



Inspection Report on

Hafod Mawddach

**Hafod Mawddach Residential Home
Marine Road
Barmouth
LL42 1NW**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

18 November 2024.

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About Hafod Mawddach

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	31
Language of the service	Both
Previous Care Inspectorate Wales inspection	31/10/23
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 living in Hafod Mawddach can maintain their independence as able and are treated with dignity and respect. People spoken with are happy with their care and are complimentary about the care staff and the food in the home. Care staff are aware of local safeguarding protocols to keep people safe from abuse and neglect. People can access advocates to ensure their rights are maintained if required.

People benefit from person centred care. Care is planned according to each person's particular needs and preferences to help people achieve their outcomes. Medicine storage and administration is good. People's health is monitored, and they can access health care advice in a timely way.

The environment enables people to achieve their outcomes in a safe manner. People can personalise their rooms to a high degree to feel at home. Health and safety arrangements are appropriate to mitigate risks as far as is practicably possible. A new unit has been built for the care of people living with dementia, the unit meets legislation requirements.

The care given in the home is as described in their Statement of Purpose document. The Responsible Individual (RI) visits the home to ensure quality standards and produces reports as per legislation requirements. Care staff spoken with are happy in their work and feel well trained and supervised to enable them in their role.

Well-being

People have a voice in the service. People can influence their plan of care and are supported to achieve their objectives. People who cannot speak for themselves can access an advocate to uphold their rights. Care staff are aware of local safeguarding procedures to keep people safe from harm and neglect. People are supported to be as independent as able and remain a part of the local community. We saw people are supported to go out for walks and shopping locally. There are communal lounges and dining spaces available for those who wish to socialise and quieter areas for those who need privacy or to spend time with visitors. People spoken with said they feel well cared for and they especially enjoy the food. We saw people are offered a varied menu and the home can cater for special diets. A person told us in Welsh, they are fine, and the service is good, “*dwi’n iawn, mae’n dda yma*”. Comments from other people included, “*I’m ok, it’s good here.*”

“It’s great here, I chose to come here, I’m very comfortable. I can’t fault it.”

“Lovely staff, they treat me well.”

A family member said, “*It’s great here, there’s good communication with the family, Mum is happy here.*”

People are supported to do what makes them happy. We saw some people’s rooms are personalised to a high degree to make them homely. People said they are happy with their rooms, and the cleanliness of the home. People can have internet access and use information technology if they wish. Local schools are supportive of the home and children’s choirs often visit. People can choose for their hairdresser to visit them in a salon provided in the home. Christmas events were being planned for people on the day of the visit, families are welcome to visit during the Christmas holidays and can have Christmas lunch with their relative.

People are treated with dignity and respect. We observed people being supported in a respectful, friendly way. People and care staff have a good rapport, and some care staff can speak Welsh with people. People’s first language choices are recorded in their care records and their choices are acknowledged by staff. The RI and manager ask the opinions of people, their families and care staff regarding the service to ensure a continually improving and evolving service.

Care and Support

The service consults with people regarding their care where able. People can counter sign their personal plans if they have capacity to do so. The personal plans seen are person centred and support people to achieve their aims and objectives. Personal plans are reviewed regularly to ensure they are still relevant and meet people's needs. Care assessments are also regularly reviewed to ensure they remain fit for purpose. Personal plans contain people's likes and dislikes and preferred routines. A senior member of staff assess people before they are admitted to the home to ensure the service can meet their needs. Medicine administration and storage is good in the home and people can have their prescribed medications. Sensitive information regarding people is kept in a locked office. People's health is monitored, and they can access medical advice in a timely way.

The home is hygienic and manages the risk of infection. Care staff are up to date with Infection control training to help them in their role. We saw the home is clean and tidy and have housekeeping staff. Care staff have competency testing to ensure they have good infection control and hand washing practices. Refuse is removed quickly to ensure a pleasant odour around the home.

Environment

People live in an environment which promotes their safe care. People can access equipment needed for their care and these are serviced to ensure they are safe. Utility checks for water, gas and electricity are up to date as is the liability insurance for the home. The electricity installations are certified as safe. Risk assessments are in place regarding aspects of care to ensure people's safety and these are regularly reviewed to ensure they remain relevant. The hygiene rating for the kitchen is five, this is the highest available. People have personal emergency evacuation plans (PEEPS) to ensure they can be safely evacuated in the event of fire or an emergency. Care staff are up to date with fire safety training and drills. There are updated health and safety risk assessments for the home to mitigate risks as able. Rooms containing chemicals which are hazardous to health are kept locked in safety.

People live in an environment which promotes achievement of their personal outcomes. People can personalise their rooms to a high degree to enable them to feel at home. People have access to information technology and hobby materials. There are areas in the home for people to socialise in or quieter areas. There is an ongoing programme of redecoration and maintenance to ensure the environment remains of good standard. A new unit has been built for the care of people living with dementia, all furniture and equipment are new and compliant to the legislation.

Leadership and Management

Governance arrangements are in place to ensure the smooth running of the service. The RI visits the home and provides quality reports as required by the legislation. The RI speaks to people and care staff to ask their views regarding the service and looks at the environment and staffing to address any issues. The manager said they feel well supported and can access training to help them in their role. The care staff numbers, and care given were as described in the Statement of Purpose document on the day of our visit. The manager said there are some care staff posts outstanding, but they are confident they can be filled.

Recruitment and retention of staff are good which enables good continuity of care for people. Staff training and supervision are up to date. Care staff spoken with said they are happy in their work and feel well trained. They can access supervision as per the legislation to enable them to have good practice and to ensure their well-being. Care staff records seen demonstrate staff have checks in place to ensure they are appropriate to work with vulnerable adults.

People can be confident of investment in the service. We saw the new unit which will be available for the care of people living with dementia. The home has deliveries of fresh foods for people's meals. Equipment and linens/ towels are replaced as necessary. Care staff are replaced as needed to ensure good numbers are available to cover shifts. Investment is made in staff training to enable care staff in their daily role.

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
57	Health and Safety risks are not adequately identified and managed, which places people at risk of harm. Ensure all health and safety risks within the environment are identified and appropriately managed.	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
36	Not all care workers had received supervision every three months, as is required. Ensure all staff receive supervision every three months.	Achieved
56	The service provider does not have adequate provision in place for the control of infection and to minimise the spread of infection. Hygiene and infection control risks were evident during inspection.	Achieved

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Date Published 04/02/2025