Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Bethel House Care Home

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

02920513162

hebronhall.org/bethelhouse

The inspection visits for this service took place between 10/06/2026 and 15/06/2026

Service Information:

Operated by:	Hebron Hall Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	39
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Bethel House care home is based in Dinas Powys, offers residential accommodation for up to 39 individuals. This inspection was unannounced. Feedback gathered from people living and visiting reflects an overall good level of satisfaction with the service. Care staff are consistently recognised for their attentiveness and respectful approach. Many comments highlighted that staff frequently go above and beyond in delivering person-centred care. Staffing levels are sufficient to meet individuals' needs, with arrangements in place to cover any staffing shortfalls. Wellbeing outcomes for people are generally good.

People live in accommodation that is appropriate to their individual needs. The premises are mostly maintained to a good standard of cleanliness, with robust infection prevention and control measures in place, although we identified some areas for improvement. The environment is suitable for its intended purpose, offering a variety of communal spaces that support both social interaction and private time. There is a Responsible Individual (RI) for the service and management demonstrate good oversight of the service through the implementation of regular audits and the maintenance of current policies. Recruitment procedures are safe and compliant, ensuring staff

are appropriately vetted and fit to work at the service. There is clear oversight of staff supervision and training processes. Care documentation has improved and reflects any changes in individuals' health needs, associated risks, and review outcomes.

Findings:

Well-being — Good

Wellbeing is good, people are safe and they generally receive high-quality, person-centred care and support that is tailored to their individual needs. Their preferences and aspirations are respected, and staff consistently demonstrate a warm and supportive approach. Personal care plans have improved and ensure they fully support the effective delivery of care. Individuals are encouraged to welcome visitors into the home and are supported to maintain meaningful relationships. Visitors told us they always feel welcome and told us, *"It is so calm and pleasant here, we visit most days".* Outcomes for people who use the service are generally achieved and are of a good standard. People told us they are happy at Bethel House and have positive relationships with staff. Comments include *"staff are really good to us here"* and *"the food is very good, I have no worries".*

Care and support is good. People are protected from abuse and harm. There is a safeguarding policy in place and staff receive training in safeguarding adults at risk of abuse. Recruitment processes are robust, with all necessary pre-employment checks completed to ensure staff are suitable for their roles. Staff demonstrate a clear commitment to respecting and valuing individual preferences, which supports good care practices. This approach helps promote positive outcomes for individuals by recognising both their physical and emotional well-being. Whenever possible people are supported to have control over their day-to-day life and follow their own routines each day with support and encouragement from the care staff team. People have access to a good selection of group and individual activities available on a daily basis. The Responsible Individual maintains oversight of the service, carrying out regular visits and quality assurance monitoring in line with regulatory requirements and acknowledges where some improvements are required.

Overall, people live in a good, safe and secure environment. Although, we identified some areas require attention and is an area for improvement. Routine safety checks are undertaken; however, these would benefit from further strengthening. Fire safety is appropriately prioritised within the service. The service also ensures that Deprivation of Liberty Safeguards (DoLS) are implemented for individuals who are unable to make decisions about their care and support.

Care & Support — Good

People, receive good-quality care and support. Care staff are established and experienced and demonstrate care and respect. Care staff show strong commitment to their roles and report feeling valued and respected within the organisation. One staff member told us, *"I love my job, we are all really well supported by the managers, and we work well together as a team."*

Care staff were observed interacting with people in a friendly, respectful, and professional manner. Individuals are consistently supported to exercise choice, including in relation to their preferences for meals, drinks, and snacks. The dining experience was of a good standard, with meals well-presented and appropriately tailored to meet individual needs. The chef confirmed that menus are adapted to reflect residents' likes/dislikes and dietary requirements. The chef told us they are able to accommodate any meal requested by residents, and when a meal is returned uneaten, suitable alternatives are promptly offered and encouraged. Fresh meat, fish and vegetables are delivered most days, and the service has achieved a food hygiene rating of five (very good) from the Food Standards Agency.

A safeguarding policy is in place that clearly defines staff roles and responsibilities for protecting adults at risk from harm, abuse, and neglect. Reviewed records showed that staff have completed current safeguarding training. Where individuals are unable to represent themselves, family members or designated representatives are involved in accessing and reviewing the service on their behalf. The service has established systems to manage medication safely, ensuring individuals receive their medicines as prescribed. We reviewed the Medication Administration Records (MARs) and found them to be accurately maintained. Staff record both fridge and room temperatures daily. The service also promotes effective hygiene practices and manages infection risks appropriately.

People told us they feel safe and secure living in the home. During our visit, we observed a happy calm atmosphere with lots of visitors and friendly interactions throughout the home, contributing to a warm and homely environment where people appeared to feel a strong sense of belonging. People's body language and facial expressions indicated they felt safe, relaxed, and comfortable in the presence of care staff who support them. Individuals using the service confirmed they feel safe and secure living at the home. Comments include: *"The home is good, I feel really well looked after, I am really happy" (resident) and "Staff are fabulous here, it's like home from home, we are always made and can visit any time we choose" (relative).* The service employs a dedicated activities coordinator who delivers a structured programme five days per week. This includes the celebration of special occasions, engagement with local community groups, and the commissioning of external entertainers. In addition to this, care staff facilitate ad hoc activities during each shift, ensuring ongoing engagement throughout the day if people wish to participate including bible service/ reading.

Environment — Good

Overall, individuals are supported within a good environment; however, some areas require further improvement. During the inspection of the premises, it was noted that, while risks had been reduced as far as reasonably practicable, several issues required attention. These included safe storage of hazardous items and regular checks of safety doors and addressing any identified issues immediately. Throughout the visit, domestic staff were observed carrying out cleaning duties, and no unpleasant odours were detected. We reviewed a range of health and safety records, which showed that while the provider has some oversight to help maintain a safe environment, further scrutiny is needed to ensure daily checks are consistently carried out, effective and any issues resolved. Regular fire-safety checks are completed, and residents have individual Personal Emergency Evacuation Plans (PEEPs) to guide staff in evacuating people safely. A fire risk assessment is in place, and care staff receive appropriate training in both fire safety and first aid. We saw all confidential information securely stored in lockable areas.

Access and egress arrangements throughout the home are appropriate to meet the needs of individuals with mobility requirements. The main entrance is secure, and staff appropriately requested identification and a signature in the visitor log prior to gaining access. This demonstrates that effective systems are in place to monitor and manage visitors, ensuring that only authorised individuals are permitted entry to the service.

Overall, effective systems are in place to protect public safety and minimise the risk of cross infection. Staff have access to appropriate personal protective equipment (PPE) and an understanding of its correct use and disposal. We observed that call bell checks are completed regularly, with call bells accessible in all areas of the home. Arrangements are largely in place to safeguard individuals from environmental health and safety risks. The home offers homely accommodation, and management has shown a strong commitment to continuous development and improvement for the benefit of residents.

People are supported in an improving, clean and homely environment. Measures are in place to protect individuals from environmental health and safety risks. The home provides good-quality accommodation, and management has demonstrated a strong commitment to ongoing development and improvements for the benefit of those living there. They acknowledge that further improvements are needed to ensure the home is as safe and well-maintained as possible, and they are continuing to progress with a programme of ongoing works including refurbishment and painting throughout.

Leadership & Management — Good

People who use the service can be confident that capable and effective leadership is in place. The Statement of Purpose has been reviewed and clearly outlines the service's philosophy of care, emphasising "choice, dignity, and safety." Documentation examined demonstrated that these principles are being applied in practice, whilst also recognising areas where further improvements are needed.

Leadership and management is good, and people can be assured that the quality of care is actively monitored. The service provider demonstrates good oversight and a clear commitment to driving improvements in all areas identified as requiring development. However, some systems and processes need to be strengthened to ensure the home operates smoothly and effectively. The Responsible Individual (RI) maintains a regular presence within the home and engages proactively with staff, residents, and relatives to gather ongoing feedback. We requested evidence of monitoring arrangements and reviewed the most recent quality of care report dated December 2025. This report was produced to a good standard and demonstrates that, while quality assurance processes are in place, they require further depth and rigour to fully identify any shortfalls and support continuous improvement.

People can feel assured that staff are competent in their roles, supported by a robust and thorough recruitment process. A review of pre-employment documentation confirmed that all necessary safety checks are completed, ensuring staff are suitable to work with vulnerable adults. Staff receive formal one-to-one supervision every three months, complemented by regular clinical observations of their practice. These supervision sessions provide valuable opportunities for individuals to discuss their performance, professional development, and any concerns they may have. We were informed that staff turnover is low, with many employees having worked within the service for several years. This stability helps to ensure continuity of care for the people supported. Staff confirmed completion of all mandatory training, including dementia care and safeguarding. Policies in place guide staff practice, new care staff complete appropriate induction, and ongoing training is available when required. The service makes safeguarding referrals when needed and promptly notifies CIW of notifiable events.

We spoke with management and staff during our visit who told us the Responsible Individual (RI) is available when required. A range of additional initiatives have been implemented to recognise and support staff, including staff themed days, and the provision of ongoing support where required. As a result, individuals benefit from care delivered by a motivated, valued, and experienced workforce.

Management shows strong leadership with effective governance and oversight. They recognise the need for further improvement and value positive feedback in strengthening culture and improving care outcomes.

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
The provider must ensure the environment and equipment are well maintained and suitable for the service. People must live in a home that makes them feel valued and dignified.	20/12/23

CIW has not issued any Priority action notices following this inspection.

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