Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Llannerch Grange

17 Llannerch Road East, Rhos On Sea, Colwyn Bay, LL28 4DF

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www.coeddu.com

The inspection visits for this service took place between 25/08/2026 and 26/08/2026

Service Information:

Operated by:	Coed Du Hall Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Provision for learning disability, Provision for mental health
Registered places:	5
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	Excellent
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Llannerch Grange is in a quiet residential area, within walking distance of the beach and local shops and amenities.

People experience excellent well-being because they receive highly personalised support that promotes choice, independence and positive relationships. They shape their routines, pursue interests at home and in the community, and take positive risks such as volunteering, work, sport, cooking, gardening and planning a holiday. People feel safe, know how to raise concerns and live in a homely environment which reflects their identities and gives them ownership.

Care and support is good because staff understand people well, work with professionals and respond to changing needs. Personal plans and risk assessments are detailed, reviewed regularly and linked to people's goals. Medicines, infection prevention and environmental safety are managed effectively.

People live in a good environment because the home is comfortable, welcoming, well maintained and personalised. People contribute to its appearance and use the indoor and outdoor spaces in

ways which reflect their interests.

Leadership and management is good because leaders maintain oversight through audits, Responsible Individual (RI) visits, management meetings and reporting. Staff are safely recruited, trained and supported, and the service has a stable workforce and positive culture.

Findings:

Well-being — Excellent

People have excellent control over their lives because support is highly personalised, aspirational and focused on what matters to them. They make meaningful choices about their day, are actively involved in decisions about safety and are empowered to pursue activities and goals that enhance their independence, confidence and well-being. Personal plans, activity planners and risk assessments strongly reflect people's interests, strengths and aspirations. Staff promote a positive culture of independence and well-managed risk-taking, using interest profiles and monthly key-worker meetings to turn people's ideas into achievable outcomes. This highly effective approach has led to significant outcomes, including increased independence, progress in sport and a return to employment through shared planning and proportionate risk assessment. People are extensively supported to live active and fulfilling lives. They play a meaningful role in shaping opportunities and contribute to daily life through cooking, gardening and practical projects. People work, shop, swim, attend martial arts classes, use local leisure facilities and enjoy theatre and cinema trips. These varied and enriching experiences support people to learn, develop and maintain a strong sense of purpose. People are also empowered to make informed health choices, including reducing medication gradually with staff and professional support where this reflects their wishes.

People feel safe, listened to and confident their views are acted upon. They know how to raise concerns, and staff and the manager respond promptly when issues are shared. Staff understand safeguarding procedures and how to escalate concerns. Accessible information about complaints and deprivation of liberty safeguards helps people understand their rights. Individual and group meetings provide regular, meaningful opportunities for people to share views in ways that suit their communication needs.

People are exceptionally well supported to develop and maintain positive relationships. They see family and friends, celebrate important events and join activities with people from other services run by the provider. Shared cooking, gaming and gardening promote companionship, equality and community within the home. We observed warm, respectful and humorous interactions between people and staff. Staff actively recognise people's achievements, build confidence and purpose, and promote identity and culture. People can speak Welsh with fluent staff, and key-worker meetings are held in Welsh for those who prefer this.

The environment significantly enhances people's well-being. People's rooms are highly personalised and decorated to their preferences. Communal areas and gardens include objects, pictures and ornaments that are important to people, and people influence how the home looks and feels. This creates a homely, personalised environment that reflects people's identities and gives them a strong sense of ownership.

Care & Support — Good

People receive good quality care and support which reflects their needs, preferences and personal goals. Assessments and plans include detailed social, family, physical and mental health information. Staff review plans through monthly key-worker meetings and regular formal reviews. People contribute their views and we saw some people sign records to confirm they agree with plans. The provider is working on ways to ensure records more clearly reflect how people co-produce plans and how specialist input, training and learning improve each person's experience and sustained outcomes over time. Plans include employment, travel, sport, cooking, family contact and greater community independence, rather than focusing only on safety. Staff know people well and communicate changes through handovers, meetings and supervision.

Individualised risk assessments give staff clear guidance on how to support people. Behaviour support records describe triggers, preventative approaches, responses and recovery strategies. Staff adapt information to people's communication needs. Examples include a communication passport written in people's own voice and risk plans using symbols and pictures. Professional input includes GPs, social workers, psychologists, community mental health professionals and deprivation of liberty representatives. During periods of mental ill-health, the provider ensures specialist assessment, medication advice and consistent personalised support helps people become settled and resume ordinary activities.

People are protected from harm and abuse. Staff receive training in how to safeguard people from harm and can describe safeguarding, recording and escalation procedures confidently. Plans address risks linked to exploitation, relationships, mental health, leaving the service and potential harm to people and others. Records show appropriate liaison with safeguarding services and other professionals. The provider also reviews incidents and shares organisational learning.

Medicines are managed safely. The records we sampled had no gaps. Staff use clear protocols for medicines taken when required, complete regular stock checks and undertake regular audits. Staff receive yearly training and competency assessments. The provider is introducing electronic medicine records in stages to ensure staff remain competent and implementation is successful.

The home is clean and infection risks are managed effectively. Staff complete cleaning schedules, hand-hygiene checks and monthly audits. Food hygiene practices are good and personal protective equipment is available and used appropriately. People help with cooking, laundry and cleaning.

Environment — Good

People live in a good quality environment which supports privacy, independence and well-being. People told us they feel comfortable and safe, can move around freely and have no concerns about the home. Each person has a single en-suite bedroom personalised with photographs, books, posters, ornaments and other belongings. Two lounges, a dining room and accessible outdoor areas give people choices about where to spend time together or use quieter areas. Shared areas are pleasantly decorated, and people influence future changes. The property feels homely and comfortable. The garden provides space for planting, social events, relaxation and smoking, with suitable paving, seating and controlled access.

People have a strong sense of ownership and influence how the environment develops. They have made planters and seating for the front garden, where they grow vegetables and herbs, and display ornaments that are meaningful to them. Following feedback, the manager has commissioned individual portraits reflecting people's personalities and choices. Photographs in shared areas celebrate people's interests, activities and achievements. People also use the environment to build practical skills and enjoy meaningful activities. They plan meals, shop for ingredients, cook, help clean shared areas, maintain bedrooms and complete laundry with support when needed.

The provider manages environmental and health and safety risks effectively. The manager completes regular checks, the RI reviews arrangements during routine visits, and electronic audit systems allow senior leaders to monitor the home remotely. Fire alarms, extinguishers, emergency lighting and escape routes are checked and serviced regularly. Personal emergency evacuation plans are available and reviewed. Current servicing records were available for gas appliances, central heating, electrical installations and portable appliances. Routine checks include window restrictors, water temperatures and general maintenance. The provider maintains the building, has maintenance systems and daily checks in place, and keeps the home decorated to a good standard in line with people's wishes.

Security arrangements balance safety with people's rights. The front door is unlocked during the day, and staffing levels allow people to come and go with support in line with individual plans. The door is secured at night to keep people safe. Relevant legal safeguards, risk assessments and contingency plans are in place, including for emergencies, loss of utilities and threats to the property.

Leadership & Management — Good

Leadership and management are good. The service has a positive, person-centred culture where people's choices and outcomes are central to practice. People know the manager and find leaders approachable. Staff describe the manager and RI as visible, supportive and responsive, and say their views and experience are valued. They describe strong teamwork across day and night staff, feel able to raise concerns and receive support after difficult incidents. This helps people receive consistent, respectful care.

Governance systems provide effective oversight of key areas of service delivery. Monthly management reports cover safeguarding, incidents, medicines, legal restrictions, staffing, training, complaints, audits, notifications, premises and health and safety. The RI visits regularly, meets people and staff, reviews care records, safeguarding issues, incidents, complaints, training and fire safety, and checks the environment. Routine audits cover infection prevention, staffing, care records, activities and health and safety, with actions recorded where needed. Electronic systems allow senior leaders to monitor the service between visits, and quality of care reviews provide further assurance twice a year.

Leaders have systems in place to gather feedback and inform service improvements. People share views through resident meetings, key-worker sessions, questionnaires and direct contact with the manager and RI. Staff meetings consider people's goals, current needs and ideas for development. The provider also compares practice with findings from external and regulatory inspections of its other services and involves staff in improvement ideas. Recent developments include making people's achievements more visible and commissioning personalised portraits.

Leaders respond appropriately to risk and changing needs. When the manager is absent, senior staff lead the home, with additional support from regional managers and the RI. Incidents are reviewed through governance meetings and lessons are shared across the provider's services, although evidence of how wider learning changes outcomes for people at this service could be clearer. The RI is working on improving how feedback and learning is incorporated into action planning on improvements as part of their quality of care reviews.

Staffing arrangements meet people's needs. Rotas show no gaps, the workforce is very stable, and the service rarely uses agency staff. Recruitment records show required identity, reference, disclosure barring service and registration checks, alongside induction, probation and mentoring for new staff. Staff receive regular supervision and annual appraisals. Staff training reflects people's needs and includes safeguarding, medicines, positive behaviour support, de-escalation, mental health, dysphagia, first aid and record-keeping. Practical training helps staff apply least restrictive approaches. Reminders are sent when refresher training is due, and staff told us they feel confident, skilled and well supported by colleagues, the manager and the RI.

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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