



Inspection Report on

Snowdon Care Home

**Snowdon Care Home
Llanberis
Caernarfon
LL55 4LF**

Date Inspection Completed

26/03/2025

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About Snowdon Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Plas Garnedd Llanberis Limited
Registered places	27
Language of the service	Both
Previous Care Inspectorate Wales inspection	18 July 2024
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language.

Summary

People told us they are happy living at Snowdon Care Home, spending their time doing the things they want to. People are supported with their health and wellbeing and receive care which is reflective of information within care records. People live at a service which is sufficiently staffed and where the staff are appropriately supported.

People speak fondly about the care workers who support them and are very complimentary about the meals they eat. People access health and wellbeing support, and the manager ensures any guidance is recorded and implemented.

Improvements are needed to the overall supervision of the management of the service by the responsible individual (RI). The RI must respond in a timely way to issues identified by their own processes or by external regulators to ensure the safety of people living and working at the service. The RI must ensure the service is suitably managed having regard to regulatory requirements.

Well-being

People receive care and support which meets their needs and wishes. People are as independent as they can be, and care records their preferences for care and support. People choose how to spend their time, doing things which are important to them and make them happy. We saw for some people this is spending time in their home and for others, going into the local community. People have developed friendships and spend time together in communal areas, talking and playing games, or go out with family and friends and have visitors to the service. This is important for people's social and emotional wellbeing, to develop and maintain important relationships and prevent isolation. Many people we spoke with told us they do not like to participate in group activities and prefer spending time in their rooms watching TV, reading, or doing puzzles and card games. Staff get newspapers, magazines and other items people request, others shop online for things they need. This is important to people so they remain stimulated and can continue to access and enjoy the personal items which are important to them. Everyone spoke positively about the staff who support them. We saw care workers respond to call bells and requests for help or drinks quickly. One person told us, "They come and have a chat with me, and see if I need a drink, cup of tea." Another person said, "staff are brilliant, very kind, they help me have a bath when I ask."

The manager discussed in detail the specific needs of people, any associated risks, and the support, both external and in the service, needed to keep them as well as they can be. This shows a good understanding of the people who live at the service so people can be assured their needs are understood. The manager told us staff are proactive in ringing healthcare professionals if support is needed and we saw where a person had begun to experience skin breakdown, this had been identified and addressed early on. We were also told about people who had relocated to the service which has been positive for them, where they have engaged with support and are more settled in their home environment. This was corroborated with us by an external professional. We looked at care records for people and saw information about specific support approaches to manage difficulties experienced.

People are not as safe as they could be. Care workers complete safeguarding training and are supported by policies to guide practice. Information about how to raise a concern and who to contact is available within policies, the service statement of purpose and guide to the service. People told us if they were concerned, they would speak to a family member or one of the staff. Improvements are needed to the oversight and governance of the service by the responsible individual. Some areas of Health and Safety have not been addressed in a timely way meaning routine testing has expired placing people at risk. Further issues in relation to fire safety have not been addressed within the given timescales which placed people at risk in the event of a fire and risk of having to leave their home had the Fire Service taken further enforcement action. The provider has not ensured people have not been placed at unnecessary risk. This forms part of the priority action notice issued to the provider as a result of this inspection.

Care and Support

People live at a service where their care and support needs are met. We saw assessments are completed by the manager with people or their representative, when considering coming to live at the service. Additional information from health and social care professionals is also considered as part of this assessment process. Care records document information about the person which helps staff get to know them and deliver care which is person centred. This includes their life history, family dynamics, likes and dislikes. For each identified care need, a personal plan details what the person wants to do for themselves and what support they need to achieve this. Information looked at in care records was reflective of what we saw during the inspection and what we were told by people we spoke with. People are asked about their language and cultural needs, and we heard people conversing in Welsh throughout the inspection. This is important to people who are first language Welsh speaking as this is part of their identity. The manager told us about the importance of having Welsh speaking staff at the service so people can choose to communicate in their preferred language.

People have good access to services which support their overall health and wellbeing. Records show people receive support from dietitians, general practitioners, district nurses, occupational therapists, and mental health services. Optical services visit people in their home and arrangements are made if people need to attend appointments at hospital. Where people have specific care requirements in place, we saw these are carried out in line with guidance, such as management of skin viability or nutritional requirements. Daily notes record multiple entries of support delivered by care workers. This includes multiple checks during the night, support with personal care, records of food and fluids and observations about mobility and wellbeing. Robust monitoring and timely action mean issues are addressed quickly and people receive the treatment or support they need to stay well.

Appropriate infection prevention and control measures are in place at the service, so people are protected from the risk of infection. All staff complete infection prevention and control training and policies are in place to support this practice. There is ample stock of personal protective equipment (PPE) with guidance for appropriate use. Domestic staff work hard to ensure people live in a clean and pleasant environment.

Environment

People live at a service where they can access all areas of their home without restriction. Entry to the service is secure to keep people safe, but people can come and go as they please. Visitors are asked to sign in and out of the service and our identification was checked on arrival. Renovations are ongoing at the service; the conservatory is nearing completion. Some bedrooms have been redecorated, and plans are in place for the renovation of bathrooms and wet rooms. People can choose to spend time in spacious and well-equipped communal areas or in their own rooms. People told us they like their rooms, and we found them to be clean and well maintained. People have equipment in place to support their needs. People have a call bell in their room, in bathrooms and in toilets so they can access support when needed.

The manager completes environmental audits every quarter. We noted that whilst some issues are identified and recorded, action to address them is not always timely. This means people cannot be assured the environment they live in is sufficiently maintained and free of risks to their health and safety. We were told some routine testing within the service had expired but had now been addressed. We found moving and handling equipment had not been serviced in line with national guidance and whilst this had now been booked to be completed, it means the provider cannot be assured the equipment is currently safe for use. Internal audits should identify these issues so they can be addressed in a timely way. This forms part of the priority action notice issued to the provider as a result of this inspection.

We looked at the in-house fire safety and found the weekly and monthly checks to be complete. External contractors have attended the service to carry out testing and servicing of fire detection and fire fighting equipment. However, the provider was issued an Enforcement Notice by North Wales Fire and Rescue Service in October 2024 due to non-compliance with fire Regulations. CIW were informed by the fire service that the provider had failed to take sufficient action to address all the areas of concern, so the fire risks remained for people living at the service. This forms part of the priority action notice issued to the provider as a result of this inspection.

Leadership and Management

People live at a service which is mostly effective in its day to day running. Staffing levels were reflective of the assurances in the statement of purpose and are sufficient to meet the needs of people. People are supported by care staff who are appropriately supervised and complete training to ensure they have the knowledge and skills to support people safely. A senior care worker and a deputy manager support care staff. The manager spoke positively about the staff team at the service and their commitment to delivering good quality care to people. The provider has successfully recruited to vacant positions at the service meaning staffing levels are consistently good, so people have their care and support needs met by staff who they are familiar with.

The manager was not present at the start of the inspection. We were told this is because they were managing another care service for which the RI of Snowdon care home is also a director. The manager attended Snowdon care home to support with the inspection. We were told a permanent arrangement was in place for the manager to dual manage the two services on alternate days, with deputy managers in place to support. The process to appointment a person to manage two homes had not been followed by the RI. At the time of the inspection this arrangement is relatively new and so we have been unable to assess an impact on the day to day running of the service, however, there has been a delay in records being provided as part of this inspection process due to the manager being at the other service.

We discussed the oversight for the service and found areas such as supervisions for staff, reviews of care records and updates to risk assessments are carried out on a regular basis with a clear plan in place to ensure these continue to be up to date. Due to the concerns raised regarding the management of fire safety at the service, we looked at the oversight of Health and Safety. The manager conducts an audit of the environment quarterly which considers food safety, infection prevention and control measures, fire safety and general health and safety. We looked at the two most recent audits and noted actions relating to the fire safety, electrical servicing, and equipment servicing. However, the audits reflect routine servicing has been allowed to expire and not actioned quickly, meaning people do not always live in an environment where the facilities and equipment is well maintained to support people and keep them safe.

We looked at the reports completed by the RI as part of their visits to the service. The RI visits the service on a regular basis and reported to be supportive and contactable. However, we found whilst the RI has recorded areas of the service which have been looked at, the reports lack detail of the findings, any actions needed and timescales for these. Improved oversight of internal auditing processes would ensure issues are identified early on and addressed in a timely way, preventing delays and safeguarding people who live and staff who work at the service. People cannot be assured the governance processes are currently carried out as effectively as they could be or that the RI is as responsive to actions as they should be to keep people safe. The issues identified have placed people at unnecessary risk, and we have therefore issued a priority action notice. The provider must take immediate action to address the issues.

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 Priority Action	Date identified
People do not live at a service where there is effective oversight and maintenance of all aspects of health and safety. People cannot be assured the RI who is also the provider acts in line with Regulatory requirements when carrying out their role to make sure people are not placed at unnecessary risk.	26/03/25

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