



Inspection Report on

Hillbury House Care Home

**2 Hillbury Road
Wrexham
LL13 7ET**

Date Inspection Completed

05/03/2025

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About Hillbury House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pendine Park Care Organisation Ltd
Registered places	64
Language of the service	English
Previous Care Inspectorate Wales inspection	7 May 2024
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

Care staff are kind and warm in their approach and are keen to provide the best support to people. There is appropriate health and safety monitoring in place, and infection prevention procedures are followed by staff to keep people safe. Staff told us they are well supported by management. Records show care staff receive training to keep people safe and to meet their care and support needs. Although guidance on falls management is provided to staff as part of policy toolkits, further training on falls is required in response to falls in the service. There is a good choice of nutritious, homemade food and people with special dietary requirements are catered for.

The home provides a safe environment for people living at the service. It is warm, clean, and maintained. The home is welcoming, people's rooms are comfortable, and they can spend time in communal areas or access the well-stocked and maintained garden. The home engages well with health professionals and refers to the relevant services as and when required.

An area for improvement has been highlighted in relation to supervision of management of the service as the oversight and governance of the service needs improvement to make sure the best possible outcomes for people are achieved and the requirements of the regulations are met. We identified concerns in relation to the safe storage and oversight of medication and have issued a priority action notice. We have also issued a priority action notice in relation to personal plans as the provider has not ensured people consistently have accurate and up-to-date personal plans in place.

Well-being

People mainly enjoy a good quality of life at Hillbury House. They experience person centred care which enhances their physical and mental well-being with prompt referrals being made to medical and specialist services to promote people's health and well-being. People enjoy a varied programme of activities and events and have meaningful interactions with care staff, who they have developed positive relationships with. Care staff complete a range of relevant training to ensure they practise safely including Deprivation of Liberty Safeguards procedures to ensure people are not unlawfully restricted.

The systems in place to help protect people from harm require strengthening. Managers review and adjust staffing levels to ensure people receive appropriate care and attention and staff practice is monitored through formal supervision and appraisal, addressing any issues. Everyone has a personal emergency evacuation plan in the event of a fire and all staff have attended fire training. Care staff deal with accidents and incidents and know how to report concerns about people's welfare, but improvements are required in ensuring falls risk assessments are reviewed and action taken to mitigate any further falls and accidents to protect people from harm. People cannot be sure care staff have an accurate understanding of their needs, as personal plans are not always in place or up to date. People consistently receive their prescribed medicines, but storage and overall medication management is not consistently managed in a safe way.

The accommodation is both spacious and homely. Communal rooms are sociable places where people can relax and take part in individual or group activities. The service is warm, clean, homely and all areas of the home are clear of trip hazards so that people could safely walk around. Equipment is regularly serviced and maintained to ensure safety.

People can have control over their day-to-day lives. There are opportunities for people to be stimulated and active or have things to look forward to. There is a menu choice, and alternatives are available, meals, desserts and cakes are freshly prepared, using locally sourced produce. People have the choice of where to spend their days in the privacy of their bedroom or one of the lounges and people's rooms are personalised and contain personal possessions and furniture they have brought with them. People are treated with dignity and respect in the home. The provider is working towards providing an active offer of Welsh in the home; we saw bilingual signage and documentation is available for people, and staff are encouraged to speak Welsh to residents by using phrases.

Care and Support

People do not always have an accurate and up-to-date personal plan. Pre-assessments are carried out with people prior to the service commencing. Enrichment, personal care and safety plan contains details of things that make people happy, things that worry them, significant dates and favourite food and drinks preferences. One person had been in the home for some time, and they were missing care planning documentation, this included personal plans. Mobility personal plans and risk assessments in relation to falls management require improvement for two people as they are not updated after the people had fallen. Although monthly reviews take place, personal plans are not always updated when people's support needs change. Personal plans are also not always updated to reflect professional advice. Personal plans for another person had not been updated to reflect their condition or care needs. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Care staff follow best practice when administering medicines, have regular medication training, and management are currently completing medication competency assessments for the relevant staff. However, we found concerns in relation to the safe management and storage of medication. We observed the medication fridge was faulty, and fridge and rooms temperatures have not been completed over a short period of time which poses a risk to the safe storage of medication. The service replaced the medication fridge the next day following the inspection feedback. We saw staff member was disturbed twice during the medication round and a staff member confirmed they do not use 'Do not disturb' tabards although they are available to use when administering medication. Medicines awaiting return are not stored or booked in safely. These issues are placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this.

People have access to a range of healthcare support and their wellbeing is promoted. We saw from records, people are supported to access a wide range of healthcare professionals, including GP's and community psychiatric nurses as needed. Staff mainly follow guidance, and they ask for support in timely way. People receive care and support in a meaningful and dignified manner.

People are happy at their home; they often choose to socialise together and do things they enjoy individually or as a group. For example, people were enjoying art therapy and proudly displayed their artwork on the walls. People can enjoy a wide range of activities to support their mental well-being from games to live music, pancake tossing, dominoes. We saw a quiz being facilitated by the Activities Coordinator with a number of people engaging and enjoying it. Mealtimes provide a pleasant experience for people, with music playing and they provide the opportunity to socialise with one another.

We saw meals are plentiful and thoughtfully presented. Special menus are in place for different events such as Valentine's menu and St David's day. People looked very well presented and were offered a choice of refreshments and snacks.

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Environment

People feel at ease in their surroundings. They are greeted by two pet budgies in the main foyer and can enjoy relaxing and socialising in a spacious yet homely environment. The dining rooms are the hub of the home and a popular place for people to spend their time. The accommodation has some homely touches and interesting features. Bedrooms contain items that are important to people and are laid out according to their needs and wishes. Equipment and adaptations enable people to move around and use the facilities safely. The home also has communal lounges on each floor, which we saw people using at their leisure and attending art therapy classes. The large gardens around the home are private and well maintained, people can freely access them, and the sensory area has a tranquil feel. There is a fenced fishpond, and seated areas, which can be accessed via the main dining living areas and entrance hallway. There are seasonal shrubberies which emanate a pleasant fragrance. People can access the hairdressing room where they can enjoy a visit from the hairdresser once a week. There was a maintenance person employed at the home and maintenance records were regularly reviewed to ensure all required work had been completed.

The service promotes a good overall standard of hygiene and infection control and there are measures in place to help keep people safe. We found all communal areas to be clean and tidy, with easy access to hand washing facilities and hand sanitiser. Exits and other doors leading to potential hazards are fitted with keycodes to prevent people accessing these areas without support. We found private and communal rooms to be clean and tidy. The manager told us the home recently received positive feedback following a visit by the Food Standards Agency and has a rating of five (very good). Records show all staff complete training in relation to food safety, health and safety, fire safety and infection control. We found there is a sufficient supply of personal protective equipment, and staff told us they always have enough available. A call bell system allows people to request assistance from care workers when they need it.

Leadership and Management

Governance arrangements are in place but these need to be strengthened to make further improvements to the service. The quality of-care review reports are required to be completed every six months but are completed monthly by the provider. However, improvements are required to ensure the service provider has suitable arrangements in place to assess, monitor and improve the quality and safety of the service as set out in the regulations. Although regular audits are completed in relation to all aspects of the running of the home, the RI did not identify the issues in relation to personal plans, medication and falls management that we found during this inspection. Whilst no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People are supported by a service which provides appropriate numbers of staff who are suitably fit and have the knowledge, skills, and qualifications to support people living at the home. We reviewed staff training and found staff are up to date with training, including some specialist training. Although guidance is provided to staff for the management of falls as part of a policy toolkit, we were unable to evidence staff receive training in falls prevention. Care staff are registered with Social Care Wales, the work force regulator. All staff have an up-to-date Disclosure and Barring Service check in place. Regular staff meetings have not taken place recently, plans are in place to reintroduce them. A staff member commented *“used to have them – not anymore – would really benefit from those so would like them to be reintroduced”*.

Handovers and communications books are in place, and we were told seniors are proactive in providing updates on people’s conditions. We reviewed a sample of staff rotas and found staffing levels are consistent at the service.

People are supported by staff who feel valued and supported. Care staff we spoke with told us they feel supported in their roles. They said they get on well as a team, they have regular training and supervisions. Supervisions and appraisal records show staff are provided with the opportunity to discuss any issues, to give and receive feedback on their performance and discuss their developmental needs. Staff are happy and work well together, comments include *“the home has a friendly atmosphere”* and *“I like working here. Staff team are really good”*. They can raise issues with the management who are always available and approachable. There is a confidential phone line called ‘care to call’ for staff to be able to access so they can raise issues confidentially.

The service provider has oversight of financial arrangements and continues to invest in the service. We found there are sufficient supplies of food, and cleaning equipment. Staffing levels are consistent, and arrangements are put in place to cover any staff absence. The service provider has sufficient liability insurance in place.

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 may be at risk of poor wellbeing outcomes due to lack of effective systems for the oversight of the service.	17/03/2025

Summary of areas for Priority Action	Date identified
People cannot be certain the storage and oversight of their medicines meets current guidelines for ensuring the safe keeping and administration of their medicines.	17/03/2025
People cannot be assured the information held about them is current and up to date. Without personal plans in place people are at risk of care staff not having an accurate understanding of their support needs.	17/03/2025