



# Inspection Report on

**White House Residential Home**

**The White House Residential Home For The Elderly  
5-7  
Grove Road  
Wrexham  
LL11 1DY**

**Date Inspection Completed**

**13 January 2022**

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## About White House Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Chestnut House Healthcare Limited
Registered places	37
Language of the service	English
Previous Care Inspectorate Wales inspection	21 November 2018
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People receive good care and support from a caring staff group. They receive timely care to ensure they remain as healthy as possible.

People are supported in a well maintained environment, which has good health and safety measures in place. Attention is given to ensuring the environment is clean, with good infection control measures in place.

There are good systems and processes in place to monitor how the service operates. A range of audits, oversight by the Responsible Individual and good management structure ensures the smooth operation of the service. Staff receive a good range of training and regular supervision to ensure they are competent and skilled.

## Well-being

People are well supported to have control over day to day life. Personal support plans detail their individual needs and preferences. They can choose when they would like to get up and where they spend their time. People used to have the opportunity to attend resident meetings so they could express their opinions on a range of topics including food, décor and activities. These had been put on hold due to the Covid 19 Pandemic, however there are plans to restart them. The manager ensures people can voice their opinions in the meantime, regularly asking people's opinions. People can call in and discuss issues with the manager as they have an open door policy.

People's physical and mental health are promoted. A wide range of regular activities are on offer, which people can choose to join in with and make suggestions as to what they would like to do. People's risk of harm or abuse is generally well managed. Staff receive regular training and updates on safeguarding, although the safeguarding policy does not refer to the most current Welsh guidance. Staff understand their responsibilities to report any concerns. Everyone has a personal emergency evacuation plan (PEEP). There are good systems in place to manage infection control to keep people and staff safe.

People have, and are supported to maintain, good relationships with others. During the Covid 19 pandemic, people have been supported via a range of means to keep in contact with those who are important to them, including video calls and a dedicated visiting area within the home. Activities within the home provide opportunities to socialise with others.

People live in an environment that meets their needs. Investment in the home has made it more dementia friendly, with large airy spaces for people to freely move around in. The garden provides a stimulating environment for people to spend time in.

## Care and Support

People receive care and support that meets their individual needs. Personal care plans are generally thorough and demonstrate that people's individual preferences are known and understood. Usually, care and support plans are reviewed as required, to ensure they are up to date. However, it was clear care staff understood people's current needs. People told us they are happy with their care, and the care staff are '*very kind*' and respectful to them.

People receive good support from friendly, respectful and motivated staff. People receive support as described in their care plans. People told us they can follow their own routines. One person said '*I get up when I want*'. We saw staff are kind and respectful and provide care in a relaxed manner. There is a varied menu for people to choose from and people told us they like the food. People are offered food and portion size to meet their individual needs. People can join in a wide range of activities for stimulation and enjoyment, for example, reminiscing, singalong, armchair exercises, arts and crafts and baking sessions.

People are supported to maintain their health and wellbeing. People are helped to access a wide range of healthcare professionals in a timely way, including GP's, community psychiatric nurses and support for people who have falls. People receive the medication they require safely. Staff competency is checked before they can administer medication. Robust audits of medication procedures are carried out on a regular basis and prompt action to rectify identified issues is taken.

People's safety is well maintained. The service has good systems in place to ensure people are safeguarded from abuse, through regular training and relevant policies. People told us they feel safe in the home. Staff told us they felt confident in their knowledge and would report any concerns. Infection control systems are good, and there is a range of measures in use to ensure people are kept as safe as possible from Covid 19. This includes testing visitors to the home, as well as good use of personal protective equipment (PPE) by staff and visitors, and a dedicated visiting room if required.

## Environment

The service provides people with care and support in a well-maintained home. Facilities and sufficient equipment promote personal outcomes effectively. It is accessible and safe with good security measures in place. People are able to choose where to spend their time, be it in their own personalised rooms or various communal areas throughout the home. They have access to a safe and stimulating outdoor area if they choose. The general environment is welcoming and clean, with cosy areas and more spacious rooms for people to choose from. Redecoration and refurbishment of existing rooms has taken place and more is planned. Some developments have taken place, to make the home more spacious, with attention paid to making it more dementia friendly using national guidance.

Health and safety of the home is well managed. The service has a maintenance person to carry out routine tasks in the home and gardens and they oversee the safety of the home. Regular, detailed health and safety audits are carried out and identified issues quickly dealt with. Regular fire system checks are carried out. Equipment is regularly tested and maintained to ensure its safety. The home has a Food Hygiene rating of 5, the highest score possible.

## Leadership and Management

The service has good systems in place to monitor the smooth operation of the home. The Statement of Purpose is regularly reviewed and accurately describes the way the service is delivered. The Responsible Individual usually carries out visits to the home every three months as required, however this has been adversely impacted by the pandemic. A good range of audits are carried out to ensure many aspects of the service are monitored and reviewed. Quality of care reports are not completed as often or as in depth as required, improvements to this would enhance the oversight of the service.

People are supported by a knowledgeable and skilled staff team. Safe recruitment practices are followed when new staff are employed. The service ensures training is up to date, and staff feel they have good training for their roles. Staff receive regular supervision to enable development of their skills and practice. They told us they feel well supported and valued by the organisation. Staff appear motivated and caring towards the people they support.





### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
N/A	No non-compliance of this type was identified at this	N/A

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