Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Wepre Villa Homes Ltd

Wepre Villa Care Home, 36 Hall Lane Connah's Quay, Deeside, CH5 4LX

01244822619

weprevilla.co.uk

The inspection visit took place on 16/02/2026

Service Information:

Operated by:	Wepre Villa Homes 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:	32
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:

Wepre Villa is nursing home set in a quiet residential area of Connah's Quay. It is a short walk from a large park and is on a local bus route. It is a situated in a converted 19th century building, providing nursing and residential care services to adults. The building has been adapted to meet the needs of people, providing good quality, spacious communal areas and comfortable rooms. It provides a good environment for people.

The service provider has developed highly personalised care planning documentation and with this they are able to ensure a good level of care and support is consistently delivered. Care and nursing staff know people well, they have formed positive relationships with them based on trust. They are able to assist people to identify and achieve good wellbeing outcomes.

The manager has good oversight of the service. They are approachable and available to people, relatives and staff, ensuring any concerns are listened to and acted upon promptly.

Findings:

Well-being — Good

People are treated with dignity and respect. They have control over their day to day lives and are supported to make decisions which affect them. People can choose where they spend their time and care staff ensure they have everything they need at hand, such as drinks, snacks, books and puzzles. This enables them to spend time as independently as possible. People have a choice of meals and alternatives can be provided if requested. Kitchen and care staff know people's preferences well and cater according to these. Cold drinks are available for people to help themselves to if they can.

A questionnaire is completed when people first move to the service, ensuring day to day preferences and choices are captured for people who may find it more difficult to make their needs known. Care staff have access to one-page profiles in each person's room, so they can always know key information about people. This is particularly helpful for newer staff to ensure they can deliver person centred care and support as they get to know people. People and relatives have access to a service user guide and the complaints process, as a copy is available in each person's room. Some staff speak basic Welsh and would be able to support people with basic conversation in the language if the need arose. Documents can also be translated into Welsh. Other language needs are considered on admission to the service. Some staff speak Polish and are able to provide care and support in Polish.

People are safeguarded from abuse and neglect. There are effective mechanisms in place to ensure every voice is heard and respected. People and relatives feel confident to raise any issues or concerns, knowing they will be listened to and appropriate action will be taken. One person told us they can raise any issues or concerns with care staff directly. They know they can approach the manager if needed but have never needed to.

People are supported to maintain and sustain relationships with family and friends. Visitors are made to feel welcome, staying for as long as they like. They can bring pets and have meals with people if they wish. People have formed friendly relationships with care staff, based on trust. There is a matching tool to ensure people are matched to care staff who suit their personality. We saw them laughing and enjoying banter with care staff. People have formed friendships with each other, and some choose to sit near their friends for company.

Care & Support — Good

The provider gathers highly detailed information from other professionals, and relatives involved in people's care to inform their decision on whether they can provide a service. We found initial assessments are highly detailed and thoroughly completed. The manager has received compliments on their pre assessment process form health and social care professionals. People's personal plans are highly detailed and personalised. Person centred processes are followed to ensure people's views are considered in any decision making. People's outcomes are person centred and clearly record the things they would like to achieve. Assessments and risk assessments have a good level of detail, providing care staff with clear instruction to follow. Nursing staff monitor and review people's care, completing regular checks of their physical health, enabling them to identify any changes in their health and wellbeing. They keep good records of health conditions and any treatment provided. We found any health monitoring checks which are required, such as food and fluid charts are also fully completed by care staff. People's care plans are reviewed monthly, with a summary completed reflecting on the month. Care and nursing staff receive training in end-of-life care and ensure people and relatives are treated with dignity and respect as they reach an end-of-life pathway. A healthcare professional has reflected the service's end-of-life care is, "*An example of excellent person-based care being delivered by a dedicated team*."

People feel secure, knowing that staff understand and act in accordance with their safeguarding responsibilities. The manager has an open-door policy, staff, people and relatives can approach them at any time. The service has good working relationships with health and social care professionals. One health care professional told us any issues identified are swiftly followed up by the manager. People are supported to take positive risks, and their views respected.

People receive their medication as prescribed and in accordance with national guidelines and the service provider's medication policy. Medication is safely stored, with any controlled drugs, doubly locked away. Medication administration records are fully completed with people's details so they can be clearly identified. Nursing staff ensure medication is clearly recorded when it is administered. There are processes in place to record and monitor the use of any 'as required' medication.

Care staff are trained, understand and implement safe practices to prevent infection. There is plenty of personal protective equipment available which is used appropriately. The service was clean and tidy throughout on the day of our inspection.

Environment

Good

Communal spaces meet the needs of people, promoting independence and providing opportunities for private meetings, activities and recreation. These areas are homely, comfortable and tastefully decorated with colour themes. There are plenty of chairs available in the communal lounge and conservatory. The conservatory had been decorated for Valentine's Day when we visited. The dining room has tables laid out to promote people socialising at mealtimes. People can personalise their rooms, and we saw they had brought photos, and other objects of sentimental value from home. Several bedrooms have been recently refurbished, and this is an ongoing scheme of work. Consideration is given to people's personal needs when rooms are allocated, for example ensuring people who need it, have sufficient room and seating to receive visitors. There are some bedrooms which can be shared, but these are only allocated as doubles if people have a pre-existing relationship. There is a large, enclosed garden and work is planned to put in an accessible pathway through the lawn, enabling more people to enjoy the outdoors in warmer weather.

Regular servicing, maintenance and immediate repairs of facilities ensures people's safety and wellbeing when using the service. A new fire alarm has recently been fitted, and there is ongoing work to replace bedroom doors with upgraded fire doors. Fire safety checks are undertaken regularly, ensuring all equipment is in good working order. People have clear personal emergency evacuation plans, meaning there are clear instructions for staff to follow in the event of an emergency evacuation. There is plenty of specialist equipment available to meet people's needs, which is regularly checked and serviced. The service has gas and electrical safety certificates in place. Water safety checks are also completed to reduce the risk of legionella. The building is safe and secure. There is a visitor's signing in book, and we were unable to enter the premises without first making ourselves known to staff. Windows have window restrictors in place and doors are locked for security. The service has a food hygiene rating of four, or 'good', and recommended actions are being undertaken to further increase the rating.

Leadership & Management — Good

The service provider has strict selection and vetting processes in place for hiring staff. New staff are required to undergo disclosure and barring service (DBS) and reference checks. They are required to complete a thorough induction when they join the service. Minimal agency staff are used, and there are checks to ensure any agency staff are skilled and qualified to work in the home. There are systems to ensure DBS checks for all staff are renewed in a timely manner. Staff are also required to register with Social Care Wales or the Nursing and Midwifery Council, the workforce regulators. Care and nursing staff receive regular training to ensure they have up to date knowledge and are following best practice. They receive supervision every other month and also have an annual appraisal to consider any training and development needs. There were plenty of staff on duty on the day of our inspection and the rota shows sufficient staffing is maintained.

The service provider's oversight and governance arrangements foster a positive and compassionate culture in the service. Staff gave us positive feedback on their experience of working for the service, telling us, "*I like how it is run*". One member of staff told us working there is "*The happiest I have ever been."* Staff told us there is good teamwork, indicating a positive culture in the service. Regular audits are completed to ensure the service is running smoothly. Whilst these are mostly positive, where issues are identified these are recorded and appropriate action is taken.

Medication audits are thorough with routines for completing medication counts to ensure records are correct. The manager has an incidents file, which records any accidents or incidents alongside action taken to reduce risks. Regular staff meetings are held, which are an opportunity to update staff and for them to raise any issues or concerns. The service has achieved an award for their work on person centred care planning and are proud to have achieved the highest level possible in this.

The responsible individual (RI) visits regularly and produces a three-monthly report of their visits. This evidences speaking to people and staff. The RI also inspects the premises and reviews a selection of records during these visits. Quality questionnaires are sent out to people, staff and professionals every six months and this information is collated and carefully analysed in a quality-of-care review. The manager and RI are going to review the format of the six-monthly quality-of-care review in line with updated guidance from CIW to ensure it fully meets regulations.

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.