



# Inspection Report on

**Bethel House Care Home**

**Hebron Hall Christian Centre  
Cross Common Road  
Dinas Powys  
CF64 4YB**

## **Date Inspection Completed**

07/02/2025

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## About Bethel House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hebron Hall Limited
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	28 December 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are very happy with the care they receive and have positive relationships with the care staff who support them. Care staff understand the needs of the people they care for and do so with kindness and patience. Care staff are happy working at the service and feel well supported. Care documentation is detailed and outlines people's needs accurately but must be reviewed in line with regulatory requirements. People have access to a vast selection of activities within the home and are supported to have choice and control. The Responsible Individual (RI) visits the service in line with required timescales and quality assurance monitoring is completed regularly. Supervision of the manager is still an area that requires improvement but the manager does feel supported. There are policies and procedures in place for the running of the service and people are given information about the service. Some improvements have been made to the environment but further improvements are required to fully meet regulatory requirements. People have their own bedrooms which are warm, clean and spacious; some rooms benefit from en-suite facilities. People are encouraged to personalise their rooms and make them as homely as possible.

## Well-being

People are treated with dignity and respect. Care staff have built good relationships with people and provide care with patience and understanding. People's views of the service are sought as part of quality assurance processes and there is a complaints process in place if people are not happy. Care staff like working at Bethel House and feel valued and supported. The feedback about the manager is very positive but the RI needs to increase formal supervisions with the manager. People live in a generally suitable environment and have single bedrooms which are warm, clean and spacious and offer opportunity for personal space and privacy. Some improvements to the home have been made but further improvements are required to communal areas, particularly bathrooms to ensure they are at a suitable standard and make people feel valued.

People receive care without delay. Pre-admission assessments takes place prior to people living at Bethel House to ensure their needs can be met correctly. Personal plans clearly guide care staff on how to care for people correctly, but care plan reviews need to be reviewed timelier in case of changes to people's needs. Care staff levels at Bethel House are good and ensure that people do not wait for the care they need. Care staff attend appropriate training and have the skills required to care for people correctly. Medication is administered correctly and medical attention is sought for people when required. People have access to various social activities within the home and there is a vehicle available to take people into the community in warmer weather. People have a choice of meals, snacks and drinks available as and when they want them and are free to eat meals where they choose.

People are protected from abuse and harm. Bethel House has a robust safeguarding policy in place and the manager understands safeguarding responsibilities. All care staff attend training in safeguarding adults at risk of abuse and know how to raise any concerns. The environment is maintained and safety checks are completed correctly. Fire safety is taken seriously and hazards reduced as far as possible. Care staff recruitment is safe and robust. Pre-employment checks are completed and there is a system in place to renew Disclosure and Barring Service (DBS) certificates regularly. All care staff where required are registered with Social Care Wales.

## Care and Support

People get the right care at the right time. Bethel House has a long-standing stable care staff team who understand the needs of the people they care for. Care staff treat people with kindness and compassion and can anticipate the needs of people who cannot verbalise their needs themselves. Personal plans of care are thorough, robust and detail people's care needs and how they should be met. They are supported with risk assessments where required. We noted some personal plans are not reviewed in line with regulatory timescales and we reminded the provider of this. We were assured that this would be addressed. Medication processes at the service are safe and robust. Medication is stored safely and administered in line with prescription. There are Medication Administration Record (MAR) charts in place that contain all required information and are completed correctly when medication is given. Bethel House has good links with the local GP surgery so medical attention can be sought easily for people. We saw evidence that people attend health appointments when required and any advice or guidance is added to personal plans.

People can be assured they have choice and control over their lives. People are very happy living at Bethel House and speak highly of the care staff who support them. One person said, *"I like living here, the staff are great"*. Another person told us *"The food here is delicious, can't fault it"*. Bethel House has a full activity programme in place and employs dedicated activity staff. A weekly activity rota is planned in advance and handed out to residents. External organisations and entertainers also visit the home regularly. Visitors to the service are welcomed and people are supported to maintain relationships with friends and family. One visiting family member told us, *"The care here is fantastic, I cannot fault it. Every one of the staff are great, we have no complaints"*. We observed the lunch time experience and saw that people have a choice of meal options available and further choice if they don't want the given options. People are free to eat their meals communally or in their rooms if they prefer. We saw care staff encouraging people to be as independent as possible and providing support where required.

## Environment

Further improvements are required to ensure people live in a suitable environment. Bethel House is located in Dinas Powys and benefits from local amenities and good transport links. The home is set over two floors and has a passenger lift for people to access alternative floors safely. There is ample communal space including large lounges and a dining room that enables people to spend time communally or receive visitors in private if they wish. There have been some recent renovations to the main entrance to the home and some cosmetic redecoration to communal areas but further improvements are still required. There are sufficient bathrooms and toilets throughout the service but most require upgrading. We saw that repairs to bathrooms has been completed to a low standard and noted a broken shower, broken hand towel holders and two toilet doors had holes in them which allowed people to see straight into them. This remains an area for improvement and we expect the provider to take action which we will follow up at the next inspection. The RI gave assurances that these issues would be addressed without delay. We were also shown a redecoration plan that is currently ongoing.

People can be assured they live in a safe environment. On arrival to the service, we found the main entrance secure and we were asked for identification and to sign the visitors book before we were permitted entry. This indicates that visitors to the service are monitored to ensure only authorised people have access. We conducted a tour of the building and found evidence of good cleaning regimes in place and no malodour was detected. Hazards have been reduced as far as practically possible; window restrictors are in place and harmful chemicals are locked away safely. There is a fire risk assessment in place and all residents have personal emergency evacuation plans to guide care staff in the event of an emergency. Fire alarms are tested weekly and fire drill take place regularly. Utilities such as gas and electricity and equipment such as hoists and slings are all serviced in line with legal requirements to ensure they are safe and fit for purpose.

## Leadership and Management

Improvements are required to the leadership and management of the service. Bethel House has a nominated RI and a manager who is registered with Social Care Wales, the workforce regulator. The RI visits the service in line with regulatory requirements and writes reports to support the visits, but increased oversight of the service is required. There are policies and procedures to inform the running of the service and to guide care staff of what is expected of them. People are given detailed information about the service which includes how to complain if they are not happy with the service. There have been no formal complaints to the service since the last inspection. Quality assurance monitoring takes place regularly and includes seeking the views of the people using the service. Quality assurance monitoring evidences that the provider is committed to providing a good service and making improvements when required. The manager understands legal requirements of caring for vulnerable people and liaises with the Local Authority safeguarding team when required. Since the last inspection the manager has received some formal supervision with the RI but not enough to meet regulatory requirements. This remains an area for improvement and we expect the provider to take action which we will look at during the next inspection. We have been given assurances that steps are being taken to make the improvements required.

People are supported by care staff who are trained and recruited safely. Care staff receive training appropriate to the roles they undertake and feel well equipped to do their jobs. Care staff are happy working at the service and feel well supported by the manager. One staff member said, *"the manager is absolutely lovely, I can discuss anything with her"*. Another staff member told us, *"We are a good team here, and we genuinely care about the people we support"*. All care staff receive supervision in line with legal requirements and can speak to the manager in between if required. Formal supervision is important as it is an opportunity to discuss any practice or development needs in a setting that is recorded. We examined a selection of care staff personnel files and found that they contain the required information including identification and employment history information. Pre-employment checks including references and DBS certificates are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people.

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

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	N/A



	inspection	
44	The provider has failed to ensure that the environment is of a suitable standard and promotes people's dignity, health and safety.	Not Achieved
66	The responsible individual has failed to undertake enough supervisions with the manager to meet regulatory requirements.	Not Achieved

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