Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Snowdon Care Home

Snowdon Care Home, Llanberis, Caernarfon, LL55 4LF

01286870391

www.snowdoncarehome.com

The inspection visit took place on 27/01/2026

Service Information:

Operated by:	Plas Garnedd Llanberis Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	27
Main language(s):	Welsh and 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	Requires Improvement
Leadership & Management	Good

Summary:

Snowdon Care Home provides residential care and support for up to 27 individuals in the village of Llanberis, North Wales. People have access to a bustling community village with good amenities and public transport connections to busier neighbouring towns.

People experience good wellbeing outcomes because of the significant changes implemented since the last inspection. People are encouraged to have a voice and participate in developing their care and support.

Care and support are good at Snowdon Care Home. We found improved outcomes for people whereby they are supported to access the services and support needed for good physical and mental well-being.

The environment at the service is developing to support people's needs and provide pleasant accommodation. Whilst improvements are clear to see, further improvements are needed to ensure all areas of the service are in good condition.

The leadership and management of the service is good. Recruitment to key leadership roles has provided structure and direction. Improved oversight has resulted in targeted action to address areas requiring development. The provider is yet to appoint a new Responsible Individual for the service.

Findings:

Well-being — Good

People have choice and control over most aspects of their day-to-day life. People have the freedom to choose when they want to get up and go to bed, what they want to do with their time and where they want to do this. Many people at the service can access the community independently and do so with appropriate support and risk assessment in place. The new manager has taken action to make sure people have a voice and can contribute their views about what happens at the service. People are asked about what activities they would like to see, what meals they would like cooked and ideas for decorating and enhancing the communal areas. We saw ideas put forward by people have already begun to be implemented which is having a positive impact on the atmosphere and environment. The provider has supported these ideas by making resources available.

People access the support they need to meet their physical, mental, and emotional needs. Specific actions for people which were outstanding at the last inspection have been actioned, this includes obtaining specific equipment and ensuring targeted risk assessments are in place. The manager, along with senior staff have reviewed all individuals at the service to ensure any additional support from external health professionals is in place or has been requested. The manager has a good understanding of what services are available to support people's specific needs. One person told us they were so happy they were in the process of getting a new, better wheelchair. Health care professionals provided positive feedback about the changes at the service.

We observed a pleasant and sociable lunch time experience. The completion of the conservatory area and new floors throughout have encouraged people to use these communal areas and we saw people sitting together for lunch, talking, and enjoying their meal. Care staff told us they have time in the afternoons to spend with people chatting or doing an activity. Time has been taken to ask people what they enjoy doing and the manager has begun to implement different activities to suit these preferences. Family and friends are welcomed by the service as we saw people receiving visitors on the day of inspection. Positive feedback has been provided to us by visiting family member. One person commented on the positive feel to the home, another said "*there have been huge improvements recently.*"

Care & Support — Good

People are in receipt of care and support which meets their identified needs and personal outcomes. This is because the manager has fully reviewed all care records to ensure the information recorded is accurate, relevant and captures people's views and wishes. A resident of the day system has been introduced which has facilitated regular review of each person and ensures any actions or changes are implemented in a timely way. People or their representative are actively involved in the assessment process and the creation of their care records. This is evident from the person-centred nature of the information recorded. At this inspection we found care records to be complete and reflective of the care and support people need. Risk assessments have been completed to inform care staff of potential risk and how to manage these with dignity and respect.

The safety of people living at Snowdon has improved since the last inspection, with risks posed by areas of non-compliance now rectified. Progress has been made to completion levels of key training subjects, specifically safeguarding. Assessment, care planning, and risk assessment ensure the service can meet people's needs. Improvements have been made to the oversight and management of legal authorisations where people experience restrictions in their best interest. The manager has a good understanding of these processes and the importance of having accurate and up to date records. The provider has demonstrated good practice in reporting safeguarding concerns and engaging with the relevant professionals to appropriately manage potential risks.

Significant improvements have been made to the safe management of medicines at the service. People receive the medication they need, when they need it, as directed by the prescriber. The provider has taken immediate action to rectify issues identified at the last inspection in relation to medicines management. The manager has retained incredibly good evidence to show the positive impact new processes have had on medication processes. Increased oversight of this area by the manager and senior staff means care staff are well supported and ensures best practice is consistently carried out.

Environment — Requires Improvement

People continue to benefit from the ongoing renovations being carried out at the service. At the last inspection work had been completed on the sun lounge to a high standard. New windows provide improved insulation as well as better visibility of the outdoor space. New flooring has been installed across the ground floor, and the provider has purchased new armchairs, tables, and dining chairs. These investments have significantly improved the appearance of these areas and people are making more use of communal space. A shelter has been erected outside to provide cover for people who smoke and there are plans in place to further develop the outdoor areas in the spring. People told us they are looking forward to helping with the outdoor work. Work is still required to address the outstanding renovations to bathrooms. The provider acknowledges the importance of people having access to well-equipped and pleasant areas for personal care and had given assurances this is a priority. This is an area for improvement, and we expect the provider to take action.

The accommodation mostly supports people to achieve their personal outcomes. People have access to equipment which supports their physical needs and promotes independence. The manager is proactive in accessing external support to make sure people have the equipment they need. Equipment at the service is checked on a regular basis to ensure it is in good working order and safe for use. The provider invests in equipment and furniture which supports people's wellbeing. People have clean and well-equipped bedrooms which are personalised to their personal tastes and reflect what is important to them. People have access to call bells so they can call for assistance when needed. High importance is placed on checking the safety and cleanliness of people's rooms daily. The housekeeping team work hard to make sure people live in a clean environment which supports infection prevention and control practice.

Leadership & Management — Good

People can be assured the provider has taken notable action to address the issues identified at the last inspection which were impacting on the overall delivery of the service. An experienced and confident manager has been appointed at the service which has created a strong leadership team, the impact of which is visible across the service. The manager took immediate action to fully audit all areas of the service, identify what action was needed and make necessary changes. A clear evidence trail has been retained to show the progress made. Staff at the service are very positive about the new management and can see the positive impact the recent changes have had on the service. The provider has made progress in their oversight of the service in the absence of a responsible individual (RI) and has supported the manager as required. The provider is still required to appoint a suitable person to the role of RI and this remains an area for improvement which we will review at the next inspection. The changes at the service have been communicated with people and their representatives through a new newsletter and invite people to a relative and residents meeting.

People have access to important documents about where they live. The statement of purpose and guide to the service have been updated to be an accurate reflection of the service and to provide information about the complaints process and who people can speak to if they have a concern, including access to advocacy services. The provider has ensured they have access to their CIW account and submits notifications as required so the regulator is aware of key events at the service.

We found previous improvements to the supervision of staff at the service have continued to be sustained with the manager continuing to provide one to one supervision to staff on a regular basis. Staff meetings take place and detailed minutes of these meetings are recorded to evidence what was discussed and what actions were set. Progress has been made for training with improved completion rates. This continues to be a priority for the manager. Action has been taken to ensure staff complete training in areas which are specific to meet the needs of the people they are supporting.

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
People do not currently have access to bath and shower facilities which are well presented and provide a pleasant environment for personal care to take place.	27/01/26
People cannot yet be assured the provider is taking positive action to appoint a suitable person to the role of RI. People may not have confidence in the continuity of service due to the uncertainty of key leadership roles at the service.	27/01/26

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

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