



# Inspection Report on

**Gwyddfor Residential**

**Gwyddfor Care Home  
Bodedern  
Holyhead  
LL65 3PD**

## **Date Inspection Completed**

30/05/2024

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## About Gwyddfor Residential

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwyddfor Residential Ltd
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	19 March 2021
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 living at Gwyddfor home. They feel it is home from home, that they are treated well; their choices are respected, and they can live their lives as they want. People praise the care they receive, and health professionals are complimentary of the prompt actions taken when needed. The provider has thoughtfully selected equipment and facilities to help people achieve their outcomes safely, particularly in relation to their independence. Personal plans are live documents, changing daily when people's preferences and aspirations differ. Care staff are employed in numbers that make care provision comfortable, unrushed, and meaningful; interactions are familiar and friendly and allow time for chat and activities. Staff are trained well and recruited safely.

The home is comfortable and homely with a variety of lounges to suit different purposes. People have somewhere to sit in peace or socialise with others. The dining room is designed as a restaurant including a bar offering non-alcoholic drinks. People choose what they want in their bedrooms and surround themselves with things that are important to them. They reflect their personality and interests. The provider and manager are present daily and know what is working well and proactively identify where improvements might be made.

## Well-being

People have choice and control over their day-to-day life. Their choices and preferences are recorded in their personal plans, and their views are sought daily and in resident's meetings. Personal plans are reviewed constantly so any changes to preferences can be actioned immediately. People choose from a variety of communal rooms offering space for quiet time or more social spaces for dining or fun activities; they choose what they would like to eat and drink and what they want to do. There are Welsh speaking staff for those who prefer to use the Welsh language. Care staff treat people with dignity and respect, valuing their choices and accommodating their preferences.

People's physical and mental health and emotional well-being is closely monitored in the home. Health professionals are happy with the care and support provided in the home and praise how quickly the service alerts them to any health issues. One visitor told us hospital staff praised the thorough and useful 'transfer of care' records brought in by a resident of the home when they came for treatment. This helps ensure continuity of the right kind of care and support so that unfamiliar professionals know how people want to be addressed and treated.

People are healthy and active; they engage in chair activities and enjoy music and dance. They are happy with the service they receive and do things that interest them such as interactive screen games and jigsaws, reminiscence and follow their own hobbies. Care staff are well trained in areas relevant to the care of the people living here. The manager has expertise in dementia care and encourages other staff to enhance their skills to specialise in specific care areas.

People are protected from abuse and neglect and poor practices because staff are trained in safeguarding vulnerable people. There are also procedures in place they must read. Staff have lots of opportunity to speak to the manager in private if they have any concerns about practice including during frequent one to one meetings. Management and staff have been trained in legislation around mental health and deprivation of liberties; they know their responsibilities in relation to keeping people safe while allowing them to exercise their rights to independence and choice.

People consider Gwyddf for a '*home from home*'. The home has been thoughtfully configured to provide lots of different space to suit every mood and a restaurant feel to the dining area. It is clear the provider invests in the environment and accepts there is always more to do. Painting and decorating occur on a continuous basis and repairs and renewals are always a feature of the maintenance person's role.

## Care and Support

Prior to admission, the manager meets with as many people involved with the care of the person as possible. They attend the hospital of discharge or the person's home to discuss the care needs with the person, their family and health professionals. This ensures a clear and unambiguous assessment of needs occurs. Records show the manager considers whether the service's resources and staff expertise can help the person achieve their outcomes. If additional training is required, it is arranged.

Personal plans are developed for each person in the home. These capture the person's background history, their interests, hobbies and what is important to them. Plans and risk assessments are comprehensive and provide a clear picture of the person, so staff know what each person wants to do and how they want to be supported. Plans are dynamic, live documents and are reviewed daily to ensure they are always accurate. There are handover meetings at each shift, so staff know of any changes and what is happening on any given day for each person.

Because care is designed in close consultation with the person and others close to them, people receive quality care and support that respects their personal wishes and aspirations. The plans provide staff with information they need about risks and how to mitigate these. People told us they are very happy with the care, and they feel they are respected. One person told us *"It's like a top notch hotel here"*. Another said *"I love it here; the best thing is everything! I love the food, my bed, the staff, I get pampered"*. We saw excellent interactions between people and care staff who obviously respect them and treat them with dignity. We approached a care staff to enquire about their work in the home and they quickly interrupted our conversation to introduce the resident they were assisting, drawing them into the conversation. We saw independence is fully promoted with risks of falls managed discreetly, for example with mobile sensors and provision of pendant call alarms people can wear around their neck. Comfortable staffing levels mean alerts from the sensors can be immediately responded to.

People are supported to access healthcare, to attend their appointments and receive health professional advice and support in the home. We spoke with one visiting professional who commented *"Staff are very quick to get in touch with health professionals if nursing care is needed"* and *'I can't fault the care'*. We saw the medications being administered safely by staff wearing 'do not disturb' tabards so as not to be interrupted. We saw correct medication records with no errors, and secure storage systems.

## Environment

The home provides the right facilities and equipment to promote achievement of people's personal outcomes. On entering, the home feels welcoming and homely. The environment is set out with several small lounges and other communal space from which people can choose where they like to spend their time. Each communal room provides people with a different atmosphere, either to sit in peace and quiet, listen to a water feature and bird song in the atrium, or join in social activities in the larger lounge. There's also a dining room with several tables so people can sit in couples, in larger groups or on their own. A bar with functional pumps and wine cooler allows people to partake in drinking non-alcoholic wines and beers, and this helps to provide a restaurant ambience. A laminated menu stands in a holder in the centre of the dining tables and all tables are dressed with napkins, cutlery, and condiments. One resident referred to the space as a restaurant and we observed staff waiting on people, asking for their choices. Bedrooms are personalised and reflect people's interests and hobbies. We saw one person had brought in a patio chair from outside the French windows of their room; they had previously enquired about bringing in other furniture they own. That person has now been given a larger room, with French windows so they can still access the patio and is very happy with their new space. The outside area allows people to walk all around the building; there is a paved path, recently renewed in some areas, to ensure no trip hazards. If they are mobile, people are encouraged to walk around independently and walk from room to room as they prefer.

The service employs a full-time maintenance person who is always available to repair anything that is broken. They are also on call through the night should an emergency arise. The maintenance person has a full health and safety remit in the home, providing training to staff, completing audits of the environment and ensuring any jobs required are completed. The maintenance person is responsible for purchasing services to deal with any issues they cannot do themselves. Records evidence all safety checks have been carried out regarding fire safety equipment, fire risk assessment, regular fire drills, electrical safety including the testing of portable appliances. A legionnaire's risk assessment has been completed and water temperatures are routinely monitored. The maintenance person contributes to the biannual quality assurance report carried out by the RI. They inform the report of works carried out since the last report and works planned. Various audits are routinely completed in the home to ensure it is safe and secure.

## Leadership and Management

There are excellent governance arrangements to ensure the service runs well. The RI and manager are present every day; they are very much part of the daily operation so can easily observe daily practices. They are supported by a deputy manager, senior carers, a lead maintenance person and experienced administrative support. The IT system can run reports on any element of the operation, enabling management to track the effectiveness of the service. The system monitors due dates for things such as training and safety checks. Roles and responsibilities are delegated in a way that helps ensure there are no errors or omissions.

The statement of purpose lists the aims of the service to ensure people's well-being outcomes are met. We observed interactions, spoke with residents and their relatives, and a visiting professional, and found care staff adopt these aims in their work. People are respected, they are treated with dignity and are supported to live their lives how they want to. The statement of purpose is kept up to date through annual reviews; people are kept informed of changes such as additional training and expertise staff have gained, changes in shift patterns and in the environment.

Quality assurance processes such as audits, reviewing policies, feedback from staff, professionals, relatives and people using the service, all enhance the RI's oversight of the service. As the RI is in the home daily, they can see first-hand how the service is running. They complete a formal three-month report of their findings from various checks and measures and a bi-annual Quality of Care assurance report which considers what the service has achieved, and what it plans to do.

People are supported by effective and efficient staff who have been safely recruited, thoroughly inducted and well trained. We saw staffing levels comfortably met people's needs and allowed lots of time for staff to sit with residents chatting, playing games and reminiscing. Staff told us they are actively encouraged to spend time with people building familial relationships and relatives told us how they enjoyed the friendly banter and marvelled at how helpful staff are. Staff told us how they are encouraged to develop their learning and supported practically to do this. The training records shows a good range of training that equips care staff to understand and meet the needs of people in their care. The manager has completed high level of training in dementia care and has enlisted two staff on training to become infection control champions.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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

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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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**Date Published** 15/08/2024

### Crynodeb o'r achos o ddiffyg cydymffurfio

Statws	Ystyr pob un
<b>Newydd</b>	Nodwyd yr achos hwn o ddiffyg cydymffurfio yn yr arolygiad hwn.
<b>Adolygwyd</b>	Adolygwyd cydymffurfiaeth yn ystod yr arolygiad hwn ond ni lwyddwyd i'w chyflawni. Mae'r dyddiad targed ar gyfer cydymffurfio yn y dyfodol a chaiff ei brofi yn ystod yr arolygiad nesaf.
<b>Heb ei Chyflawni</b>	Profwyd cydymffurfiaeth yn ystod yr arolygiad hwn ond ni lwyddwyd i'w chyflawni.
<b>Cyflawnwyd</b>	Profwyd cydymffurfiaeth yn ystod yr arolygiad hwn a llwyddwyd i'w chyflawni.

Rydym yn ymateb i ddiffyg cydymffurfiaeth â'r rheoliadau pan gaiff canlyniadau gwael i bobl, a / neu risg i'w llesiant eu nodi drwy gyhoeddi Hysbysiad(au) Gweithredu â Blaenoriaeth.

Mae'n rhaid i'r darparwr gymryd camau ar unwaith i fynd i'r afael â hyn a gwneud gwelliannau. Os bydd darparwyr yn methu â chymryd camau gweithredu erbyn y dyddiad targed, gallwn uwchgyfeirio'r mater at Banel Gwella a Gorfodi.

### Hysbysiad(au) Gweithredu â Blaenoriaeth

Rheoliad	Crynodeb	Statws
Dd/G	Ni nodwyd unrhyw achosion o ddiffyg cydymffurfio o'r math hwn yn yr arolygiad hwn	Dd/G

Lle byddwn yn canfod achosion o ddiffyg cydymffurfio â rheoliadau ond na chaiff unrhyw risg uniongyrchol na sylweddol i'r bobl sy'n defnyddio'r gwasanaeth ei nodi, byddwn yn tynnu sylw atynt fel Meysydd i'w Gwella.

Byddwn yn disgwyl i'r darparwr gymryd camau i unioni'r achos a byddwn yn ei ystyried eto yn yr arolygiad nesaf. Lle bydd y darparwr wedi methu â gwneud y gwelliannau

angenrheidiol, byddwn yn uwchgyfeirio'r mater drwy gyhoeddi Hysbysiad Gweithredu â Blaenoriaeth.

<b>Maes i'w Wella / Meysydd I'w Gwella</b>		
<b>Rheoliad</b>	<b>Crynodeb</b>	<b>Statws</b>
Dd/G	Ni nodwyd unrhyw ddiffyg cydymffurfio o'r math hwn yn yr arolygiad	Dd/G

## **A oedd yr adroddiad hwn yn ddefnyddiol?**

Rydym am glywed eich barn a'ch profiadau o ddarllen ein hadroddiadau arolygu. Bydd hyn yn ein helpu i ddeall p'un a yw ein hadroddiadau yn darparu gwybodaeth glir a gwerthfawr i chi.

I rannu eich barn ar ein hadroddiadau, cliciwch ar y ddolen ganlynol i gwblhau arolwg byr:

- [Arolwg adroddiad arolygu](#)

Os hoffech roi adborth cyffredinol am wasanaeth, ewch i'n [Tudalen arolygon adborth](#)

**Dyddiad Cyhoeddi 15/08/2024**