



Rhiwlas Care Home



Rhiwlas Care Home, Northop Road, Flint, CH6 5LH



01352 733687

The inspection visit took place on 13/11/2025

Service Information:

Operated by:	Rhiwlas Care Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	66
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

Requires Significant Improvement



Care & Support

Requires Significant Improvement



Environment

Good



Leadership & Management

Requires Significant Improvement

Summary:

People feel happy in the home, where their individuality is respected. They enjoy positive interactions with care staff, although inconsistencies in practice can affect daily experiences and compromise people's health, safety and well-being. This requires improvement.

People do not consistently receive appropriate care and support from skilled and knowledgeable staff. This is putting people at risk of harm and requires significant improvement. Practices in relation to safeguarding and medication management also need to improve.

The home has good facilities to support people's needs and daily routines. The building is secure and in a good overall state of repair. There is an ongoing refurbishment programme.

Rhiwlas Care Home has a new responsible individual (RI), and their application is currently being considered by CIW and they are monitoring the service closely. The home also has a new

manager; a new deputy manager commences their post in the new year. All are being supported by the regional manager who is also new to the home. The service has not had consistent leadership, which has impacted negatively on the working culture, standards of practice and service development. New management are working to implement and embed new and improved ways of working. Although some positive changes have been made, significant work is needed to improve overall standards.

Findings:



Well-being

Requires Significant Improvement

People don't always have control over their day to day lives. A dependency tool is used which shows staffing levels are sufficient, but staff skill mix, and deployment are not in place to meet the needs of people in a timely and person-centred manner. Through no fault of the staff, a task-based approach to care is provided. Personal plans identify people's views and preferences, although some must be updated when people's needs change and contain accurate information to ensure plans remain suitable. Staff know how to report concerns regarding people's welfare but are not confident managers would take their concerns seriously. Call bells are not within reach and people's bedroom doors are left open when they are in bed sleeping.

People have a good social life and are mainly positively occupied. The service hosts many group activities and events, including themed parties, coffee afternoons, and live entertainment. People enjoy regular outings and access to the local community, as set out in the home's statement of purpose. The service caters for a wide range of dietary preferences. Requests for alternative meals are also accommodated. We saw foods of various textures being served in an appetising way. Supervision and assistance at mealtimes require improvement. Drinks are made available to people when spending time in both their own rooms and communal areas. We saw people enjoying visits from family and friends, whom staff gave a warm welcome. We heard staff using both Welsh and English language dependent on the persons preference.

People live in spacious, homely accommodation. Their private rooms are appropriately furnished, personalised as desired. The service was warm, clean, and homely. 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.

The service provider has safeguarding mechanisms in place, including policies and procedures aligned with current guidance. Most staff are familiar with these processes, but they are not always followed by staff and management. People living at the service generally report feeling safe and able to raise concerns with staff or management. Safeguarding reports are not consistently made to the Local Authority when required, and staff do not always escalate concerns to management as they state they have no confidence action will be taken. While most staff are described as approachable and friendly, these gaps in reporting and escalation present a risk to the effectiveness of safeguarding arrangements. 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 & Support

Requires Significant Improvement

People do not consistently receive the care and support they need at the right time. Feedback from people indicate staff shortages sometimes prevent timely responses to requests for assistance. Records and discussions show that some people are not regularly offered opportunities for personal hygiene, such as baths or showers. Delays were also reported when meals are served in rooms. Observations during mealtimes highlighted that not all people experience meaningful engagement from staff. In some cases, staff assisted more than one person simultaneously, resulting in extended mealtime durations and limited interaction. Call bells were out of reach for many people. There is a significant number of people with weight loss, however referrals are made to the dietitian but the reason why some people have lost weight is not always explored. The service generally makes appropriate referrals to health professionals when individuals require specialist input, including GPs, Occupational Therapists, mental health services, and Speech and Language Therapy. However, this practice is not consistent for all individuals, and improvements are required to ensure timely and equitable access to specialist support. 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.

Personal plans are generally well-structured, with thorough pre-admission assessments and regular reviews. However, discrepancies were identified in some plans. Some personal plans also lack detail and contain inaccuracies, meaning care staff may not have access to the guidance they need to support people safely. Not all personal plans include updated risk assessments following changes in health status or incidents such as falls. This creates a risk that staff may not have access to accurate written guidance on mitigating identified risks to individuals' health and well-being. Additionally, records of care and support provided are not consistently accurate, particularly in relation to oral health care and pain management.

Medication administration practices in the service require improvement. Staff administering medication are trained, however their competency have not been assessed in a timely manner. Medication audits are completed by management. Improvements are required in ensuring ordering of medication is completed in a timely manner, so people do not run out of their medication. 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.

The service provider has effective systems in place to promote good hygiene and manage infection risks. The home is clean and well-maintained, supported by cleaning schedules and regular clinical waste collections. Personal Protective Equipment is readily available throughout the building, ensuring staff have continuous access. Staff receive training in infection prevention, and practices observed align with current guidance. Domestic staff follow organised cleaning schedules and complete logs each shift regarding their cleaning activities.



Environment

Good

People are comfortable in their surroundings. They have established their own routines and regularly use communal rooms to relax, socialise and take part in various activities. People may also choose to spend time in quieter areas or enjoy the privacy of their own bedrooms. Many bedrooms reflect people's personalities and have been set out and furnished to suit their needs and preferences. The home has a designated area for people to use when the hairdresser attends every week. People also have access to an outside area for relaxation and outdoor activities. The service provides a good range of facilities and adaptations, including dementia-friendly features that support safe freedom of movement. Noticeboards display information about meetings and activities, and people have access to leisure items such as radios, televisions, and sensory equipment. Communal areas are appropriately decorated with good furnishings and homely features.

The home is secure and properly maintained. Visitors cannot enter the building without staff approval and an electronic record is kept as they enter and leave. All staff complete mandatory health and safety training. Maintenance officers carry out routine health and safety checks alongside general repairs and refurbishment. We observed the home and facilities to be in a good state of repair. The utilities and equipment have been inspected and serviced within recommended timescales and are safe for use. The home uses external contractors for specialist works. Fire safety checks are completed, and people have up to date personal evacuation plans.



Leadership & Management

Requires Significant Improvement

Governance arrangements to support the smooth operation of the service and provide high quality care and support to enable people to achieve their personal outcomes require improvement. There has been a period of instability in the home and a history of managers leaving the service. We found that the lack of consistent leadership has affected staff morale. The new responsible individual (RI) visits the service and there is now a permanent manager in the home. People do not always receive a service as outlined in the statement of purpose. Auditing and monitoring systems are in place such as monitoring people's weights and fluid/food intake however the management oversight require improvements. It does help to identify trends; however, appropriate action has not been taken as there has not been a permanent manager in the home to drive improvements in the standard of the service. New management have provided reassurance that they are committed in making the necessary improvements we identified in the inspection. Investment has already commenced in improving the positive outcomes for people and developing and empowering staff so they will be able to deliver high quality care for people. The management team have informed us they are developing an action plan and key priority areas are already being addressed. The failings we identified 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 issue.

People cannot always expect to receive a timely response to care. This is because staff working on the floor are not deployed in sufficient numbers. Staff have adopted a task-based approach to care because they are busy attending to people's care needs. Staff told us there is not enough staff working in the home and they struggle to meet the care needs of people, and some do not provide people's basic care such as applying cream to people's skin. They said they don't have time to offer baths and showers. They also said senior members of staff stay in the office and complete medication rounds and do not help them during busy periods. This has resulted in low staff morale. The service provider has provided reassurance that this has been addressed and working practices have now improved. Management are working together to improve standards and are committed to developing and embedding a positive and compassionate culture.

The service provider ensures staff are suitably fit, with appropriate knowledge, skills, and qualifications to deliver care and support that enables people to achieve their personal outcomes. Recruitment records confirm thorough vetting checks prior to employment, and staff receive role-specific induction, annual appraisals, and regular supervision. Staff have completed their mandatory courses and are registered with Social Care Wales the workforce regulator. Staffing levels recorded align with the statement of purpose; however, most people we spoke with feel staffing numbers are insufficient to meet their needs. Systems are place so that concerns can be raised and staff have access to management and out of hours on call arrangements. Additionally, some staff reported concerns that management does not always respond or take action when

issues are raised.

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.

CIW has no areas for improvement identified following this inspection.

Summary of areas for Priority Action	Date identified
People cannot be assured they will receive the care and support in line with their personal plans in a timely way, this can have a negative impact on people's overall physical and emotional wellbeing.	13/11/25
If people live in a service lacking a positive and compassionate culture, it places their well-being outcomes at significant risk or means their well-being outcomes are not met at all.	13/11/25
If the service provider does not ensure proper safeguarding, incident and accident reporting and care staff do not have the knowledge, skill and understanding in place to identify risks and actions to take accordingly, people's safety and well-being is put at risk.	13/11/25
The service must handle people's medicines safely and effectively, ensuring accurate records are retained in relation to medication stocks and audits are effective in addressing any issues	13/11/25

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