Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Aston Hall Care Limited

Lower Aston Hall Lane, Hawarden, Deeside, CH5 3EX

01244537389

www.astonhallcarehome.co.uk

The inspection visit took place on 21/04/2026

Service Information:

Operated by:	Aston Hall Care Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	43
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:

Aston Hall is a residential care home located in Hawarden, within easy reach of local shops, restaurants and supermarkets. The home accommodates up to 43 people in a spacious listed building, set within well-maintained gardens that provide an attractive, tranquil setting and encourages local wildlife.

This inspection found that Aston Hall provides a good standard of care with positive outcomes for people across all inspection themes. People experience a good quality of life, supported by meaningful, person-centred activities, strong community links and opportunities to maintain faith and personal identity. Relationships between people, staff and families are warm and respectful, contributing to a homely, welcoming environment where people feel valued and listened to. Care and support is safe, effective and responsive and staff demonstrate good knowledge of people they support and promote independence and participation in daily life.

The environment is clean, safe and well maintained, supporting comfort, dignity and wellbeing. Leadership and management are a strength, with visible, supportive leaders, robust recruitment,

and systems in place for quality assurance.

Some improvements are needed to strengthen care documentation, ensure processes fully reflect Mental Capacity Act requirements, and strengthen governance, but these had no impact on individuals using the service.

Findings:

Well-being — Good

People at Aston Hall experience a good quality of life and are supported to achieve positive wellbeing outcomes. The home provides meaningful, person-centred activities, that people spoke positively of, and detailed activity care plans demonstrate a strong understanding of what matters to individuals and what brings them enjoyment. There are strong intergenerational links through regular visits from a local nursery, and special occasions are actively promoted. People can practice their faith, and a church service occurs at the home fortnightly. A family member commented that the home has “a very homely atmosphere with lots of activities throughout the year with emphasis on special occasions/events,” supporting that the home’s approach has a positive impact.

The Manager and Responsible Individual engage with people living in the home to get their views on their plan of care and the service generally. The Quality of Care Review highlights how the home is striving to support people who have barriers to communicating their views to do so. This shows that that there are effective mechanisms in place to ensure people’s voices can be heard and respected.

Personal spaces are well used to support wellbeing and identity. Bedrooms are personalised, and one-page profiles are displayed to help staff understand people’s backgrounds, preferences and communication style. There are various communal lounges, dining areas, and meeting areas which are suitable and appropriate for people who live in the home. Signage and displays are included throughout the home helping people orientate, reflect on past events, and understand what is going on that day. There are also private spaces for people who require them as part of their support.

People are supported to exercise choice in everyday matters. Feedback from people using the service and their family is positive regarding food, with daily menu choices and good meal quality reported. Staff interactions were observed to be warm, respectful and engaging, with staff and managers described as approachable. Positive relationships are evident between people, staff and visitors, reflecting a homely and welcoming environment with family members stating they “are always welcome when we visit” and “the home has a lovely family feel.”

Care & Support — Good

People receive care and support that is safe, effective and responsive to their individual needs. Care planning is person centred and mostly reflects people's preferences, communication needs and desired outcomes. Feedback from people using the service and their relatives was overwhelmingly positive, with most respondents rating care and support as excellent.

Care plans and risk assessments are generally comprehensive and tailored to individuals. Both bespoke and generic risk assessments are in place, and staff respond appropriately to changes in need with updated risk assessments and escalation to managers or health professionals. Staff clearly understand people's communication through care plans, including how to engage with people, what their triggers for distress are, and how they should respond.

Inspectors observed some occasions where information within care plans was contradictory or missing, although this did not impact on the care being delivered. Similarly, the homes approach to mental capacity assessments and best interests decisions is not consistent with the requirements of the Mental Capacity Act 2005 which could mean people are at risk of having their rights to make decisions being infringed. Inspectors did not observe this negatively impacting anyone during inspection and the home are undertaking further training to improve this area.

Staff support health and wellbeing needs effectively. Repositioning, food and fluid charts are in place where required, and kitchen staff demonstrate strong knowledge of dietary needs, including specialist diets and individual requirements. Staff complete mouth care assessments monthly, and communication needs are clearly documented, including preferred topics, responses to distress and key family contacts. Management assess the level of support required by each individual through a dependency tool which informs staffing levels. Inspectors' observations and family feedback support that staffing levels are appropriate for the people in the home.

Observed practice showed staff to be respectful and supportive, promoting independence and encouraging participation in daily life and activities. Daily records, while task based, accurately reflected the support provided. Relatives described staff as "friendly, patient, and caring," and feedback consistently reflects that families feel their loved ones are well cared for in the home.

Overall, people receive good care and support that meets their needs and promotes positive outcomes. Care is delivered with kindness and respect, supported by generally strong care planning and staffing. Addressing documentation inconsistencies and strengthening mental capacity processes will further ensure people's rights and choices are fully upheld.

Environment

Good

The environment at Aston Hall supports people's safety, comfort, dignity and wellbeing. The premises are appropriate for the needs of the people living there and provide a balance of communal and private spaces, enabling people to socialise or spend time alone according to their wishes.

The home is generally clean, well maintained and presented in a way that promotes a homely atmosphere. Relatives provided positive feedback about the cleanliness of the home and the overall environment, and inspectors observed that communal areas, bedrooms and bathrooms were tidy and well cared for. The listed nature of the building is thoughtfully managed, with maintenance records demonstrating ongoing investment to preserve the building while ensuring it remains suitable and safe for people living there. Some minor improvements are required to further strengthen safety arrangements, including ensuring oil heaters are fitted with appropriate guards to reduce the risk of accidental burns. Based on the provider's established approach to maintenance and responsiveness to identified risks, we have confidence in their ability to address these matters.

Managers have effective oversight of health and safety arrangements. Fire safety systems are in place, including maintained alarms, extinguishers and comprehensive fire documentation. Wider health and safety compliance is well managed, with gas, electrical, legionella and lifting equipment checks completed in line with requirements. Areas of potential risk are appropriately controlled, including restricted access to unsafe areas, locked COSHH cupboards and the use of personal emergency evacuation plans (PEEPs) where required.

The layout of the home supports people's wellbeing and independence. There are a range of communal lounges, dining areas and quieter spaces that enable people to choose where they spend their time. The kitchen is appropriately sized and well organised, with sufficient resources to meet the needs of the people living at the home.

Infection prevention and control arrangements are in place and supported through routine weekly and monthly audits. These systems support the early identification of issues and help maintain a clean and safe environment for people, staff, and visitors.

Overall, the environment at Aston Hall is safe, welcoming and well managed. Relatives provided feedback to inspectors that "the owners do their best to provide a comfortable and homely environment," and people living in the home provided positive feedback that they benefit from an environment that supports comfort, dignity and wellbeing.

Leadership & Management — Good

Leadership and management at Aston Hall are effective and promote positive outcomes for people living at the service. There is a clear management presence within the home, with the responsible individual and director visible and accessible daily. Inspectors observed regular engagement between leaders, people using the service and staff, which people commented on positively.

Management undertake recruitment in a robust and well managed way. Staff files reviewed contained the required recruitment documentation, including application forms, employment histories, references, contracts, job descriptions, photographic identification, proof of address and DBS checks. Immigration documentation is obtained at the point of employment, and right to work checks are monitored through shared online codes. DBS and Social Care Wales registration are monitored through matrices. Training systems are in place to support staff competence. A training matrix shows that most staff have completed mandatory training relevant to their role, alongside specialist training such as dysphagia and stoma care to meet people's specific needs.

The Responsible Individual completes Regulation 73 in line with requirements, and these demonstrate structured oversight. Records show engagement with people using the service and staff, review of care quality, safety, food, activities, and inspection of the premises and records. They complete a comprehensive quality of care review drawing on feedback from people, relatives, staff, professionals and regulators.
Systems are in place to manage complaints, safeguarding and incidents. Complaints records clearly detail concerns, actions taken, outcomes and learning. Safeguarding and incident logs demonstrate systems to identify and respond to risk. Further work is required to demonstrate more detailed recording of outcomes and learning. We are confident this will be addressed.

Staff consistently responded in feedback that they feel well supported, have opportunities for learning and development, and deliver a good service. Staff members described how "management are always boosting our confidence," are "always there if we need anything and are very supporting in every part of my job," and "the management team is good to me. They help me when I need help……I really appreciate them."

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.