Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Maes Y Vaynor

Mold

01352758899

www.coeddu.com

The inspection visit took place on 26/08/2026

Service Information:

Operated by:	Coed Du Hall Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability
Registered places:	4
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	Excellent
Environment	Good
Leadership & Management	Good

Summary:

Maes Y Vaynor is a small residential home for four adults. The service focuses on supporting people to become as independent as possible by building on their strengths and developing new skills.
Wellbeing is good because people live their lives how they wish with choice and control. People achieve their outcomes becoming more confident and independent.
Care and support is excellent because people are extensively supported to live well and achieve self-directed outcomes. People are proud of their achievements and praise staff highly for their excellent support.
The environment is good as it is spacious and provides people with the room to live how they wish and the privacy they need. Communal areas need decorating and carpets need replacing, but this is something the service has already taken steps to address.
Leadership and management is good. The manager and RI (responsible individual for the service) know the service well because they work closely with staff and residents, routinely carry out audits of records and procedures, and check the quality of care. They know what is working well and where improvements need to be made.

Findings:

Well-being — Good

People live healthily and safely with control over their lives, supported by positive risk management. Personal plans are very person centred and detailed and include people's likes, dislikes and choices on a range of daily living activities, hobbies and interests. Additionally, they provide clear information about how everyone prefers to be supported to achieve their outcomes. Each person is involved in their care planning and has signed to agree with the decisions and plans. They engage in meaningful activities that are designed around their own interests such as day trips, football, holidays, shopping, cooking and other activities that promote their independence. Privacy and dignity is respected; each person can lock their bedroom door; there are several bathrooms and toilets; staff have all undertaken training in dignity and diversity.

Desired outcomes are recorded in monthly meetings with people's keyworkers and together they plan actions to achieve these. These self-directed, ambitious, outcomes are consistently met because the team are outcomes focused and have built strong relationships with people they support. One person who would not take any public transport, now regularly takes a bus to see family, has been on a train and taken a plane to go on a holiday. A person is working towards self-management of their medication; a person with challenging behaviours has now settled and there are no longer any incidents; another person has established a healthier sleep routine which has enhanced the quality of their days.

People are safe and protected from abuse and neglect because they know how to raise concerns. People confirmed their trust of staff and the manager; they feel they can discuss anything they want with them. People feel they are supported in a way that keeps them safe; positive risk taking is encouraged, and they take responsibility for cleaning and cooking in their home.

People are supported to cultivate safe and healthy relationships. They join with others in the community for activities; one person is in the local football team. They use local facilities and shop locally as well as taking buses further afield. People are supported to keep in touch with and visit their family and have access to mobile devices to contact people.

People are supported in a spacious, homely environment that allows them to be as independent as possible. They are involved in the cleaning of the home, each having their own responsibilities. Communal areas need redecoration. People recently highlighted this in a meeting. They were subsequently involved in selecting colours for the work which is due to start in September.

Care & Support — Excellent

People receive excellent quality of care and support and achieve their personal outcomes. We saw highly person-centred plans that focus on people's strengths. Records show people access health services including the service's in-house psychologist. Plans are reviewed to check they are still relevant and keyworkers separately review progress with personal outcomes and explore new goals. Potential risks are assessed and actions put in place to keep people safe while they work towards what are sometimes challenging outcomes. The service enjoys exceptional success in supporting people to achieve their outcomes, some people having become sufficiently independent to move on. One person proudly shared their progress towards independence saying, when they doubted themselves, the manager would remind them how far they had come and *'remind me I can do this!'* Residents meet every month and minutes show their views are sought regarding activities, meal arrangements, trips out and the environment. Recently people shared they feel the communal spaces need redecorating; they were asked about colour preferences, and this has now been arranged

People are protected from harm and abuse as staff have all received relevant training and follow established procedures on whistleblowing and safeguarding. People shared they are happy to talk to staff about any concerns. They said of the manager '*she is fantastic; I trust her. She really helped me to get where I am'*. Competency checks are carried out to ensure training is embedded.

People's medication is safely managed, aided by the new electronic system for logging administration. This is a live database which can immediately identify if there are missed medication or errors. We saw records of medication kept in the home including drug counts reflecting medication taken and remaining balances. A monthly medication audit is undertaken to ensure accuracy of records and other aspects of medication management. Staff are trained to administer medication and their competency is checked. There are measured, risk assessed arrangements to support people towards self-medication using a step-by-step approach. One person told us *'I trust them; they are helping me to do my own meds and I know they will tell me when I am ready for the next step'*.

People's risk of infection is minimised by the service provider promoting good hygiene practices, ensuring sufficient supplies are available to meet people's needs. Records show there are routine infection control audits and all staff are trained. The service has its own inhouse 'champion' on infection prevention and control, and this helps ensure staff and people living in the home continue to follow correct procedures.

Environment — Good

People live in an environment with appropriate facilities and equipment to help them achieve their well-being outcomes. The kitchen is spacious enough for people to prepare their own meals with support from staff if required, and there are three other communal rooms in which people can socialise, dine, or watch television.

All bedrooms are personalised and have been recently decorated according to the resident's preferences. Communal spaces need decorating and carpets need replacing in the hall and stairs. At the time of the inspection, plans were already underway to address these matters with a decorator booked to complete works in September. Residents have been involved in choosing colours for each room and were excited to tell me about the plans. There are lampshades missing in some rooms and some fixtures in the kitchen are in need of repair or renewal. The responsible individual expressed their commitment to addressing all the issues raised immediately.

All safety checks have been completed; there is an up-to-date electrical installation safety certificate; water hygiene, gas and fire safety inspections have all been completed. Records show fire safety checks are completed weekly and monthly, dependent on the feature being checked. A health and safety audit was completed in 2025 with areas identified now addressed. People have the equipment they need to remain as independent as possible. Outside, the garden and courtyards provide a space for exercise and a shelter for those who smoke.

Leadership & Management — Good

People are supported to achieve their outcomes because the service provider has effective organisational arrangements, governance and oversight to ensure the service runs smoothly and provides effective, quality care. The RI visits the home at least every three months to carry out checks and audits and speak with people using the service and staff. This provides a regular oversight of how people feel using the service and provides assurances it is being run as expected. After each visit, the RI completes a report of their findings and outlines any improvements. The manager also conducts regular audits to ensure safe practices. Twice a year the RI must report to the provider on their findings. Each report includes an evaluation of the service and outlines what the service is doing well and where it could improve. Staff and people using the service are encouraged to give feedback and we saw these are very positive. They praise the quality of care and support and illustrate people are achieving their outcomes. Any incidents are carefully logged so lessons can be learned and practice changed if necessary.

People are supported by staff with the necessary expertise, skills, and qualifications to meet people's care and support needs. We saw rotas, observed interactions and spoke with people using the service. All confirmed appropriate members of staff, including on days people had appointments and wanted to follow interests outside the service. The provider ensures adequate staffing to accompany people on holidays and day trips.

Records show staff are thoroughly vetted prior to employment including criminal records checks and references. Staff are inducted including completion of mandatory training and a probation period. People told us how happy they are with the staff who support them, although they all have their own individual staff with whom they feel more compatible. Keyworkers are matched with them accordingly, to share interests, and to foster trust and open dialogue. Staff told us they feel well supported and encouraged to develop within the service. They have an excellent relationship with the manager and RI and feel trusted to carry out their role and use their initiative.

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.

Welsh Government © Crown copyright 2026.
You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk
You must reproduce our material accurately and not use it in a misleading context.