



Magnolia House Residential Home LTD



Park Road, Rhosymedre, Wrexham, LL14 3EF



01978824445



<https://magnoliahouseresidentialhome.co.uk/>

The inspection visit took place on 24/03/2026

Service Information:

Operated by:	Magnolia House Residential Home Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	19
Main language(s):	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

Good

Summary:

Magnolia House is a residential care home registered to accommodate up to a maximum of 19 people. They provide support to people who are diagnosed with dementia or a chronic health condition. It is in the village of Rhosymedre, which is in the county of Wrexham.

Well-being for people is good because people receive care that consistently supports their well-being in a respectful and reassuring way. Care and support is good as the support provided meets people's needs well and they achieve positive outcomes as a result.

The environment is good because the premises support people's well-being and safety and the environment is of a good standard. Leadership and management is good because arrangements in place provide consistent oversight, support care staff well and contribute positively to people's experiences of care.

Findings:



People experience care that supports their day-to-day well-being and respects what matters to them. People told us they are happy living at the home and see it as their own. Relatives described people as settled and well cared for and said care staff know them well. One relative told us staff recognise when their family member is anxious or in pain because they have learnt how the person communicates. People choose how they spend their time and take part in activities they want to do. Relatives said care staff encourage people to do what they can for themselves and support family involvement where this is important to them.

People benefit from positive relationships and meaningful activities that support emotional and social well-being. Staff told us the home feels like a family, and people appeared comfortable spending time in communal areas. People take part in daily activities, including bowling, music and group sessions. The service uses digital equipment for reminiscence. External entertainers, such as singers, visit the home, and people can take part in pet therapy. The service also plans external trips, including visits to local attractions. People are supported to practice their faith, with a minister visiting monthly to provide one-to-one services in people's rooms. Although there are no Welsh speaking residents at the service at present, there are two Welsh speaking care staff employed, and care staff also use a 'Welsh in my pocket' book to support them to communicate in Welsh.

People's physical and mental health needs are supported through regular access to health professionals and coordinated care. Relatives told us people receive timely support from professionals, including for catheter care, and that care staff arrange appointments and keep families informed. The service works closely with GPs and other professionals, including having collaborative discussions about medicines to ensure safe and appropriate treatment. Care staff record and respond to changes in people's needs through handovers and care records. Care staff told us care plans give a good history of the person and are reviewed when needs change. People are supported to eat and drink well, and care staff monitor this, including where they need assistance.

People feel safe and supported by care staff who understand their responsibilities. Care staff told us they receive safeguarding, medication, infection control and manual handling training, and felt confident raising concerns. Care staff described a positive and open culture where managers are approachable and respond quickly to issues, including maintenance and care concerns. Deprivation of Liberty Safeguards applications are in place and authorised where required, supporting people's rights while keeping them safe.



Care & Support

Good

People receive care that is personalised and based on a clear understanding of their needs and preferences. Care files are detailed, person centred and outcome focused, clearly describing the individual and how their diagnoses affect them. Records include people's life history, important relationships, likes and dislikes, communication needs and how care staff should support them. One person's personal plan explained they preferred quieter environments and enjoyed music-based activities, while another detailed how care staff should support them when their anxiety increased. Care staff told us the plans "*give a good history*" and help them understand how best to support people. Relatives confirmed care staff know people well, with one saying care staff "*have learned his ways*". While care staff acknowledged that some parts of the day can be busy, people and relatives told us care staff are responsive and available when needed.

People benefit from safe and effective care that is well planned and reviewed. Risk assessments are clearly written, appropriately rated and aligned with personal plans. These include guidance on falls, mobility, skin care, nutrition and manual handling, with clear instructions for care staff. Daily records are completed consistently and reflect the care outlined in personal plans. Reviews take place regularly, and plans are updated when needs change. Medication is managed well, with monthly audits completed by the manager and actions followed through. Care staff told us they feel confident administering medicines and know what to do if errors occurred.

People's health needs are supported by a service which works collaboratively with health professionals and takes professional advice into account. Records show input from nurses, dietitians and speech and language therapists. One care plan included detailed guidance for managing diabetes, including when insulin should be given, what food choices are appropriate and how to reduce the risk of dehydration. A visiting professional described communication with district nurses as positive, and one relative said care staff "*always get him to the right appointments*" and communicate well about outcomes of appointments. We saw evidence of regular weight monitoring, referrals where concerns are identified and clear escalation guidance for changes in mental health.

People are supported in a respectful way that promotes independence and dignity. Care planning reflects a strengths-based approach and encourages people to do what they can for themselves. One relative said, "*I feel like staff really know him*". Personal care preferences are recorded clearly, including whether people prefer showers or baths, what products they like and what clothing they choose to wear. Care staff spoken with demonstrated consistency in their approach and described a calm, respectful culture. Another relative said, "*He is really happy here*".



Environment

Good

People live in an environment that is well maintained, safe and designed to feel comfortable and homely. The home is clean and tidy throughout. One person said, *"It's always clean and tidy, décor is frequently updated."* The service regularly reviews health and safety arrangements, with monthly audits completed and actions followed through. Equipment is maintained appropriately, with routine servicing of gas and electrical systems, contractors attending as required, and checks and servicing of manual handling equipment completed and monitored for moving and handling equipment. Personal Emergency Evacuation Plans are in place and provide clear direction on how to support people safely. These arrangements help ensure the environment remains safe and fit for purpose.

The home is welcoming and aims to feel like a place where people can settle and feel at ease. Bedrooms are described as homely, with cosy lighting, and wardrobes securely attached to walls to reduce risks. People's clothing is washed on an individual basis, reducing the likelihood of items going missing. Communal areas are kept comfortable and well presented, and care staff describe the home as *"comfy and welcoming"*. Ongoing redecoration across communal areas and a number of bedrooms has taken place, contributing to a space that looks cared for and lived in. Wall cladding has been added to the lounge area, improving both appearance and durability. The provider continues to invest in the environment to improve people's experience. Since last inspection, a hair salon has been added to the home. These improvements show a commitment to maintaining a pleasant, safe and supportive environment that meets people's needs.

The environment supports people's day-to-day routines and access to facilities. Kitchen equipment is managed safely, with alternative arrangements used when needed to ensure people's meals are not disrupted. Housekeeping and maintenance systems enable care staff to identify and address issues promptly. Care staff told us repairs are completed quickly, and maintenance arrangements are effective. Environmental audits and checks support infection prevention and control and help maintain good standards across the building.



Leadership & Management

Good

The service is led by a visible and approachable manager who provides clear direction and promotes a positive culture. Care staff consistently described strong leadership and said managers are supportive and accessible. One care staff member said, “*Management [is] very approachable,*” while another told us they could “*raise anything with them.*” Care staff spoke positively about the atmosphere, describing the home as “*like a family*” with everyone working well together. Managers make time to speak with people living at the home, and people and relatives said they know who to talk to if they need support. Relatives also described feeling confident to raise any concerns, with one saying they could “*speak to someone if there’s been an issue.*” These arrangements support openness and trust within the service.

Leaders ensure care staff are supported, trained and deployed effectively to meet people’s needs. Training compliance is monitored and up to date, with additional bespoke training provided where required. Care staff told us the training offer is good and that managers would support them to complete further training if they expressed an interest. Induction, shadowing, supervision and appraisals are completed within required timescales. Recruitment and staff files are well maintained, with safer recruitment checks in place, including Disclosure and Barring Service checks and Social Care Wales registration. Care staff retention is good, and managers take steps to recognise staff contributions.

The management team maintains effective oversight of the service and drives improvement. A range of audits are completed regularly. Managers review these audits and act on findings to maintain safe and effective care. The RI (Responsible Individual) three monthly visits are completed and show good oversight of staffing, care records and the premises. Six-monthly quality of care review reports are also completed, with feedback analysed and actions identified to make improvements where possible. Managers told us there are plans to strengthen audit processes further to ensure issues are identified proactively, demonstrating a reflective approach to governance.

Leaders work well with external partners and demonstrate accountability in managing the service. The manager has joined a local steering group focused on hospital admission and discharge to help professionals better understand the type of service provided. This supports effective communication and safe decision-making.

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.

CIW has no areas for improvement identified following this inspection.

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

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