Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Colwyn Bay Old Convent Nursing Home, Ltd

Colwyn Bay Old Convent Nursing Home Ltd, 15 Lansdowne Road, Colwyn Bay, LL29 7YD

01492532788

http://www.oldconventnursinghome.com/

The inspection visit took place on 16/06/2026

Service Information:

Operated by:	Colwyn Bay Old Convent Nursing Home Ltd
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care
Registered places:	34
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:

Colwyn Bay Old Convent Nursing home is located in a quiet residential area near to the centre of Colwyn Bay.

People living in the service receive good care and support from care staff who know them well. Care staff treat people with dignity and respect. People and their relatives speak positively about care staff and we saw warm and respectful interactions during the inspection. Care records reflect people's needs and preferences. Care staff seek advice from health professionals when people's needs change.

The home is clean, comfortable and pleasantly decorated. There is appropriate equipment, communal and private spaces to meet people's needs. We saw people personalise their rooms with photographs, ornaments and items important to them. The responsible individual (RI) and manager have effective systems to monitor the quality and safety of the service. They seek feedback from people, relatives and care staff and act on this to make improvements.

Findings:

Well-being — Good

People are well supported to make choices about their daily lives and follow routines that are important to them. We saw people choosing where to spend their time, where to eat and whether to take part in activities. Records show people can eat in communal areas or in their bedrooms, and we saw people being supported to eat their lunch where they wished. Care records and daily notes show care staff understand people's preferences and support them in line with these. People describe the home as welcoming and told us they enjoy living there.

Care staff support people to maintain social connections and take part in activities. Visitors are welcomed to the service, and we saw care staff were kind and approachable and had good professional relationships with relatives as well as residents. Activity records show people enjoy bingo, crafts, visits from entertainers and one-to-one activities. Records show care staff adapt activities for people who prefer quieter engagement or who choose to stay in their bedrooms. We also saw records of birthday celebrations, themed events and opportunities for people to spend time with others.

The service supports people to communicate in their preferred language where needed. Welsh-speaking care staff work in the home and bilingual signage and information support people to use the Welsh language. Welsh culture is also promoted through recognising Welsh festivals, sport, and history through activities and themed events in the home, such as St David's day.

People and relatives told us they feel comfortable raising concerns with care staff and the manager. The provider seeks out and values feedback from people and their relatives about the home. Records of resident meetings, relative feedback records and quality assurance processes show managers seek people's views and respond to comments and issues raised appropriately. The meetings discuss the accommodation and environment of the home, activities provision, meals and day-to-day living arrangements with people. The manager ensures that any issues raised at these meetings are revisited at subsequent meetings to ensure people are happy with the outcomes of any actions taken.

Care & Support — Good

Care staff provide person-centred care and support that reflects people's needs and preferences. Personal plans include information about people's life histories, communication needs, health conditions, routines, preferences and health and wellbeing related risks. Records show care staff deliver care as planned, and review personal plans regularly and update them when people's needs change. Care staff use individualised risk assessments and monitoring tools to support safe care. Risk assessments we viewed are appropriately detailed, linked to relevant personal plans and provided clear guidance for care staff about how to keep people safe.

We saw positive and respectful interactions between care staff and people during the inspection. Care staff spoke with people in a calm and friendly way. They supported people discreetly with personal care and encouraged independence where possible. We saw care staff support people to eat and drink respectfully and attentively, communicating well and working at each person's pace. People and relatives describe care staff as kind, caring and approachable. Feedback shows people have positive relationships with care staff and feel comfortable asking for support.

Records show care staff monitor people's health needs and seek advice from health professionals when needed. Records show care staff monitor people's nutritional needs, and make referrals about falls prevention, pressure area care and changes in physical health. Records show care staff respond to changing needs and take action to reduce risks. The manager ensures all staff follow appropriate policies and procedures to keep people safe from harm and abuse. Staff receive training in safeguarding people and understand their responsibilities in keeping people safe.

People are supported through good medication management processes in the home. Medication administration records show medication is administered appropriately and in line with people's prescriptions and care plans, by trained and competent staff. The manager ensures regular medication audits are completed, with any emerging issues addressed promptly and appropriately. Records show any covert medication plans are reviewed regularly, and relevant professionals and representatives are involved in decision making with people.

The service has good hygiene practices. Care staff receive regular infection prevention and control training, and domestic care staff work in the home each day. Cleaning schedules support routine, deep and high-level cleaning across the premises. People and care staff speak positively about the cleanliness of the home. We saw good supplies of cleaning equipment and personal protective equipment, which care staff used and stored appropriately during our visit. The service has a Food Hygiene Rating of 5, which is the highest rating available.

Environment

Good

People live in a clean, comfortable and welcoming environment. The home has a range of communal areas where people can spend time with others if they wish. Communal lounges have comfortable seating and space for wheelchairs and specialist seating. The dining room supports family-style dining for people who prefer this. The provider has installed large bi-foldable doors to the courtyard and plans to improve the outside area so people can dine outdoors in warmer weather. Call bells and equipment are accessible to people who need them.

People have access to safe and attractive outdoor spaces. The home is surrounded by well-maintained gardens with boarders, shrubs and flowerbeds. They employ staff to maintain the garden and records show people have a say in how it looks. There are accessible pathways for people who use wheelchairs, and we saw garden seating people can use also. There is a small sunroom or conservatory with doors that open onto a lawned area if people wish to sit in a more sheltered space and still engage with the outdoor environment. The manager showed us photos of people also enjoying walks along the local promenade and an ice cream with care staff.

People can be assured the provider ensures the premises comply with relevant legislation and national guidance on health and safety, fire safety and environment. The RI monitors the safety and upkeep of the premises through audits and regular walk rounds to inspect the home. The manager monitors the environment of the home daily during their walk rounds. Records show regular fire alarm tests, water safety checks, window restrictor checks, electrical and gas safety testing, and servicing of moving and handling equipment take place. Maintenance audits and records show continued investment in the environment, including replacement flooring and equipment when needed. Some bedrooms have been redecorated recently, and new flooring has been installed on the ground floor since the last inspection. The provider plans to redecorate bedrooms and replace flooring across the service. Care staff use maintenance logs to report concerns. The manager and maintenance staff review these logs regularly to ensure all actions are completed. Larger or more complex jobs are prioritised appropriately to ensure contractors are contacted promptly when specialist work is needed.

Leadership & Management — Good

People receive good care and support because the provider ensures good systems are in place to monitor the quality and safety of the service. Audit records show the manager regularly reviews records and practice around medication, falls and accidents, care delivery and infection prevention and control arrangements. They also gather feedback through resident meetings, relative meetings, surveys and day-to-day discussions with staff and people in the home. The manager considers issues raised and respond to concerns and suggestions, addressing them promptly. Governance records show the manager discusses feedback about activities, the environment and people's experiences of care with staff and the RI as part of ongoing quality improvements.

Care staff told us the manager supports them and they had good understanding of safeguarding procedures. Supervision records and staff meeting minutes show the manager provides opportunities for staff to discuss their practice, their training and people's needs in the meetings as well as considering their own wellbeing. Care staff describe a positive working culture and say they have confidence in management arrangements and the quality of care in the service.

People are supported by staff recruited through safe recruitment and vetting processes. Recruitment records show the provider obtains appropriate references and disclosure and barring service checks before staff start work. The manager oversees staff training to make sure care staff have the skills and knowledge to meet people's needs. They also monitor professional registration requirements for registered nurses and other care staff where needed.

Quality assurance processes help the provider identify areas for improvement. Leaders monitor the service, identify issues and take action to address them. The provider gathers information through feedback from people, relatives and care staff, and through regular RI visits. The RI records their findings in regular reports and produces twice-yearly quality of care review reports. These reports describe activity in the service, summarise feedback and identify required improvements. The reports could more clearly show how monitoring, learning and feedback lead to continuous improvement and service development. However, they currently meet regulatory requirements and show leadership and management arrangements support day-to-day care and positive outcomes for people.

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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