



Chestnut House Care Home



Chestnut House Nursing Home, Hawarden Road Hope, Wrexham, LL12 9NH



01978760752

The inspection visits for this service took place between 10/11/2025 and 18/11/2025

Service Information:

Operated by:	Chestnut House Nursing Home Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care
Registered places:	41
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Requires Improvement

Summary:

Chestnut House Care Home is a residential home providing dementia care for up to 41 people. It is located in Hope.

We found people's well-being and care and support is good, but the medication practices within the home require improvement. People receive good care and support and there are a range of activities people can take part in. People and relatives are involved in making choices and decisions about what they want to do and how they spend their time.

The environment is good because it is personalised, meets people's needs and is well-maintained.

Leadership and management of the service requires improvement as we found the numbers and skill mix of staff means the changing needs of people may not always be met.

Findings:



Well-being

Good

People have control over their lives as much as possible, and they are treated with dignity and respect. Where people do not have capacity to make decisions themselves, these are made following the relevant mental capacity legislation and best interest guidance, involving relevant professionals and people's relatives. People have a choice of activities to take part in and are supported to practice their faith if they wish. There is a bilingual menu provided for people to choose from, but if people feel like eating something different they can. We also saw pictures of the menu options for the day displayed on a whiteboard to make it easier for people to choose their options. Resident meetings take place to gather people's views regarding the care home, at the last meeting people were given a choice of colours for their rooms to be redecorated in.

The service are working towards the Welsh language Active Offer as they ensure there are a range of documents provided to people bilingually. The responses to resident and relative feedback are also provided bilingually and displayed on the pin board in the foyer. Laminated sheets with basic Welsh phrases are made available for staff to use when providing care and support.

People and their relatives told us they or their loved ones like living at Chestnut House Care Home, A relative said *"They communicate with me very well about how they are, staff understand their needs well and know how best to communicate with them"*. Another relative told us, *"I'm happy with the quality of care, they are always well presented when I visit, I can visit when I like, and the staff do their best"* and *"I can't fault the staff"*. Support staff are as responsive as possible in responding to people's mental and physical health needs and adjust their approaches accordingly. People looked well cared for during our inspection visit.

People are safeguarded from abuse and neglect and supported to be involved in safeguarding processes where possible. Care staff receive training in safeguarding and policies and procedures are in place. Risk assessments are updated in a timely way, and steps are taken to reduce risks.



Care & Support

Good

People receive effective care and support to achieve their well-being outcomes. People are assessed before they move to the service to ensure their needs can be met. A visiting professional told us, *“The staff stick to recommendations we give. They always refer things to us if there are any concerns, so escalation of health needs is not a concern.”* Support is provided by a dedicated staff team who have a good understanding of people’s needs. Care staff understand how best to communicate with people. We saw positive and warm relationships with care staff and the manager and observed people chatting, laughing and smiling with care staff. People are supported to attend appointments without delay. When call bells are pressed, staff attend quickly.

Personal plans are completed to a good standard. They provide information to staff about what people can do themselves and what they need support with. Personal plans give a great amount of detail about people’s personal and work history so those reading them have knowledge of their lives before they moved to the home, activities they enjoyed and people who are important to them. They provide specific details about what people like and what they do not like. Risk assessments are updated as people’s needs change. Daily records show that care and support is being provided as stated in personal plans. Reviews take place in line with regulatory requirements.

Outcomes for people require improvement as we found people may not always receive medication as prescribed, or in accordance with national and local guidelines and the service medication policy, and we expect the provider to make improvements. Medication audits are completed and any actions identified are addressed and staff receive training in medication administration. However, we found inconsistencies in staff responsible for administering medication having their competency to do so assessed. We also found in the event of medication errors, the appropriate steps were not always followed to ensure thorough documentation, communication with health professionals and learning after the error.



Environment

Good

People live in a home which meets their needs. People's rooms are spacious, personalised and they can choose the colour of the paint in their rooms if they wish. We saw personal belongings in rooms and the rooms are mostly clean, tidy and homely. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs, and there is an ongoing refurbishment plan in place to continue redecoration throughout the home. People can mostly choose where they eat their meals and can socialise in the communal spaces if they wish or have privacy in their own rooms or quieter spaces in the building. As part of recent refurbishments, a new quieter lounge has replaced what used to be the office for the home and this is used throughout the day by people. Moving and handling equipment is stored accessibly for those that need it, but safely out of the way to prevent trips and falls. The front entrance to the property is securely locked and visitors are required to sign in and provide identification on arrival.

People can be confident the service provider identifies and mitigates risks to health and safety. We saw a maintenance log in place which documents environmental issues identified by staff, these are dealt with in a timely way. 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 gas and electrical systems are up to date.



Leadership & Management

Requires Improvement

The service provider has effective arrangements, governance and oversight to ensure the smooth operation of the service and good quality outcomes for people. Audits are completed of the care and support provided and visits to the service are completed by the Responsible Individual (RI) in line with the regulatory requirements. We saw evidence of actions from audits being completed, resulting in improvements to people's well-being outcomes. Spot checks take place during various times of the day and night. There are policies and procedures which contribute to the successful running of the service and inform care staff of what is expected of them. Quality of care reviews are completed every six months and people, relatives and staff are invited to provide feedback as part of this. We saw the feedback received displayed on the pinboard in the entrance foyer of the service, along with what actions the service planned to complete in response to the feedback, which we found had been achieved.

Outcomes for people require improvement because the service provider does not always maintain an appropriate number of staff who are effectively deployed within the service, and we expect the provider to make improvements. We found staff were over-stretched where there were unsatisfactory numbers of staff in the service, particularly at nighttime. Dependency tools used by the service require strengthening to consider people's present and changing needs, and the completion of domestic tasks such as laundry and cleaning. **We were given assurances the provider will take action and review their dependency tool.** In the event of an emergency the current numbers of staff may impede the ability of staff to effectively meet the needs of individuals.

People are supported by care staff who are safely recruited and receive training to carry out their roles effectively. The management have plans in place to audit staff files more effectively to make sure all documents that are required are kept on file. Care staff told us they feel well supported in Chestnut House Care Home and are treated kindly. Care staff have formal supervision and annual appraisals in line with regulatory requirements and feel able to approach the manager with any issues they may have. Training records are reviewed and updated by the management team to ensure training compliance and care staff informed us they are provided with plenty of training. Care staff are registered with Social Care Wales, the workforce regulator, or are in the process of doing so. Care staff team meetings are held several times throughout the year, and discussions take place about how the quality of care can be improved.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
If staff competency to administer medication is not assessed, administration errors are more likely to occur placing people's health and well-being at risk. If quality of policies, procedures and documentation in relation to medication and medication errors is not good, staff and management will not be aware of their responsibilities and issues in relation to medication administration will not be identified in a timely way.	10/11/25
People are at risk of not achieving good well-being outcomes if the provider has not ensured a sufficient number of suitably qualified, trained, skilled, competent and experienced staff are deployed to work at the service.	10/11/25

CIW has not issued any Priority action notices following this inspection.

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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