

Inspection Report

Name of Service: Willow Grove Care Home

Provider: Kathryn Homes Ltd

Date of Inspection: 17 December 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Kathryn Homes Ltd
Responsible Individual:	Mrs Tracey Anderson
Registered Manager:	Mrs Michelle Marie Devlin
Service Profile This home is a registered Residential Care Home which provides health and social care for up to 27 residents who are living with dementia. Residents are accommodated in single bedrooms on the ground floor. Residents have access to multiple communal spaces and a secure garden area. There is a separate registered nursing home which occupies the same building and the registered manager for this home manages both services.	

2.0 Inspection summary

An unannounced care inspection took place on 17 December 2025 from 10.10am to 4.40pm by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to assess progress with the areas for improvement identified, by RQIA, during the last inspection on 12 August 2025 and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to residents and that the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable and well trained to deliver safe and effective care.

The home was found to be clean and bedrooms were personalised with items which were important to residents.

Residents said that living in the home was a good experience and praised the meal provision.

As a result of this inspection all of the areas for improvement identified at the last inspection was assessed as having been addressed by the provider. This inspection resulted in no new areas for improvement being identified.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from residents, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards. Inspectors will also observe care delivery and may conduct a formal structured observation during the inspection.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

3.2 What people told us about the service

Residents spoke positively about their experience of life in the home. Comments included: "the staff are excellent, this is a well run home. There are always plenty of staff around. I am very happy in here," "I am happy enough in here, the staff are good and I am well cared for," and "I am very happy here and well looked after. I feel very safe and they are all good to me."

Discussions with residents confirmed that there was enough staff on duty and if they wanted anything all they had to do was ask. Residents commented positively on the meal and activity provision in the home.

Staff spoke positively in terms of the provision of care and advised that there was good care provided in this home. Comments made by staff included: "All activities are resident focused, depending on what they would like to do," "there is a good staff team, we all cover for each other. There is a good atmosphere in here," and "I am very happy working here. There is a good staff team; we all get on well and there is little turnover of staff. There is good care provided here and I could approach the manager to raise any concerns."

Discussions with relatives reported that they were happy with the care provided and that the staff were very good to them.

3.3 Inspection findings

3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of residents. There was evidence of robust systems in place to manage staffing.

Residents said that there was enough staff on duty to help them. Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels.

It was noted that there was enough staff in the home to respond to the needs of the residents in a timely way; and to provide residents with a choice on how they wished to spend their day. For example; if they wished to have a lie in or if they preferred to eat their breakfast later than usual.

3.3.2 Quality of Life and Care Delivery

All care staff received a handover at the commencement of their shift. Staff confirmed that the handover was detailed and included the important information about the residents, especially changes to care, that they needed to assist them in their caring roles.

Staff interactions with residents were observed to be polite, friendly, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual resident's needs, their daily routine, wishes and preferences. Observations of the staff and residents interactions during the activities found staff to be kind and compassionate.

Staff were observed to be prompt in recognising residents' needs and any early signs of distress, including those residents who had difficulty in making their wishes or feelings known. This was particularly evident when staff provided reassurance to a resident who became anxious and distressed.

At times some residents may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard residents and to manage this aspect of care.

Examination of care records and discussion with the manager confirmed that the risk of falling and falls were well managed and referrals were made to other healthcare professionals as needed. For example, residents were referred to their GP if required.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

Observation of the serving of the lunchtime meal confirmed that enough staff were present to support residents with their meal and that the food served appeared appetising and nutritious. The atmosphere was calm and organised. There was a variety of drinks available. It was observed that residents were enjoying their meal and their dining experience.

The importance of engaging with residents was well understood by the manager and staff. An activity schedule was on display in communal areas offering a range of individual and group activities in preparation for the festive period. Activities available included storytelling, hand massage, Christmas carols, light exercise and church services. Residents looked forward to attending the planned events.

During the inspection a number of the residents were engaged in music activities and singing. Each resident was encouraged to participate in so far as possible. For other residents in the home they were engaged in discussions with the staff. There was a relaxed atmosphere during the activity and staff were readily available to assist and support in the planned activity.

Residents also had opportunities to listen to music or watch television or engage in their own preferred activities such as reading the daily papers. Residents commented that there was always something to do.

Arrangements were also in place to meet residents' religious and spiritual needs within the home.

3.3.3 Management of Care Records

Residents' needs were assessed by a suitably qualified member of staff at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents' needs and included any advice or recommendations made by other healthcare professionals.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care staff recorded regular evaluations about the delivery of care. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

3.3.4 Quality and Management of Residents' Environment

The home was clean, tidy and well maintained. Residents' bedrooms were personalised with items important to the resident.

Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable. The corridors displayed photos of activities completed by the residents and light music played in the background.

Systems and processes were in place to manage infection prevention and control which included regular monitoring of the environment and staff practice to ensure compliance.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mrs Michelle Devlin is the registered manager of the home.

Discussion with staff confirmed that the manager was easily accessible and available to provide guidance.

Review of a sample of records evidenced that a system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the manager responded to any concerns raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided in the home.

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Michelle Devlin, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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