



Plas Y Don



Plas Y Don Residential Home, Bro Heli, Pwllheli, LL53 5BD



01758612123

Date(s) of inspection visit(s): The inspection visit took place on 26/08/2025

Service Information:

Operated by:	Gwynedd Council Adults and Children's Services
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	28
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The service provider anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Good



Care & Support

Requires Improvement



Environment

Good



Leadership & Management

Requires Significant Improvement

Summary:

Plas Y Don offers people continuity of care. Care workers are mostly from the local community. They provide kind and genuine care in the Welsh language, but also in English if this is required. People are mostly happy living in the home and especially enjoy the home cooked food.

'Well-being' is rated as 'good' because mostly feel safe and content and have some control over day-to-day choices.

'Care and support' is rated as 'requires improvement' because people are at risk of poor outcomes. There is a lack of organised, regular opportunities for people to engage in meaningful activities and social opportunities. People's needs are not fully identified. This is mitigated to a degree as there is a consistent staff team who know people well, intuitively picking up issues and reporting them. However, they lack the training and competency checking to ensure they are taking the right course of action, and personal plans lack sufficient information to give clear guidance. Medication administration is good, and people have access to health professionals.

The 'Environment' is rated 'good' because the building and equipment is checked to ensure it is safe. People have their own room and enjoy access to communal and outdoor spaces if they are

able. The home is clean, warm, and nicely presented.

'Leadership and management' is rated 'requires significant improvement' because the provider is not ensuring the service is being operated in accordance with the 'statement of purpose' and policies. The provider has not made sufficient improvement with issues previously identified at inspection, including details within personal plans and training of staff. We expect the provider to take immediate action to address the issues identified at this inspection.

Findings:



Well-being

Good

People are treated with dignity and respect, forming safe and healthy relationships. Families are welcomed to the home and people look forward to these visits. One person confirmed “*My family can visit,*” and told us how important this was to them. Care workers mostly live in the nearby community, having knowledge of the area and people. This helps conversations with people which mostly take place in the Welsh language. Care workers are mindful of people who do not speak Welsh and ensure conversations in English take place in their company. Good working relationships are formed and there is warmth in the interactions between people and all staff members. Care is delivered in a dignified and respectful way, with people telling us “*The staff are good.*” Care observations show people are offered and encouraged to make choice about their daily living.

People are happy, mostly content and can choose to do what they want. People who are able to follow their own interests are supported to do this. One person told us “*I’m happy and I do things I like to do.*” Some activities are offered by the home to promote socialisation and engagement. One person told us they sometimes have a quiz, and others told us how they enjoy the bingo when the opportunity arises. The manager uses a local transport company when it is possible to arrange trips, but these are not as frequent people would like. There has been an improvement in the quality of the food being provided, with home cooked options looking healthy and appetising. People told us the “*Food is very good,*” and one person told us how beautiful they found the food saying, “*Bwyd hyfryd.*” One person told us “*Dwy’n hoffi bwyta gyda fy ffrind,*” and explained how they meet with their friend who lives in another room in the home, to enjoys lunch together.”



Care & Support

Requires Improvement

The service supports people with identified health needs, but improvement is required to identify other health issues and provide wellbeing opportunities. People have appropriate support with medication. Consideration is given to prevention of health issues, with the records showing people have, for example, good oral care. The service monitors people's weights and promotes good fluid and dietary intake. There is an excellent record of involvement of health professionals and outcomes of any appointments. This includes GPs, district nurses and the speech and language team. The manager is proactive in consulting with other professionals such as the mental health team to address any concerns. Care workers know people well, notice when they are not feeling themselves, and report this to ensure the right help is made available. We found some people had needs which had not been identified and are not considered in their care planning. We also found the service has good intentions of providing opportunities for people to take part in social events and activities, but these are not routinely happening. People may not be experiencing the best possible outcomes, and we expect the provider to make improvements.

Assessments and personal plans of care and support continue to need strengthening. Documents are provided in the preferred language of the person, with the majority of people's first language being Welsh. Assessments of people's care and support needs do not consider all the information available. We were unable to view assessments for people as they had been archived, but saw information on referrals to professionals which indicated the service had not considered the person's full needs. The service has worked to improve the personal plans, with a clear format which is easy to read. We found there is still work to be done around the completion of records as many lack the detail required to help reduce risks when providing guidance around care and support requirements. Some personal plans had up to date information on the overview sheet, but this had not been transferred into care plans. This is an area for improvement which has been highlighted with the service provider during the past two inspections. The outcomes for people may be poor as the provider is not ensuring full and accurate information informs care workers within the personal plans. As the provider has not taken sufficient action to improve this, we have issued a priority action notice. The provider must take immediate action to address this issue.

Personal plan reviews do not consider the extent to which the person has achieved their personal outcomes, nor do they involve the person or their relative. This is a regulatory requirement. A monthly review tick sheet is completed, but this does not evidence the involvement of the person or their relative. Outcome statements within the personal plan are difficult to measure as these are generic. The manager told us they invite families to formal reviews when the service meets with social workers. This is not sufficient to meet regulatory requirements. Outcomes for people may be poor because they are not involved in reviews of their personal plans on a regular basis, and goals

are not person-centred. This is being highlighted as areas for improvement, and we expect the provider to make improvements.



Environment

Good

The home mostly meets the needs of people. Located within the community of Pwllheli, there is easy access for visitors using public transport. People, who are able, can visit the local community. There is a variety of different spaces in the home, including places to meet in private and outdoor space. The building is on one level allowing people to move freely between spaces, and there is level access to the garden. A sun lounge is well used, and people enjoy meeting in dining areas and lounges. People have their own bedrooms, with some having en-suite facilities. People can personalise their bedrooms and have items which are important to them close at hand. Some people have hobbies and interests which demands storage space. This is difficult for the service to provide due to the smaller dimensions of bedrooms. Storage of other items required to deliver care can be problematic, but the manager and other staff ensure this does not impact on people's safety. The décor is plain but fresh as the manager and team members take pride, completing some decorating tasks themselves. The Welsh language and culture are celebrated throughout the home. The manager told us they would like to develop the garden to provide raised beds for planting of vegetables as people would be interested in this activity. They are in the process of seeking funding to support this project.

There are systems in place to keep the home and equipment clean and safe, and these are mostly effective. The provider has a maintenance department to support the service with checks and repairs of the building. They are available at certain times during the year to help with decorating, but the provider is considering how this could be arranged in a more effective way to support the ongoing needs of the home. External contractors are used to test and service items where this is required, including electricity and hoists. We saw deep cleaning of bathrooms taking place and found all areas of the home to be clean. Communal areas are kept free of trip hazards, and though there is potential for some congestion in smaller dining areas, this is managed well by care workers. Fire safety equipment is available. Fire drills are recorded, though these could be strengthened. The home is warm, bright and easy to ventilate. The kitchen is run smoothly and meets the expected standard as tested by the Food Standards Agency. The front door is kept locked and visitors to the home are required to sign in for security reasons.



Leadership & Management

Requires Significant Improvement

The service provider fosters a positive and compassionate culture but there is ineffective oversight of the service. The manager told us they feel supported and has access to an area manager and responsible individual (RI). They visit the service, meet with managers, and consider the operation of the service. The monitoring of the service has been ineffective in identifying some areas where the service needs to improve, including staff training requirements and adequacy of the personal plans. Where there are known issues such as vacancies within the staff team, or inadequate auditing, the root cause is not always identified and addressed. The current management team are operating without key senior carers to support the smooth operation of the service, placing pressures on the management to prioritise work. Routine management tasks are not taking place or are of poor quality. The management are 'firefighting' the situation to ensure people's care and support is prioritised. The management's own development requires support. There are barriers to the RI being able to fulfil their regulatory duty and the provider has not found ways to address this. The required 'Quality of Care' reports are not being completed. We expect this to be addressed. The outcomes of people are potentially poor as the service provider is not ensuring the service is provided with sufficient care, competence and skill, having regard to the statement of purpose. We have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Care workers are kind and caring and use their initiative but are not supported to learn and develop as required, placing people at risk of harm. Mandatory training has not been completed by all care workers. This has been highlighted with the service provider at the last two inspections. Though there is some improvement, this is insufficient. The provider has not identified when care workers do not have training suitable to the needs of the people they support. We found, for example, no training provision around modified diets for care workers and the chef. Some initiative had been shown to help a person who struggles to eat, but this was not based on informed knowledge. Care workers and managers are not receiving one to one supervision and appraisal meetings as required. While competency checks for medication administration have been a focus for the service, there are no additional competency tests undertaken. The outcomes of people are potentially poor as the service provider is not ensuring care workers and managers are supported to learn and develop. We have therefore issued a priority action notice. The provider must take immediate action to address this issue.

The provider has made improvements to the selection and vetting processes for care workers. The service has implemented changes and now has two references on file for each applicant. Other checks are undertaken to ensure care workers are suitably fit to work with adults in a vulnerable

position. Care workers have induction and shadowing opportunities, and management carefully consider the performance of the candidate throughout. Some employees have completed a qualification in care and come to the home with experience of working in care. The manager is supportive of care workers who wish to undertake a qualification. All care workers are registered with Social Care Wales, the workforce regulator. Many care workers' first language is Welsh. This supports the needs of people using the service, the majority of whom speak Welsh as a first language.

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 are not experiencing the best possible outcomes as the provider is not ensuring sufficient and adequate wellbeing and engagement opportunities are available on a regular basis. The provider is not ensuring the skills and competence of the staff team is adequate to meet the needs of people supported by the service, placing them at risk of inappropriate care and support.	26/08/25
People are at risk of not receiving the care and support they would like as they are not involved in three monthly reviews of the personal plans as required.	26/08/25
People are at risk of not influencing the direction of their care and support as people's recorded outcomes are generic, making consideration of the achievement difficult to evaluate during any review. There is no opportunity to identify any new desired outcomes on a regular basis.	26/08/25
People are at risk of not receiving the best possible service as the responsible individual is not reporting on the quality of care provided by the service, as required by the regulations.	26/08/25

Summary of areas for Priority Action	Date identified
People may not experience the best possible outcomes as the provider is not ensuring the service is delivered in accordance with the statement of purpose, which is the document outlining what people can expect from the service. Omissions or improvement requirements include: provision of regular activities to enhance people's well-being; training and support of staff; personal plans and their reviews; monitoring and improvement of the service; and, governance	26/08/25

oversight.	
Staff may not always have access to written information regarding people's needs which could affect the care people receive. This creates a risk people's care needs will not be fully known and fully met, with a potential risk of harm.	26/08/25
Staff do not currently have up to date training which could possibly impact upon the care and support they provide.	26/08/25

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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