



Inspection Report on

Hafan Deg Residential Care Home

**Hafan Deg Old Peoples Home
Temple Terrace
Lampeter
SA48 7BJ**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

13/12/2024

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About Hafan Deg Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ceredigion County Council Adults and Children's Services
Registered places	19
Language of the service	Both
Previous Care Inspectorate Wales inspection	2 April 2024
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are happy with the service they receive and are supported by a team of experienced care workers, with whom they have developed positive relationships with. The new management team are settling into their roles and are getting to know everyone involved in the service.

The provider has completed the necessary work to close the Priority Action Notice (PAN) around the environment. People are very relaxed and comfortable in the home and the environment has a positive impact on their well-being.

The provider has good oversight of the service. The RI visits the home regularly to complete their quarterly reports. This information along with internal audits is used to improve the quality of the service for people.

Well-being

People are very positive about the care and support they receive; they are supported by a team of familiar care workers, who they have built up good relationships with. We saw many patient, friendly and understanding interactions throughout the inspection.

The provider respects people's cultural preferences and provides an 'Active Offer' of the Welsh language. This means It anticipates, identifies and meets the Welsh language and cultural needs of people who live at the service. Many of the staff speak Welsh and every effort is made to ensure people can receive support in their chosen language.

People are protected from harm because recruitment processes and training ensure they get the right care and support. New staff receive a thorough induction and get to know people while shadowing an experienced colleague. Ongoing development ensures care workers have the skills needed to successfully support people. People and their representatives know how to raise any concerns and have confidence in the manager.

The provider has completed the work required to the environment to close the Priority Action Notice (PAN). People are comfortable and relaxed throughout the home and care workers are positive about the impact the improvements have made to people's well-being.

People have a voice and input into the running of the service because the RI involves them in quality assurance. Governance processes are comprehensive and focus on developing the service by using information from surveys and audits. The Quality of Care Review identifies areas to improve following consultation with people who use the service.

Care and Support

People are positive about the care and support they receive at the service. The team of experienced care workers know people well, understand their needs and work towards their well-being goals. We saw many friendly and encouraging interactions throughout the inspection. Care workers have developed longstanding, effective relationships with people and told us, *“They (people) are lovely”* and *“I love working with the residents”*. People’s representatives value the care offered and one said, *“The care is more than good and they respond well to him”*.

People, their representatives, care workers and professionals are involved in developing person-centred plans. Personal plans effectively guide care workers on how to meet people’s needs, in line with their choices and preferences. Senior Care workers thoroughly review plans every month and involve people in this process. Health and social care professionals are involved in people’s care and this guidance is clearly recorded in their personal plans.

People take part in everyday activities such as watching TV, reading, music and occasional visiting entertainment. The provider has identified the activities programme they offer to people as an area they want to develop and improve. They are planning to introduce a system that will benefit the people who live at the home. People, their representatives and care workers feel this will be a benefit to individual’s well-being.

The manager and deputy review people’s needs regularly to ensure there are sufficient staffing levels in place. We observed many unrushed, patient and friendly interactions between people and staff throughout the inspection.

Environment

The provider was issued a Priority Action Notice (PAN) in August 2021. Since then the communal areas and bedrooms have been re-decorated, flooring replaced and new furniture has been purchased. The provider has completed the majority of the work we identified in the PAN and have a clear plan to finish the remainder of the decoration early in 2025. The environment no longer impacts people's well-being and the PAN has been closed.

People are comfortable and relaxed in the different communal spaces. They use them to socialise with each other and the staff team. People can use their own rooms or the smaller 'cwtch' lounge to comfortably meet with their visitors. People personalise their rooms as they choose with photographs, ornaments, decorations and furniture. Care workers told us the environment now has a positive and relaxing impact on people's well-being.

Equipment to support people's safety or independence is available. Regular health and safety audits of the property are completed by the manager. Testing of fire safety equipment is up to date and the building is compliant with the fire regulations. Personal Emergency Evacuation Plans are individualised and available in emergencies.

The kitchen has a food hygiene rating of five. Meals are freshly prepared every day by the catering team. People we spoke with were positive about the food provided.

Leadership and Management

The provider has good arrangements in place for monitoring, reviewing and improving the quality of the service. The Responsible Individual (RI) visits the service regularly and completes visit reports every quarter. They sample documentation, involve people and/or their representatives and staff during their visits. The six-monthly Quality of Care Review is comprehensive, uses the results from internal quality auditing systems and feedback from people, staff and professionals. This information is used to highlight positive aspects of the service and areas of quality they wish to improve.

There is a new manager and deputy at the service, both are described as accessible and supportive. The new management team are settling in and are developing an open and transparent culture. Care workers receive regular, supervision and an annual appraisal to discuss anything relevant to their roles. Care workers have an adequate understanding around safeguarding and the provider is introducing new training to help staff to appropriately report concerns.

The necessary pre-employment checks take place before new staff start work. Care workers receive a highly effective induction and shadow experienced members of staff, which prepares them for their new role. There are effective systems in place to support staff to attend a variety of online and face to face learning, which enables staff to meet peoples individual needs. Care workers register with the workforce regulator, Social Care Wales and gain further skills through professional qualifications.

Summary of Non-Compliance	
Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
44	People do not live in an environment that fully supports their wellbeing.	Achieved

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

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