



Coed Craig



Coed Craig Methodist Home, 35 Tan Y Bryn Road, Rhos On Sea, Colwyn Bay, LL28 4AD



01492544075



<https://mha.org.uk/care-support/care-homes/coed-craig>

Date(s) of inspection visit(s): 17/07/2025

Service Information:

Operated by:	Methodist Homes
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	45
Main language(s):	English
Promotion of Welsh language and culture:	The service 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:

Coed Craig is a residential care home in the seaside town of Rhos-on Sea. There is a range of shops and services nearby, as well as access to sandy beaches. The service can accommodate up to 45 people aged 65 and over requiring care and support.

Peoples' wellbeing is good as they have control over day-to-day decisions and have access to a range of activities they can enjoy. Care staff treat people with dignity and respect and encourage people to be as independent as possible. The environment is good as the service has been designed with the needs of people with dementia in mind and people live in safe and secure accommodation which meets their needs.

The leadership and management is good as the manager and deputy manager provide oversight of the service, ensuring good quality care and support is being delivered. The responsible individual (RI) visits the service regularly, speaking to people and staff for their views, which is considered as

part of the quality review of the service. At the last inspection, the service had a priority action notice for care and support. The manager, area manager and RI have been committed to making the required improvements and this priority action notice has now been met.

Findings:



Well-being

Good

People's right to make their own choices and take informed personal risks is promoted by the positive culture in the service. The service provider supports and encourages people to maintain their mobility and independence for as long as possible. People are encouraged to contribute to the home with occupational activities. We saw people sweeping and tidying during our inspection. One person told us care staff assist them to use technology, as they wanted to gain more confidence to use this independently. Residents' meetings take place regularly and some improvements have been made to activities based upon people's suggestions. There is a "You said, we did" board in the foyer, explaining the actions taken as a result of a resident and relative's survey. This includes introducing a weekly gardening club and walking group. People who are able, plan co-produce and take the lead in diverse activities of their choice. Some people take a lead with craft activities they wish to share, others enjoy providing some entertainment. They also have access to a music therapist, who visits the service every week.

People live in accommodation which meets their needs. People who are mobile can move freely around the home with the use of grab rails, and other specialist aids. The service has been designed specifically to meet the needs of people with dementia. All bedrooms are ensuite. The home is decorated in a homely manner and on the day of our inspection there was a calm and relaxed atmosphere.

People are supported to develop and sustain positive relationships with their community and the people they live with. There is a chaplain based at the service three days a week. They run a weekly fellowship meeting and monthly Sunday service is open to people of all faiths to attend. Visitors are welcome at any time, and there are spaces for people to meet with them in private. The service provider is working towards the Welsh active offer. There is a weekly Welsh café which people and staff can attend and converse in Welsh. Some staff speak Welsh and can support people in the Welsh language if they choose. People we spoke with gave us positive feedback, telling us they were happy at the service. One relative described the service as "*lovely*."



Care & Support

Good

People are referred for appropriate care and treatment at the right time and recommendations for care and treatment by professionals are carried out as directed. Healthcare professionals we spoke with told us they receive referrals appropriately and their advice is followed. During our last inspection we issued a priority action notice in regard to care and support, due to concerns in relation to falls management. We found this priority action notice has now been met. The manager has put in place a checklist to be followed after a fall which ensures all follow up actions are completed, including the review of personal plans.

Many people experience care and support which is dignified and respectful. Support staff are available to provide people with the support they need, which has also improved since our last inspection. We found care staff were relaxed, and they told us they felt confident they were able to meet people's needs. The manager is consulting with care staff on further improvements regarding the mealtime experience, which ensures everyone consistently has a pleasant and dignified experience. These improvements are having a positive impact.

People's personal plans are strengths based and outline how staff should support them to achieve their wellbeing outcomes. They contain person centred detail about people's preferences and their background. They detail what people can do for themselves and where they may need additional support. Care staff follow these to ensure people receive care and support in line with their wishes and their independence is promoted as far as possible.

People are safeguarded from abuse and neglect. The deputy manager provides a 'hands on' role and is visible within the home most days. There is also senior staff who oversee care within their area of the home. Daily meetings held with the senior staff team ensure everyone is kept up to date. There are regular relatives' meetings, providing an opportunity for any issues or concerns to be discussed.



Environment

Good

People benefit from a warm, comfortable, and well-lit environment. The service provider ensures people have suitable furnishings and equipment to meet their needs and preferences. Sofas in some lounges have recently been replaced, and curtains were being replaced on the day of our inspection. People have a range of homely communal spaces to sit and socialise or spend some quiet time. They have access to a pleasant outdoor area, and we saw people enjoying the sunshine on the terrace. People have comfortable rooms which they can personalise to suit their individual tastes. Some people have brought items of furniture from home. The service is clean and tidy throughout.

The service provider ensures the premises comply with current legislation and national guidance in relation to health and safety, fire safety, environmental health. External gas and electrical safety checks are completed regularly, and we saw certification of these. Fire safety and specialist equipment is regularly serviced and maintained in good condition. The manager or deputy manager complete a walkaround several times a week, which includes checking the health and safety of the building. People have up to date personal emergency evacuation plans in place, ensuring care staff know what support is required in the event of an emergency evacuation. The service has a food hygiene rating of five, which is the highest that can be achieved.



Leadership & Management

Good

The service provider has robust selection and vetting processes for hiring staff to ensure all staff are qualified and trustworthy. This includes checks which are completed on agency staff. Care staff undergo recruitment checks including disclosure and barring service and reference checks. New staff complete an induction, receive regular ongoing training, and competency checks to ensure they have the knowledge and skills to provide good quality care. The service provider has experienced a period of high staff turnover and use agency staff to fill gaps in the rota. Since the last inspection the numbers of agency staff on the rota have significantly reduced, and there is an ongoing recruitment drive. This means the care staff team is more stable and this is having a positive impact on the care and support people receive. Care staff gave us positive feedback on the service, they report they have noticed an improvement and feel there are enough care staff to meet people's needs.

The service provider has good quality monitoring systems in place, including audits of care and support provided. The manager and deputy manager complete regular audits of medication, and infection control to ensure good practice is being followed. The manager's walkaround is completed several times a week and considers how people's wellbeing outcomes are being met. The manager undertakes monthly analysis of falls to ensure any patterns or trends are identified so any action can be taken. To further improve on falls management the provider has enrolled on a new falls process implemented by the external healthcare provider. The RI visits the service regularly and provides a three-monthly report of their visits. We saw these are now reflecting on the staffing issues at the service and consider how to improve the consistency of staffing, such as repeat booking agency staff who are familiar with the home and the people living there. An area for improvement was issued at the last inspection regarding the lack of oversight of the service, particularly in relation to staffing levels. We have not fully tested this area for improvement at this inspection. The oversight of the service has improved and there are more permanent staff on the team, which is beginning to have a positive impact on people's wellbeing.

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
We found people's outcomes are not always met as there are not sufficient trained, skilled and competent staff to meet people's needs.	06/02/25

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

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