff can also access an employee assist programme where additional benefits such as a confidential counselling service is on offer to provide support if needed.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.