Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Jah Jireh Charity Homes (Wales)

Jah Jireh Care Home, Llwydcoed, Aberdare, CF44 0LX

01685 384444

www.jah-jireh.org

The inspection visit took place on 27/01/2026

Service Information:

Operated by:	Jah Jireh Charity Homes
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	51
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

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

Summary:

Jah Jireh is a faith-based care service specialising in supporting people from the Jehovah's Witness community. The home is located near Merthyr Tydfil and is registered to accommodate up to 51 people.

Overall, people experience good well-being outcomes. People can exercise choice regarding how they spend their time and the activities they engage in. They are supported to maintain their health, and evidence indicates they receive the right care at the right time.

The standard of care and support provided is good. Care staff have a clear understanding of the people they support, including what is important to them and the most effective approaches to use when delivering care. Care records reflect people's support needs, as well as associated risks to their health and safety.

The environment contributes positively to people's well-being. The home is clean, comfortable, and

suitably maintained. The provider carries out regular maintenance and repairs to ensure the environment remains safe and fit for purpose.

Leadership and management is good. The service is well led and promotes a positive culture supporting the well-being of both people and staff. Governance and quality assurance arrangements are robust and support the smooth operation of the service. Care staff receive training appropriate to the needs of the people they support and report feeling supported in their roles.

Findings:

Well-being — Good

People are supported to achieve and maintain the best possible level of health and well-being. We found people have timely access to a wide range of health and social care professionals, including GPs, specialist nurses, and social workers. All contact with external professionals, along with any advice or guidance provided, is recorded within people's personal plans. During our inspection, we received positive feedback from a visiting professional who told us: *"I think the care provided is excellent from what I can see. The staff are really good, very attentive, with residents' well-being at the forefront of everything they do."* Robust systems are in place to support people with their medication needs, ensuring medications are administered safely and in line with professional direction.

People are supported to have as much control as possible over their day-to-day lives. We reviewed documented evidence demonstrating people are provided with opportunities to express their views about the service they receive. Regular resident meetings enable people to discuss topics such as planned activities and menu choices, ensuring their preferences are considered. The service also uses satisfaction surveys to gather feedback on people's experiences of living at the home, which helps inform ongoing improvement. People have choice regarding how and where they spend their time, whether engaging in communal spaces or enjoying the privacy of their own rooms. A range of activities is offered to promote social interaction and engagement. In addition, an on-site place of worship is available, supporting people to meet their spiritual needs in accordance with their beliefs.

There are effective measures in place to help protect people from harm and abuse. Care staff demonstrate a clear understanding of their safeguarding responsibilities and are confident in the process for reporting concerns. Staff receive safeguarding training appropriate to their roles, and the service has up-to-date policies and procedures to underpin safe and consistent practice.

People live in an environment that promotes and supports their well-being. There are sufficient communal areas available, all of which are maintained to a clean and comfortable standard. People's bedrooms are personalised in line with their preferences, helping to create a homely and familiar environment. The home is well maintained, with appropriate checks and servicing in place for utilities and safety features, ensuring the premises remain safe and functional. Domestic staff attend daily and follow established routines to uphold good standards of cleanliness and hygiene throughout the service.

Care & Support — Good

People living at Jah Jireh receive a good standard of care and support. Pre-admission assessments are completed before people move into the home to ensure the service can meet their needs. Following this initial assessment, a personal plan is developed. These personal plans outline people's care and support requirements, along with any associated risks to their health and well-being. We found the personal plans to be person-centred and tailored to the specific needs of individuals. However, some of the plans reviewed would benefit from additional detail to provide clearer guidance for care staff. We also identified people and their representatives are not consistently involved in the review of personal plans. This was discussed with the management team, who assured us that action will be taken to address this issue.

People's liberty is protected in accordance with relevant legislation. For people who lack mental capacity to make decisions about their care arrangements, Deprivation of Liberty Safeguards (DoLS) authorisations are in place where restrictions amount to a deprivation of liberty. Care staff receive training on DoLS and the Mental Capacity Act, so they are aware of the legal frameworks designed to protect vulnerable people.

People benefit from continuity of care due to the service's stable and consistent staff team. Staff turnover is low, enabling both staff and people to develop meaningful and trusting relationships. Staffing levels are appropriate to meet people's needs, and the occasional use of agency staff does not impact the quality of care, as these staff members are familiar with the service. Care staff demonstrate a strong understanding of people's needs and provide attentive support.

People receive their medication as prescribed. The service benefits from a dedicated medication room, where medicines are stored safely and appropriately to maintain their effectiveness. Senior care staff receive training in medication management, and their competency to administer medicines is regularly assessed. Medication audits are completed routinely to ensure standards remain high. We discussed with the management team the need to strengthen the process for administering 'as required' (PRN) medication, specifically ensuring that the effect of the medication on the person is recorded in line with best practice guidance. The management team assured us that this would be addressed.

People are protected from the risk of infection. Care staff receive training in safe infection prevention and control practices, supported by clear organisational policies. Domestic staff confirmed they have sufficient supplies to maintain cleanliness across the premises and equipment. During the inspection, we observed care staff using personal protective equipment (PPE) appropriately when providing support.

Environment

Good

People benefit from living in a clean, comfortable, and well-maintained environment. The home provides several communal areas, including lounges, a dining room, an activities room, and a dedicated place of worship (Kingdom Hall) to support people in practising their faith. All communal spaces are appropriately furnished and decorated. Corridors are free from clutter, enabling people to move safely and independently around the home, and are enhanced with themed displays that add character to the environment. Bedrooms are spacious, equipped with en-suite facilities, and can be personalised with people's own belongings to help create a sense of homeliness. In addition to the en-suite provision, there are communal bathrooms available, fitted with specialist equipment to meet the needs of people requiring additional support. A courtyard-style garden is accessible to people during suitable weather. The kitchen has received a Food Standards Agency hygiene rating of three, indicating standards are generally satisfactory. The home is arranged over two floors, with lift access to the upper level to support people with reduced mobility to move freely throughout the building.

The service demonstrates a clear commitment to maintaining the environment and ensuring facilities are serviced to a high standard. Up-to-date safety certification is in place for key utilities, including gas, electricity, and fire safety systems. During the inspection, we discussed with the management team the need to update the fire risk assessment and to further strengthen fire drill arrangements. We were assured these matters would be addressed promptly. Domestic staff are present daily and follow structured cleaning schedules to ensure the home remains clean, hygienic, and well presented. Regular environmental audits are completed to identify any issues and ensure timely remedial action.

There are appropriate security arrangements in place to protect people. The home is secure to prevent unauthorised access. Visitors are required to make themselves known on arrival and must sign in and out of the premises. Confidential information is stored securely and is accessible only to authorised personnel.

Leadership & Management — Good

The provider's oversight and governance arrangements promote a positive culture and support the delivery of good-quality care. The Responsible Individual (RI) visits the home in line with regulatory requirements and demonstrates good awareness of day-to-day service delivery. During these visits, the RI regularly seeks the views of both people using the service and staff. Satisfaction surveys are routinely distributed to gather feedback and inform ongoing improvements. A programme of audits is in place, covering key areas such as health and safety, the environment, medication, and safeguarding. These audits are designed to identify issues promptly and ensure timely action is taken. A quality-of-care review is completed every six months to evaluate overall service performance. We reviewed the most recent report and found it clearly sets out what is working well and areas where further development is required. This process helps to ensure the service operates effectively and supports continuous improvement.

Care staff report high levels of job satisfaction and state they feel supported and valued by the management team. One member of staff told us, *"The manager is amazing, I can't fault her."* Another commented, *"The management are really helpful and supportive."* Despite this positive feedback, not all staff are receiving the required levels of formal supervision. We discussed this with the management team, who assured us that action will be taken to address the shortfall.

The provider has robust recruitment and vetting procedures in place to ensure staff are suitable to work with vulnerable people. Personnel files show all required pre-employment checks are completed, including employment history verification, references from previous employers, and Disclosure and Barring Service (DBS) checks. New staff are required to complete a structured induction programme to help them understand their roles and the needs of the people they support. We also saw evidence care staff are registered with Social Care Wales, the workforce regulator.

People experience positive outcomes because the provider is committed to maintaining a skilled and knowledgeable staff team. Care staff receive training that is appropriate to the needs of the people they support, and training records confirm staff are mostly up to date with their mandatory requirements. During the inspection, staffing levels were consistent with the service's target levels, and rotas viewed show these levels are routinely maintained.

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.

CIW has no areas for improvement identified following this inspection.

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

Mae’r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh