Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Willowbrook House Nursing Home

Willowbrook House Nursing Home, St. Arvans Crescent St. Mellons, Cardiff, CF3 0FD

02920790760

www.willowbrookhouse.co.uk

The inspection visits for this service took place between 20/07/2026 and 13/08/2026

Service Information:

Operated by:	Beatrice Rose Care Group Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care
Registered places:	110
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

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

Summary:

Willowbrook House Nursing Home is in a suburb of Cardiff, with local amenities close by. People experience good well-being outcomes because the service provides consistency of care from a dedicated care team. People form strong bonds with care staff, who know them well. The residents' committee regularly meets with service leaders. People's voices are informing and shaping service development.

People experience a good standard of care and support and are complimentary of the service they receive. Most daily outcomes are met. The service is continuing to strengthen how they deliver care in-line with people's preferences and needs, and ensuring daily records are an accurate account of the care delivered. People access healthcare professionals and medications are well managed.

The environment is good, which supports people's daily outcomes. It is clean, comfortable and decorated to a high standard. Access to well-kempt outdoors spaces, and ample communal areas supports well-being.

Leadership and management is good. Since the last inspection the provider has enhanced the governance systems with mostly good effect. Organisational structure, responsibilities and accountability is clear. The responsible individual (RI) is accountable for the quality monitoring of the service. The RI and governance team are taking prompt and effective steps to strengthen their processes to address matters identified at inspection.

Findings:

Well-being — Good

People are treated with dignity and respect. People are encouraged to have control over their day to day lives whenever possible. Suitable arrangements are in place for people who require additional support to make complex decisions. Many representatives told us the service listens to them and works well with those who know people best. Since the last inspection, the provider has re-established the residents' committee, who meet with service leaders to share views and raise matters on behalf of people receiving a service. Meetings are recorded, and the committee is provided with service updates, progress on matters previously raised, and people's requests are well-documented. We saw input from residents relating to mealtime preferences, menu choices, activities and events. This strong approach to listening attentively and providing clear information promotes inclusion and empowerment of people to have a say in service development.

People are offered choices in daily activities during weekdays, whereas activities provided at the weekends are more relaxed. Many people take advantage of the opportunities to be involved in hobbies and events with others. This provides social stimulation in group settings, which are supported by a team of activity staff. Group activities are generally well attended. Activities are promoted and information is available enabling people to make a choice and plan their day. We met many people who are content to stay in their rooms where they do what they enjoy, such as; watching TV, reading, knitting, listening to the radio or receiving visitors. We found records about social and meaningful interactions to be limited, especially for those who do not leave their bedrooms. We discussed this with the provider, and they reflected on how to strengthen oversight of how they record people's well-being outcomes when there is a potential risk of social isolation. The provider arranges for faith services to be held in line with the current religious needs of people living in the home.

Overall, communication needs are met, with written information and care delivery available to people and representatives in English. The service is not delivering the Welsh Active Offer to provide a service in the Welsh language but there is no impact on people at the time of inspection. The staff team are developing a cultural focal point in the home to evoke memories and connect people to their Welsh heritage. The provider understands their responsibility under the regulations to develop the active offer.

Care & Support — Good

People receive care and support from a staff team who know them well, understand their individual needs and consider what matters most to them. Information about the service is available to help people and their families make informed decisions. A qualified staff member completes a comprehensive assessment before admission to ensure the service can support their personal outcomes. People are complimentary about the care and support they receive. They described the staff team as kind, sensitive and good at their jobs. We saw engagement between people and staff across the departments to be respectful, warm and caring. People benefit from receiving care and support from a team which contain long serving, established and experienced care staff and nursing colleagues. People told us it is important to them to see regular care staff working within their communities.

People largely receive care and support which meet their needs and promotes positive outcomes. We found some care records did not always contain sufficient detail about people's preferences and some aspects of personal care. We also identified inconsistencies between daily records and people's presentation, particularly relating to oral care, nail care, bathing or showering. People receive support to wash daily, but not necessarily in line with their preferences for showering or bathing as outlined in their personal plan. Some people told us they occasionally experience a delay before care staff can attend to them during busy times of the day. We discussed this during the inspection with the management team, resulting in them reflecting on how to strengthen oversight of daily care delivery and staff deployment. While improvements are required, we did not find evidence of harm or significant impact on people's well-being and will review progress at the next inspection.

People access freshly prepared home cooked meals, and their input and feedback about menu choices is collected through surveys and the residents' committee. The service caters for people with additional dietary requirements, assistance at mealtimes and complex nutritional support needs. People's weights and skin integrity are monitored with good effect, and professionals told us the service is responsive to people's changing needs and referrals are made promptly. The provider maintains records relating to clinical input from visiting professionals and their feedback about the service is complimentary. Other professionals commented the service works well with them and follows clinical guidance and advice.

The management of medication is effective, with clear roles and responsibilities for ordering, stock control, storage, administration and record keeping. Clinical auditing is working well to ensure medication management is reliable, safe and meeting people's needs.

Environment Good

People live in a home which is highly decorated, well furnished, comfortable and welcoming. An effective maintenance team ensures the home is well-maintained. People have access to the garden. The outdoor space offers people an attractive and stimulating area in which to spend time. During inspection, we saw people enjoying a garden fete, which was well attended. The provider arranged craft stalls, refreshments, activity stalls and a raffle. We saw people and their visitors enjoying the event and being in the outdoors together.

People live in an environment which meets their needs. They have access to a variety of different indoor communal areas to spend time. Many bedrooms are individually decorated and personalised with things of importance to people; a small number of rooms were less personalised. General standards of cleanliness and hygiene throughout the home is good. But we found a small number of items such as bed bumpers, bedding and equipment to be worn, which increases the risk of infection and compromises people's dignity. Overhead storage in people's rooms required attention to ensure the safety of people, staff and visitors. The registered manager took immediate action to address the environmental matters identified during our observations. They have taken responsive action to improve the auditing and oversight of the environment, deploying clear roles and responsibilities for ensuring standards are maintained and issues addressed promptly.

The on-site hair salon is a much-valued facility. People told us they enjoy having their hair cut and styled as often as they want. Large communal lounges provide ample room for people using wheelchairs or comfy armchairs to use the space. The dining areas are well-presented. Tables are laid with tablecloths, place settings, menu information and a condiment setting. This provides people with a dining environment they would expect at a restaurant or café. The provider has further developed people's dining experience by deploying enough staff to the dining rooms and making changes to the positioning of the tables to give people a more social and inclusive mealtime experience.

The provider is investing in additional moving and handling equipment to ensure there is enough readily available to support people's daily outcomes. The provider's monitoring processes identified the need for more equipment. This aligned with our inspection findings and feedback from care staff. Communal bathrooms with adapted baths and wet room facilities are available to people. Storage cupboards containing supplies of bedding, consumables and cleaning products are locked to keep people safe. Clinical rooms containing medicines and clinical supplies are secure.

Leadership & Management — Good

The organisational structure is clear. The provider has invested in strengthening the leadership team since the last inspection. The changes foster a positive and compassionate culture at the service with staff commenting on the confidence they have in the leadership team. The RI is accountable for the quality monitoring of the service. They are supported by the registered manager, clinical leads and quality lead roles. We observed improvements since the last inspection in auditing, which are positively impacting some aspects of care delivery. This coincides with the investment made by the provider to transition to digital systems. Whilst we see good progress with auditing, improved clinical governance and service development, this remains to be an area of growth for the service. The RI completes formal visits to the service and produces a quality-of-care review. The review captures highly detailed accounts of stakeholder feedback and provides a candid account of what is working well, and people's views on what could be better.

People receive continuity of care and support from a dedicated staff team. We found the service experiences challenges with deployment of care staff to ensure people's needs are consistently met. The provider is proactive in developing new ways of working to ensure people do not experience delays, whenever possible, in their care delivery.

Records relating to safe recruitment are mostly well managed. Disclosure and barring certificates are up to date. Most care staff are registered with Social Care Wales, the workforce regulator, and over half of staff hold or are working towards a relevant qualification. Staff receive online and classroom-based training to complete core topics relevant to their role, and compliance is high. Clinical staff are in the process of completing enhanced training to meet the needs of people. Care staff receive regular supervision and appraisals, but records relating to induction and probation were not available during inspection. The provider has taken prompt action to re-evaluate their processes and introduce a more robust system for documenting the support and development of new staff. Overall, staff told us they feel listened to, they value the changes made to the organisational structure and appreciate how positively it is impacting the work environment. Care staff feedback demonstrates teamwork is a strength of this service.

Policies are in place to meet the needs of the service. People are safeguarded from harm and abuse because the provider evaluates safeguarding matters, concerns and complaints. They address practice issues and develop the service when lessons are learnt. The provider is delivering the service in line with the statement of purpose, which is a regulatory requirement.

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.

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