



Inspection Report on

Emral House Nursing Home

**Emral House Nursing Home
11 Chester Road
Wrexham
LL11 2SA**

Date Inspection Completed

30/03/2023

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About Emral House Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Pinefold Limited
Registered places	45
Language of the service	English
Previous Care Inspectorate Wales inspection	25/9/2019
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy and are supported to live their lives as they choose. People's voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to help ensure people receive the care they need to remain as healthy as possible.

Care is delivered by an enthusiastic and familiar staff team who want to make a positive difference to people's lives. Care documentation reflects the person being cared for, but improvements are required to ensure it is person centred. The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm, clean, and decorated to a very high standard.

The Responsible Individual (RI) has oversight of the service and visits the service daily. There are clear systems in place to monitor the quality of care provided and ensure action is taken to address any areas that require improvement. People living and working at the home benefit from the stability provided by a well-established and experienced registered manager and management team who provide a visible presence. This is a service which sets high standards for itself and demonstrates a continuing commitment to quality assurance and improvement, but improvements are required in staff supervision and training.

Well-being

People are supported with their physical, mental health, emotional and social wellbeing. People we spoke with are complimentary of the staff and management of the home and we observed staff providing assistance calmly with dignity and respect. Care records are mostly comprehensive and the support they described is provided in agreement with the person, however this could be further improved by ensuring personal plans are person centred. We saw referrals are made to the relevant health professionals in a timely way. We observed care workers had good knowledge of people's needs and referred to people in a positive way and it was clear they knew the people they supported well.

People are able to exercise choice and control over their every-day lives. A 'This Is Me' document is completed with the person or their family member about their likes and preferences in activities of daily living. We observed people enjoying various sitting areas throughout the home and company of others. We observed interactions with people by care staff, were considerate, and respectful of their wishes, likes and dislikes. There is a choice regarding meals and alternatives are available if they do not like any of the choices on the menu. People can choose and participate in a variety of activities and have opportunities to socialise with others if they wish to. We saw that people are empowered to make choices about their day-to-day life and we observed people could rise from bed when they chose. There is a robust complaints process in place and people's views are sought as part of quality assurance monitoring and RI visits.

There are systems in place to protect people from abuse and harm. There is a safeguarding policy in place and the manager has a good understanding of the safeguarding process. Care staff have received training in safeguarding and the Mental Capacity Act. Care workers we spoke with recognised their personal responsibilities in keeping people safe and told us they were confident to go to the management team with any concern or issues. Staff recruitment is mainly robust; however improvements are required in obtaining two references prior to employment commencing. Improvements are also required in care staff attending training and regular one to one supervision.

People live in a clean and homely environment. The service was warm, clean, and homely. All areas of the home are clear of trip hazards so people could move around safely. The accommodation includes different communal areas for people to use and there are opportunities for people to socialise or be independent. Specialist equipment is provided to meet people's care and support needs. The entrance to the home is secure and there are infection control measures in place to protect visitors and residents. The service provider ensures the building, specialist equipment, and grounds are well maintained.

Care and Support

Overall people receive appropriate person-centred care and can feel confident that there is an accurate up-to-date plan of how their care and support will be provided in order to achieve the best possible outcomes. Care records are well organised and the information they contain is easily accessible. Personal plans provide guidance for care workers in how care and support is to be provided for the person. However, plans are not always person centred and personal outcomes for individuals are not always included. Personal plans and associated documents are reviewed regularly to ensure that they remain current. The manager and RI have already acknowledged this is an area that requires improvements and plans are already in place to ensure each person has a person-centred plan in place.

People are offered a choice of nutritious healthy meals that are tailored to the likes, dislikes, and preferences of people at the home to encourage nutrition. We were told by the chef that a three-week rolling menu is in place which provided people with a choice of two meals and an alternative available if required. The chef told us they visit people living at the home on a regular basis and record people's individual dietary requirements and preferences. We observed the lunch time meal experience for people. We saw a choice of meals available and observed the dining room to be pleasant and calm. The Environmental Health department has awarded the service a level 5 food hygiene rating (the top rating) which demonstrates how well the business is meeting these requirements.

People are safe and well because they receive proactive care, and their care needs are anticipated. Care staff understand the needs of the people they care for and do so with kindness and patience. We saw positive relationships between people and care staff and lots of laughter and friendly banter taking place. One relative praised all the staff for all their hard work and kindness. We saw evidence that referrals are made to external professionals such as physiotherapists, optician, podiatry, and dentist when required and any advice or guidance is fed into personal plans and followed correctly. Nutrition and fluid records are kept for those who may be at risk of weight loss or dehydration.

People have opportunities to engage in some arranged activities by care staff. A Summer Fayre is planned for this year, and this is normally a themed party. An external singer visits the home every month. Plans are in place to celebrate the King's Coronation, and people will be invited to attend afternoon tea. There is an iPod which can be wheeled to any resident in any room. People can enjoy relaxation music, watch archive News footage, look at old photographs. People can also use it to join in karaoke, bingo, quizzes, and jigsaws. The clinical lead stated it had been invaluable during the Pandemic and helped residents communicate with their families and loved ones. People's choice to engage in activities is always respected.

Environment

People live in an environment that is suitable to meet their needs. The home is warm, welcoming, and decorated nicely throughout. There is ample communal space for people to choose where they want to spend their time. This includes a dining area, several comfortable lounges and a conservatory that enables people to spend time together or in private if they wish to. There are sufficient adapted bathrooms and toilets for people to use. We viewed a selection of bedrooms and saw they are warm, clean and contain people's personal belongings. Bedrooms are personalised to individual taste with personal items of memorabilia including photographs, ornaments, and items of furniture. People told us they felt happy living at the home. We observed daily cleaning being undertaken, and communal areas are kept hazard-free to maintain residents' safety. The service has a pleasant, well maintained external space that contains good quality garden furniture which enables people to spend time outdoors as and when they wish. Part of the home has been closed off as it is currently undergoing refurbishment.

People can be confident they live in a safe environment. The main entrance is secure, and our identification was checked before we were permitted entry. The building is well maintained, and safety checks of the building are completed when required. There is a fire risk assessment in place and all people have a Personal Emergency Evacuation Plan (PEEP) which is important as this guides staff on how to evacuate people in the event of an emergency. The fire alarms and emergency lighting are tested regularly. Staff have received training in fire safety and first aid. We saw environmental certificates confirmed that safety checks and measures in relation to gas installation, and safety records, electricity and PAT (Portable Appliance Testing) were satisfactory and up to date. The lift is serviced as required by Lifting Operations and Lifting Equipment Regulations 1998 (LOLER). All confidential files including care and staff files are stored securely.

Leadership and Management

People can be sure there are robust, transparent systems in place to assess the quality of the service they receive, which includes feedback from people using the service and their representatives. The RI is at the service most days and has produced a log of their visits. Records of these visits evidenced discussions with people, their family members and professionals involved in people's care and were used to check the overall quality of support provided and informed any improvements that could be made. The registered manager is experienced and well-established and has a visible presence in the home. We saw care staff, residents, and their visitors approach the registered manager and members of the staff team with ease. They told us that they felt able to raise matters with the registered manager and that their views were respected and acted upon. There are robust policies and procedures for the smooth running of the service and the manager understands the legal requirements regarding caring for vulnerable people.

People can be assured people are mainly recruited and vetted. A sample of staff recruitment files were examined which mainly contained the required information to ensure suitability and fitness. Pre-employment checks to ensure staff were 'fit' persons to work at the home, such as references and Disclosure and Barring Service (DBS) checks had been completed. However, it was noted that two files contained only one reference and a verbal reference had not been obtained. We discussed this with the manager who told us this would be remedied in the future. Staff meetings are held regularly, and meeting minutes detailed matters such as good practice guidance well as general issues.

People mainly receive care and support from staff who receive training and regular supervision, but improvements are needed. Training is provided in some mandatory areas such as Safeguarding, infection control, Mental Capacity Act, and manual handling however improvements are required in staff receiving training in tissue viability, nutrition, and service specific training. The RI and manager have identified this as an area requiring improvement and stated due to the pandemic sourcing training has been difficult, and some steps have already been taken and training has been booked. Staff supervision requires improvements especially in relation to the qualified nurses and manager. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
36	The registered provider has not ensured staff are provided with necessary and specialist training and	New

	supervision in line with the statement of purpose.	
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