



Inspection Report on

Elm Villa

**Elm Villa
Wheatsheaf Lane Gwersyllt
Wrexham
LL11 4SF**

Date Inspection Completed

28/01/2025

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About Elm Villa

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Penygelli Care Homes Ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	31 January 2024
Does this service promote Welsh language and culture?	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 with the support they receive at Elm Villa. People are well supported by kind and consistent staff who provide genuine and compassionate care. Care staff know people very well. Care staff provide positive reassurance and interaction to people and support people to make choices about their daily lives where possible. Personal plans are person-centred, detailed and reflect people's needs. They are reviewed and changed accordingly. Activities are on offer in the home.

Staff say they feel well supported by the management team and are provided with ample training to meet people's needs. There are good governance arrangements in place. The Responsible Individual (RI) is also the registered manager so has regular presence at the service to regularly to oversee management of the service and gather the opinions of people and relatives to help to improve and develop the service. People's views are reflected in quality of care review reports. The environment is effectively maintained, and the service is operating in line with the statement of purpose.

The area for improvement identified at the last inspection for supporting and developing staff has been met.

Well-being

People have control over their day to day lives wherever possible, they feel they are listened to, and their views are considered and respected. Personal plans are written together with the person and cater for people's preferences. People say they like living at the home and they are involved with improvement and development of the service. People have choices around food and activities on offer. Care staff listen to people's wishes and are responsive to people's needs. Bedrooms are homely, bright and personalised. Care records give care staff the clear instruction required to support people accurately and reviews are carried out in line with regulations. Care staff know people very well and have an up-to-date understanding of their current health needs. People have visitors coming to the service regularly and we observed good relationships with other people they live with and care staff.

Activities are on offer in the service with an activity calendar in place, entertainers are booked in a year in advance. Entertainment includes keyboardists, guitarists and singers and an exercise class takes place every Friday. People can choose whether they take part in activities.

People are protected from abuse and neglect with care staff receiving training in safeguarding and safeguarding policies and procedures in place and followed. People are supported to maintain and improve their health and well-being 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. The service is 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 as much as possible. Strategies for reducing the risk to people while they move around the home are sufficient and potential hazards are identified with 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. Pre-assessments take place before people move to the service and information is gathered around how people came to the home and their history. People are encouraged to work together with the service to complete their personal plans and have choice over everyday decisions. Personal plans are personalised, up to date, accurate and regularly reviewed. They are detailed and contain individual outcomes, likes, dislikes, preferences with robust risk assessments are in place and regularly reviewed. People receive care in line with their personal plans and risk assessments as care staff are kept informed of important updates, using thorough daily handovers and they understand people's current health and care needs well. People told us *"The staff are amazing, nothing is too much for them and we get on very well, I have a good laugh with them"*. Care is provided in a supportive way by skilled and experienced staff. Relationships between care staff and people are warm and positive. Mealtimes are sociable, people have choices and can have more if they wish. Food is well-presented and appetising. Dietary choices and specialist dietary requirements are understood by kitchen staff.

People have access to specialist advice and support from health and social care professionals. The service is proactive in contacting and continually liaising with healthcare professionals if a person's health changes. The service ensures people are sensitively supported to attend health appointments, as well as ensuring a member of staff accompanies people to hospital. Care plans and risk assessments are updated to reflect professional advice and care staff access appropriate and specialist training to meet people's needs.

Medication storage and administration practices in the service are good and keep people safe. Trained staff administer medication and their competency to do so is regularly assessed. Regular medication audits are completed and any actions identified, are addressed quickly.

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. Decorators were due to visit the service during the week we inspected. The décor in the home is bright, airy and maintained to a good standard. There are communal spaces throughout the home, on both floors, where people can choose to socialise with staff and others. People can also have privacy in their own rooms if they wish. There is an outdoor balcony that is available for people to use if safe to do so and during fair weather. People's rooms are clean, tidy and personalised to their own taste with belongings. Moving and handling equipment is stored accessibly, but safely out of the way to prevent trips and falls. People say they like their rooms. The gardens and grounds are well-maintained. People access the service through a securely locked door and during inspection we were required to sign in and provide identification on arrival. The service was clean and 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; regular health and safety audits are completed with actions dealt with swiftly. This is monitored by the management team and the RI. The home has the highest food rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed with records showing required maintenance, safety and servicing checks for the lift, gas, and electrical systems are 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 also the registered manager and therefore at the service regularly 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. Documents such as personal plans, medication records and rotas are checked during the RI visits. Recommendations and actions are identified at RI visits, and these are actioned accordingly. There are regular management audits undertaken with action plans in place to address areas requiring attention. A quality-of-care review is completed every six months, information from RI visits feed into this as well as feedback from people and their relatives. Meetings are offered for people to feedback to managers. People say they can speak to the manager about changes to their care that are required, and action is taken accordingly.

People can be satisfied they will be supported by a service which 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. There are suitable numbers of care staff on each shift to support people's needs. New care staff undergo thorough vetting checks prior to starting work in the service and they receive an induction specific to their role. The management team ensure staff receive the support that they need through annual appraisals and one to one supervision meetings. Staff told us *"They are keen for us to raise any issues or suggest any ideas for improvement, they are always available to us if we need them. I love working here."*

Care staff feel valued and supported by the manager and have access to the training required to meet people's needs. Training is provided to care 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	
36	Quarterly supervisions and annual appraisals are not being completed. The service provider must complete supervisions on a quarterly basis and appraisals on an annual basis.	Achieved

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Date Published 25/02/2025