



Arolygiaeth Gofal  
**Cymru**  
Care Inspectorate  
**Wales**

## Inspection Report

### Mill House Residential Care Home



Cardiff



02920253176

The inspection visit took place on 08/01/2026

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### Service Information:

|                                          |                                                                                                                              |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Operated by:                             | CRS CARE LIMITED                                                                                                             |
| Care Type:                               | Care Home Service<br>Adults Without Nursing                                                                                  |
| Provision for:                           | Care home for adults - with personal care, Provision for learning disability, Provision for mental health                    |
| Registered places:                       | 4                                                                                                                            |
| Main language(s):                        | English                                                                                                                      |
| Promotion of Welsh language and culture: | The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service. |

## Ratings:



**Well-being**

**Good**



**Care & Support**

**Good**



**Environment**

**Good**



**Leadership & Management**

**Good**

## Summary:

Since the last inspection the service has a new manager and a new Responsible Individual (RI) and together the management are gradually implementing improvements. The manager is working hard to continue to drive improvement in all areas. Care staff are safely recruited and receive training and supervision. A team of senior care staff provide consistency and know people very well. There is oversight in place through auditing and regular checks, the management team are strengthening some systems to ensure they consider all aspects, so improvements can be easily identified. Leadership is good.

The home is warm and welcoming; people appear relaxed and comfortable in their surroundings. People can decorate their rooms if they choose and all have access to bathing facilities and a kitchen. The service is clean and infection control systems are in place. We noted some wear and tear and some issues with fire safety, the management were aware of some issues which had been raised with the Directors of the company and swift action was taken to reduce any immediate risks.

This is an area for improvement but overall, the environment is good.

Care and Support is good. People receive care and support from appropriately trained staff. Most care staff are passionate about what they do and understand their roles and responsibilities well. People's care is well recorded, and personal plans are in place and regularly reviewed. The service is working on improving the quality of plans and risk assessments to ensure they are person-centred and provide adequate information. Medication management is good.

Well-being is good. People's voices are heard and they are protected from harm and abuse. People have the opportunity to do what they want most of the time. We saw plans are in place to ensure people receive their required support hours to access the community and a range of activities. People appear happy and comfortable in their homes, and feedback from relatives appears positive.

## Findings:



### Well-being

Good

People have the opportunity to share their views and have their voices heard. People's views are gathered regularly through monthly resident meetings, personal plan reviews and surveys as well as the RI visits and management presence. Mill House receives regular visits from an external Age UK advocate also. Relative's feedback that staff ask them their views, saying "*I appreciate being involved and asked.*" People appear relaxed and happy in the company of one another and their care staff.

People are safe and protected from abuse and neglect. We saw care staff appropriately report concerns and record accident and incidents. The manager and RI maintain oversight of accidents, incidents, complaints and any safeguarding concerns. Care staff complete safeguarding training and understand how to identify and escalate concerns. Care staff are safely recruited and are registered with Social Care Wales, the workforce regulator and all hold a valid Disclosure and Barring Service check. The RI reports matters to safeguarding and to Care Inspectorate Wales when required.

Several people enjoy relaxing at home in their rooms or communal spaces, some enjoy going out and about in their community to different events and activities. A new activity coordinator has been appointed, increasing in-house and community activities for everyone. The service has also been considering ways they can celebrate Welsh culture, such as decorating love spoons, baking Welsh cakes and visits to Welsh heritage sites. Hallways display photographs of people enjoying a range of activities, contributing to a positive and inclusive environment. Notice boards provide key information, including the on-call rota and safeguarding guidance.



## Care & Support

Good

Personal plans are in place which inform care staff of people's basic needs and risks. Important information such as people's health, things they enjoy, and meaningful relationships are included. Regular reviews are completed by staff and the person and there is some person-centred detail regarding how the person would like their care. People's personal outcomes and goals could be better recorded and monitored within their plans. The service is developing how they record to ensure potentially high-risk areas, such as diet and nutrition and mental health, are well recorded, reported and responded to. One member of staff told us, *"We read them regularly and when they've been updated."*

Medication records are good and completed appropriately, with regular stock checks and auditing. People's level of support in relation to medication is recorded and people receive their medication in the right way and at the right time. We noted some medication records are not always completed in line with the services policy and medication audit requirements, and oversight is being strengthened to improve this. The medication policy is also under review.

Daily records are maintained through an electronic system. While these appear task focused. the service offers a well-being one to one check to ensure they capture how the person is that day. Records show appropriate health checks are carried out, and health professionals are involved when required. The manager told us they regularly speak with District Nurses and staff have received training from them specific to people's needs. Accidents and incidents are recorded, and the manager and RI maintain oversight of this. One relative said they felt their loved one is safe and *"Well cared for."*

Some consistent care staff provide continuity and know people very well. We observed staff and people interacting in a caring and warm manner and enjoying lots of banter. The atmosphere was calm and relaxed, and people appeared to communicate well with another and get along.



## Environment

**Good**

The service is homely and welcoming, the lounge is well presented and offers a range of seating to support social interaction and visits from family and friends. The kitchen includes a dining table, where we observed people sitting together and engaging in conversation. People are encouraged to prepare meals independently, and we saw evidence of this taking place. The home has been inspected by the Food Standards Agency and achieved a five-star rating, indicating a very good standard of food hygiene. We saw care staff wear appropriate personal protective equipment. Overall, people appear relaxed and comfortable in their surroundings.

People share an appropriately equipped bathroom. During the inspection, some bathroom supplies had run out. These issues were promptly addressed by the manager. Individual bedrooms can be personalised according to people's preferences, new bedding and mattresses have been recently purchased. Care staff promote independence by encouraging people to keep their own rooms clean and tidy. Some wear and tear were noted on the stairs and in several bedrooms; however, the provider has assured us that these issues are being addressed.

All communal areas were clean and tidy, and we saw care staff actively cleaning at the time of inspection. The home has a small garden, but most people prefer to access the local community independently and choose not to regularly use the outdoor space. QR codes are displayed to enable people and staff to report any environmental concerns. Care staff checked our identity on arrival and ensured we signed in and out of the visitors' book, promoting safety and oversight.

The provider's arrangements for auditing the physical environment require strengthening, as current processes do not consistently identify maintenance issues. We discussed the need for regular and robust environmental checks with the manager, who provided assurances that improvements will be made. The front door is secure and operated using a fob system, care staff hold the fob and people have agreed to this however we discussed the need for individualised risk assessments and consideration regarding this to ensure people can have their own access to the property, whilst maintaining the safety of other people who live there.

Fire safety systems are in place, including a sprinkler system, and maintenance records for fire alarms and emergency lighting are up-to-date. However, the fire risk assessment was out of date and personal emergency evacuation plans (PEEPs) lacked sufficient detail. Since the inspection, the provider has implemented automatic fire release doors. Outcomes for people require improvement because people may be at risk of harm and we expect the provider to make improvements.



## Leadership & Management

Good

Since the last inspection the service have made changes to the management team, with a new RI and manager in post. The new manager brings experience and knowledge and plans to make several improvements to the service. The new RI maintains oversight of the service and has plans to improve the robustness of auditing and monitoring in place. A team of senior care staff know people extremely well and maintain very good oversight of the day-to-day running of the service.

Care staff told us they felt supported by the management team and receive regular training and supervision. One staff member said, *"We work well together."* Training and supervision records are up-to-date and well maintained. Care staff receive safeguarding, positive behaviour support, fire safety training. Care staff receive regular medication competencies and know how to report concerns. The RI and manager ensure the appropriate authorities are informed of incidents when required. Care staff files are well organised; they include the appropriate information and checks to ensure staff are suitable to work with adults at risk. The manager has implemented a new induction checklist to ensure care staff receive regular shadowing opportunities and one to ones. One staff member told us, *"Staff are lovely."* The service has improved their levels of staffing since the last inspection. People's levels of need and risk have been identified using a dependency tool. The service has ongoing recruitment to be fully staffed, and we discussed the need to ensure suitable arrangements are in place to cover vacancies in the interim.

The RI visits the service to gain feedback from people, their relatives and staff, and to maintain oversight. We noted that the RI reports show some improvement areas noted at inspection had already been identified. The RI checks personal plans to ensure they are up-to-date and reviewed as well as medication, complaints, safeguarding, staffing, incidents and the environment. The RI also completes a Quality of Care review, which considers feedback from professionals and evidence changes and improvements made including changes to risk assessments, menu choices and activities.

# 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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

| Summary of Areas for Improvement                                              | Date identified |
|-------------------------------------------------------------------------------|-----------------|
| People's safety may be risk if health and safety is not monitored effectively | 08/01/26        |

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

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