



Inspection Report on

Magnolia House Residential Home LTD

**Park Road
Rhosymedre
Wrexham
LL14 3EF**

Date Inspection Completed

16/08/2024

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About Magnolia House Residential Home LTD

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Magnolia House Residential Home Limited
Registered places	19
Language of the service	English
Previous Care Inspectorate Wales inspection	11 April 2022
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

People are happy with the support they receive at Magnolia House and are supported by skilled and responsive staff who know them well. We saw care staff provide positive reassurance and interaction throughout our visit, and ensured people are supported to make choices about their daily lives. Personal plans are person-centred, detailed, reflect people's needs and are reviewed and changed continually as the manager of the home has daily oversight of them. Activities are on offer with some being facilitated by residents and others by staff, trips out are arranged and external entertainers come to the home.

Staff feel very well supported by management and are provided with training to meet people's needs. There are good governance arrangements in place and the Responsible Individual (RI) visits the home regularly to oversee management of the home and gather the opinions of people and relatives to help to improve and develop the service. The environment is well-maintained and homely, and the service is operating in line with the statement of purpose.

Well-being

People have control over their day to day lives and feel they are listened to when making decisions that affect their lives. Care staff work from personal plans that are written together with the person and staff are familiar with people's preferences. People say they like living at the home and can they make choices on how they live their lives day to day, telling us *"I like living here and I love the garden, they understand all the little things that are important to me, I'd highly recommend it as a place to live"*. People and their relatives are involved with the improvement and development of the service, and we have seen choices around food and activities on offer are discussed at resident meetings and suggestions are actioned. Rooms are homely and personalised with people's belongings. Care records give care staff the instruction required to support people accurately with detailed and person-centred instructions provided. Reviews are mostly carried out in line with regulations and the manager of the home has daily oversight of care records, ensuring personal plans are updated as and when needs change. Care staff know residents well and support people to move around the home safely. People have visitors coming to the home regularly and have good relationships with care staff and others living at the home.

Activities are on offer in the home, with some being facilitated by residents and others by care staff. A timetable of activities is displayed for people to see, and people told us they enjoy the activities on offer. Activities provided change with the seasons, we saw a trip planned to Chester Zoo, with previous trips to the Blue Planet Aquarium having taken place. External entertainers also come to the home, such as opera singers. Some of the activities planned for the week we visited were flower arranging, chocolate bingo and movie days. People are supported to practice their faith with a minister visiting on a monthly basis. There are digital pieces of equipment used for reminiscent therapy and quizzes. The service is working towards the Welsh language 'Active Offer' with staff being supported to learn basic Welsh phrases.

People are protected from abuse and neglect with care staff receiving training in safeguarding, there are safeguarding policies and procedures in place and staff follow these. People are supported to maintain and improve their health and wellbeing through access to specialist care and advice when they need it. Referrals are made in a timely manner to specialist services, ensuring people receive the right care and support, as early as possible. Care staff and the manager are proactive and work collaboratively with support agencies.

The lay out of the home supports people to achieve a good standard of well-being. People are encouraged to be independent with a strengths-based approach adopted by the service. Strategies for reducing the risk to people while they move around the home are sufficient. The person in charge has identified potential hazards and has taken steps to minimise risks to people.

Care and Support

People can feel confident the service provider has an accurate and up to date plan for how their care and support needs should be met. People are encouraged to co-produce their personal plans where possible and have choice over every-day decisions such as their meals, clothes they wish to wear and times they wake up in the morning. Personal plans are personalised, regularly reviewed and contain individual outcomes, likes, dislikes and preferences. The service understand what people are able to do for themselves and are therefore able to encourage people to be independent as possible. Robust risk assessments are in place and regularly reviewed. Pre-assessments take place before people move to the home and documents completed that tell staff about people's history and how they came to be at the home. People receive care in line with their personal plans and risk assessments and care staff are kept informed of important updates by thorough daily handovers. People say staff are kind and supportive, our observations on the day of inspection confirmed this and we saw relationships between care staff and people are warm and responsive. Mealtimes are sociable and people can choose to sit with others or sit alone if they wish. Food is well-presented and appetising and kitchen staff told us that management are supportive of changes suggested to improve food on offer. Dietary choices are passed to the kitchen and kitchen staff know about specialist dietary requirements. We observed appropriate manual handling and equipment being used.

Records show people have access to specialist advice and support from health and social care professionals and care plans and risk assessments are updated to reflect professional advice. Visiting professionals told us *"Anything we ask them to do, they do and the kitchen staff are really on the ball with dietary requirements"* and *"They have been very proactive in asking questions and are keen to develop techniques to make the move to the home a success"*. Care staff access appropriate and specialist training with bespoke training provided in relation to diabetes. Care staff feel that they can approach the manager if they have any concerns.

Medicines administration, management and storage practices in the home are good and keep people safe. Trained staff administer medication and their competency to do so is assessed regularly. Monthly medication audits are carried out by management.

Environment

People live in an environment suitable to their needs. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs, a new salon area was being created in the service at the time of inspection and is now fully operational. The décor in the home is well maintained, the manager and RI have good oversight of the environment and are proactive in identifying works required. People can socialise in communal spaces and can have privacy in their own rooms if they wish. Rooms are clean, tidy and personalised to people's own taste with belongings. Moving and handling equipment is stored accessibly and safely out of the way to prevent trips and falls. Gardens are accessible and well maintained, with access from the main living areas and people were using the garden on the day we visited. People access the main home through a securely locked door and are required to sign in and out and provide identification on arrival. We saw cleaning taking place throughout the building during our visit and all areas were clean and tidy. A visiting professional told us "*It is always clean and tidy and always smells nice*". The service provider has infection prevention and control policies, with good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety with regular audits taking place, actions identified are dealt with swiftly by maintenance staff. The RI has good oversight of the environment as they are at the home on a regular basis and they consider the environment in each RI visit report. The home has the highest food rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed, and records show required maintenance, safety and servicing checks for the lift, gas, and electrical systems are all up to date.

Leadership and Management

People can feel confident the service provider has systems for governance and oversight of the service in place. The RI is a regular presence at the service and completes RI visits to inspect the property, check records and gather the views of people and staff. Reports relating to visits show aspects of the day to day running of the service and clearly document actions resulting from the visit. We saw evidence of monthly management audits and related action plans of all key areas. Quality of care surveys are conducted by the home every six months. Residents and relatives give feedback through resident meetings taking place and the RI gathers feedback directly from people using the service. People say they can speak to the manager about changes to their care and action is taken.

People can be satisfied they will be supported by a service that provides appropriate numbers of staff who are suitably fit. Care staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. Records show there are suitable numbers of staff on each shift to support people's needs and new staff undergo thorough vetting checks prior to starting work in the home. Care staff receive an induction specific to their role and receive annual appraisals and one to one supervision meetings with the manager at the required frequency.

Care staff state they feel very well supported by the manager and have access to the training required to meet people's needs, they told us *"I absolutely love working here, it is such a lovely place and all the other staff are lovely"*, *"This is the best home I have worked at, I have had so much support from management, they help me to balance family life, caring responsibilities and work so I can keep working which is important to me"* and *"You don't get it very often that you are happy to get up and come in to work every day, I am here"*. Training is provided to staff through a combination of online and face to face training. Training records are reviewed and updated to make sure they accurately reflect training compliance. Care staff have either registered with Social Care Wales, the workforce regulator, or are in the process of doing so.

People can be confident the service provider has an oversight of financial arrangements and investment in the service so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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.

Area(s) for Improvement

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

	inspection	
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