Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Eryl Fryn

Eryl Fryn, Bodafon Road, Llandudno, LL30 3BA

01492549920

The inspection visit took place on 13/01/2026

Service Information:

Operated by:	Fairways Care 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:	30
Main language(s):	English
Promotion of Welsh language and culture:	The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:

Well-being	Excellent
Care & Support	Good
Environment	Good
Leadership & Management	Excellent

Summary:

Eryl Fryn provides residential accommodation and nursing care for adults. The service overlooks the seaside town of Llandudno and is close to local amenities and attractions.

People experience excellent wellbeing outcomes because they are supported by a dedicated team of staff who work hard to offer fulfilling and meaningful activities. People are valued, consulted, and treated with dignity and respect.

Care and support at Eryl Fryn is good. People participate in the creation of their care records which are detailed and person centred. People are supported to access health services to promote their wellbeing.

The environment at the service is good. People are safe and can mobilise with independence where it is safe for them to do so. The provider continues to invest in the environment.

Leadership and management of the service is excellent. There is comprehensive oversight of quality and governance. The service is exceptionally well led by the manager who leads with experience and compassion, having a positive impact on the culture of the service.

Findings:

Well-being — Excellent

People experience excellent well-being outcomes at Eryl Fryn. Individuals have visible influence over day-to-day decisions and are supported to express their views through regular resident meetings and weekly “chit chat” sessions with the manager. These structured opportunities ensure people feel heard and included. Communication with residents and representatives is strong; the bilingual *Golden Gossip* newsletter provides clear and engaging updates about events and achievements within the service, helping people stay connected and informed. Residents’ individuality is celebrated, including the thoughtful display of their “words of wisdom,” reinforcing a sense of value and belonging.

Meaningful activity provision is outstanding. The service takes creative and inclusive approaches to ensure every person can engage in a way that suits their preferences and abilities. Flexible tools such as the activity trolley enable activities to take place anywhere in the home. We observed highly personalised interactions, including a tailored pampering session delivered in a resident’s room. Staff demonstrate a strong understanding of what matters to each person, using this information sensitively in both care documentation and room-based prompts. External entertainers and therapists visit regularly, and where people cannot access external opportunities, staff go to considerable lengths to bring the experience to them. Initiatives such as themed events showcase the team’s exceptional commitment to enhancing wellbeing. We saw examples such as a ‘beach day’ with sea, sand, and ice cream and most recently a fully produced pantomime, with costumes, scenery, and participation of the whole staff team. The dedication of the service is recognised by visitors to the service and feedback included, “X was so happy and was treated like part of the family,” another person said, “thank you for all the love, care and kindness.”

The “One Wish” initiative further reflects the service’s dedication to promoting emotional and psychological wellbeing. Staff take thoughtful, proactive steps to fulfil meaningful personal wishes, often at a significant time in people’s lives, creating positive and lasting experiences for people.

We observed many positive interactions between care staff and the people they support. Care staff are skilled in their approach, adapting to meet the needs of the person they are supporting which results in positive outcomes for people. The wider evidence of the success of support was seen within care records where people are engaging in personal care, gaining, or maintaining healthy weights and recovering from tissue damage. We saw many cards of thanks and comments included, “the care you gave was exceptional,” and “every single member of staff is a credit to the service.”

Care & Support — Good

People receive the care and support they need to maintain good physical and mental wellbeing. The manager and clinical lead conduct initial assessments with people to find out what is important to them and to establish if the service can meet their needs. Whilst the quality of these initial assessments is good, they were not available to view in some of the older files we looked at due to being archived. People are asked about their language preferences, and we heard the Welsh language being spoken in the service as well as seeing people have access to Welsh newspapers and books. There is a Welsh language notice board which highlights key words and phrases to support the development of staff and residents who want to learn Welsh. Information in personal plans is detailed and captures what is important to people, in their earlier years and now. Personal plans are created with people and/or their representatives and consider what people's goals are and how this will be achieved. Information about people is up to date and relevant and we could see it is updated when things change for people. The involvement of people or their representative in the review process could be better evidenced. Daily records of care which has been delivered are detailed and reflect the information within care records. This includes detailed information about any clinical and external professional involvement. The manager told us; training is about to be completed around record keeping tightening the process of documenting regular care interventions such as repositioning. Comprehensive hospital admission and discharge records, document in detail where people have had to go to hospital so the service can make sure records remain relevant and reflect what has happened.

People are as safe as they can be living at Eryl Fryn Nursing Home. Care staff complete safeguarding training and are supported by safeguarding policies which give guidance about the action to take if they have any concerns. The manager operates an open-door policy and encourages staff engagement by dedicating protected time for informal chats. This is in addition to formal supervision meetings where safeguarding is discussed as standard. Information about safeguarding is accessible in the service, and provides details of local safeguarding procedures. There is comprehensive oversight of any accidents, incidents, and safeguarding events at the service by the area manager and RI for the service. Records are reviewed to ensure appropriate action has been taken and to help identify any patterns and trends.

Medication is managed safely within the service. Registered nurses maintain an organised treatment room where best practice guidance is available for reference. Medication is stored and administered appropriately. Where people require specific administration techniques or specialist medications, we found the appropriate documentation in place to support this, giving detailed guidance and review regularly by health professionals.

Environment

Good

People live in accommodation, which is clean, safe, and accessible. People can choose to spend time in several communal areas which are spacious, well equipped, and homely. People's bedrooms are personalised with items important to them which reflect who they are. Where specialist equipment is needed to support independence and mobility, this is provided, serviced, and maintained as needed to ensure it is safe to be used. People have access to the equipment they need to support them to be as independent as possible and to support their overall physical wellbeing. Items of interest in communal areas support positive engagement and ensure the service has a homely feel, with soft toys, cushions, blankets, books and magazines.

The provider employs a maintenance person who is responsible for the upkeep of the service. We saw where maintenance requests are logged and could see good evidence of any issues being addressed in a timely way. Routine testing and servicing of areas such as gas and electrical safety is completed as required and certificates of compliance retained for inspection. Fire safety is managed well with regular internal checks which are further supported by external contractors. Fire evacuations are completed as required to ensure staff know how to evacuate people in the event of a fire. The environment is audited on a regular basis and is also looked at by the area manager and responsible individual (RI) when they visit the service. The RI told us there are plans in place to continue to the redecoration of the service whilst retaining the unique features that people admire about the service.

The service was awarded a level 5 rating at the most recent food safety inspection; this indicates a high level of cleanliness and food safety compliance.

Leadership & Management — Excellent

The service demonstrates excellent organisational oversight and governance, which leads to consistently positive outcomes for the people who live there. Comprehensive auditing arrangements ensure compliance is monitored across all areas of practice. The service engages with the local authority and health board in quality monitoring processes and value the feedback and support provided in supporting the development of the service. Robust management structures support effective communication and clear lines of accountability. Audits are completed at service level and overseen by the regional manager (RM) and responsible individual (RI) Regular visits by the RM and RI result in detailed reports which give a detailed analysis of outcomes, strengths, and areas for development. These processes mean the provider has a good understanding of what is working well and enables a proactive approach to service development.

The manager promotes an open, inclusive culture, demonstrated by formal and informal avenues for feedback, including protected weekly drop-in sessions. The commitment of the management team to improving quality of life for residents is evident through their oversight of initiatives such as meaningful activities, “One Wish,” and personalised engagement. The strong leadership ethos fosters a motivated, compassionate staff team who consistently go above and beyond to enrich residents’ experiences.

People are supported by care staff who have been safely recruited and are suitable to work with adults at risk. The manager has developed a comprehensive and supportive induction process, which guides new staff through all aspects of their role, working alongside experienced members of the team. People can be confident; care staff have the required skills and competence to support them safely. Staff are required to reflect on their own practice and identify development goals as a requirement of the collaborative supervision process. This process is carried out regularly to ensure the staff team are well supported both professionally and personally. Employee of the month celebrates the achievements of the staff team and we saw many positive nominations from colleagues, visitors and residents.

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.