Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Wepre Villa Homecare Ltd

Wepre Villa Homecare Ltd, Holywell Road Ewloe, Deeside, CH5 3BS

01244537733

The inspection visit took place on 24/08/2026

Service Information:

Operated by:	Wepre Villa Homecare Ltd
Care Type:	Domiciliary Support Service
Registered places:	0
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
Leadership & Management	Good

Summary:

Wepre Villa Homecare is a domiciliary support service offering home care support to people living in Flintshire. The service delivers support which is tailored to individual needs and enables people to maintain their independence and live at home for as long as possible. People are supported to make choices about their daily lives, maintain important relationships and access opportunities that enhance their quality of life.

People receive safe, responsive and personalised care from a service which promotes independence. Care staff take time to get to know people and form positive relationships with them, supporting them to achieve good wellbeing outcomes. They are safely recruited, well supported and provide a good standard of care and support.

The manager promotes a positive culture valuing people, staff, and continuous improvement. Since the previous inspection, the provider has made good progress in strengthening governance arrangements and responsible individual (RI) oversight. One area for improvement from the last inspection has been met. Whilst one area for improvement remains, progress has been made, and the rating for leadership and management is good.

Findings:

Well-being — Good

People are supported to live healthy and safe lives and have opportunities to make choices about things that matter to them. We found many positive examples of person-centred support promoting independence, dignity, and well-being. Personal plans contain detailed information about people's preferences, routines, desired outcomes, and support needs. Care staff demonstrate a good understanding of individual needs and support people to make choices about their daily lives. People are encouraged to engage in meaningful activities and maintain routines that are important to them.

Family members and professionals speak positively about the service, and surveys demonstrate a good level of satisfaction with the care provided. Feedback in the service's quality questionnaires describes staff as caring, reliable, and responsive. People's comments include; care staff look after people "*with professionalism and good-natured cheerfulness day by day,"* and are *"caring compassionate and professional."*

The service promotes social inclusion and community engagement. The manager has recently started a dementia café in the local community, which offers meaningful opportunities for social interaction and community participation. Both people receiving a service and others in the local community are welcome to attend. The initiative supports people living with dementia, those experiencing social isolation and individuals receiving end of life support.

People's communication and language needs are considered. Information is adapted to support understanding, including increasing font sizes for people with visual impairments. The provider promotes Welsh language and culture through Welsh language resources, training opportunities, and the use of Welsh phrases within the service. Care staff demonstrate an awareness of the importance of supporting people to communicate in ways that best meet their needs.

Care staff protect people from abuse and neglect. People and relatives told us the manager is approachable and they are happy to contact them with any issues or concerns. The manager takes time to listen to people's queries and concerns and identify possible solutions. During the inspection we observed the manager responding promptly to requests for support and working collaboratively with families and professionals to achieve positive outcomes.

Care & Support — Good

People receive personalised care and support to assist them to achieve their personal outcomes and maintain their independence. Pre-admission assessments are completed before care commences. These assessments are thorough, person-centred, and consider people's strengths, preferences, communication needs, health conditions, risks, and desired outcomes. The information gathered is used effectively to determine whether the service can safely meet people's needs.

People are involved in the planning and review of their care and support. Personal plans are detailed, strengths-based and provide clear guidance for care staff. They include daily routines, information about people's preferences, routines, communication needs, and expected outcomes. Reviews are completed regularly, and managers ensure plans are updated when changes in need are identified. People and relatives can contribute to reviews and decisions about how care should be delivered.

People's health and well-being are supported through effective partnership working with health and social care professionals. The manager and care staff have form positive relationships with external agencies and make timely referrals when concerns about people's health or safety are identified. Care staff recognise changes in people's health and seek appropriate professional advice. Health concerns, medication issues and safeguarding matters are escalated promptly to ensure people received the support they required.

People are protected from harm and abuse, with established safeguarding arrangements in place. Care staff receive regular safeguarding training. The service is responsive to safeguarding issues and escalate concerns appropriately to relevant professionals. Care staff understand their safeguarding responsibilities and demonstrate a willingness to raise concerns when required. Concerns are responded to appropriately and information is shared with relevant agencies to promote people's safety and well-being.

People receive their medication in a way that promotes safety and positive outcomes. Medication systems are robust and include electronic medication administration records, competency assessments, and clear escalation procedures. Care staff are aware of medication-related risks and take prompt action when concerns about medication management are identified.

People's risk of infection is minimised through established infection prevention and control arrangements. Care staff complete infection prevention and control training, and relevant policies are in place to support good practice.

Leadership & Management — Good

People benefit from a service led by a committed and visible management team. The manager has a positive and supportive approach to both people and care staff. The culture within the service is professional, welcoming, and person-centred. Care staff, people, and external professionals gave us consistent positive feedback about the manager describing her as approachable, accessible, and responsive to concerns and suggestions.

People are supported by a provider which promotes staff well-being and development. Care staff feel supported in their roles. Staff welfare is promoted, including flexible support during adverse weather, practical assistance for staff and recognition of staff achievements. Care staff have a clear understanding of the management structure and know who they can approach for support and guidance.

The provider has an established recruitment, induction, training, supervision, and appraisal process to support the development of staff. Care staff receive relevant professional guidance, including updated Social Care Wales codes of professional practice. Team meetings are held regularly and provide opportunities for staff to share good practice, discuss concerns, and contribute to service improvements. Care staff told us they feel listened to and have opportunities to raise concerns through regular team meetings and discussions with managers.

The service has governance and quality assurance arrangements in place. There is regular oversight and monitoring of the service through weekly management reports, RI visits, and ongoing governance activities. The service has made improvements from the last inspection. The RI is visiting the service every three months, speaking with staff and people, and reviewing a selection of records. Whilst the provider completes six monthly quality-of-care reports, further improvements are needed to ensure complaints, accidents, incidents, concerns, and safeguarding issues are analysed to consider any patterns or trends. This will help inform areas in which service delivery can be improved. As this is outstanding, the area for improvement will remain.

The provider has arrangements in place to manage the scheduling of domiciliary support visits and support continuity of care. Care staff told us they had sufficient time to undertake visits and meet people’s needs. The manager understands the importance of travel time and responsiveness to people's changing needs, including extending visits where necessary to ensure safe and person-centred care is provided. This area for improvement from the last inspection has been met.

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
We found there is a risk of poor outcomes for people due to a lack of oversight by the responsible individual.	30/04/25

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

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