



# Inspection Report on

**Foxhunters Care Community**

**Foxhunters Care Community  
Iberis Road Llanfoist  
Abergavenny  
NP7 9LQ**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

05/12/2023

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## About Foxhunters Care Community

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Dormy Care Communities Ltd
Registered places	70
Language of the service	Both
Previous Care Inspectorate Wales inspection	30 November 2021
Does this service promote Welsh language and culture?	This service provides an active offer of the Welsh Language

### Summary

People have control over their day to day lives and the environment in which they live is outstanding. The service is tailored to meet people's needs on an individual basis and there are activities available in abundance. Staff, many of whom have been employed at the service for more than five years, know people well and are passionate about the care and support they provide. People and their relatives told us consistently they were very happy with the care and support they receive and feel fully involved in the care arrangements. People's well-being is promoted but consideration needs to be given to ensure safe staffing levels are maintained at all times during the night-time period. There are systems and processes in place that help keep people safe. Staff are safely recruited and feel supported. However, staff do not always receive regular supervision with their line manager. The Responsible Individual (RI) visits the service on a regular basis and completes reports detailing good engagement with people, their representatives, and staff. The service provider maintains oversight of the service.

## Well-being

People are healthy, active and can do things which promotes their physical and emotional well-being. We received very positive comments from people and their relatives on service delivery, including how staff are kind and caring. One person commented their relative has a special relationship with staff. We observed care staff delivering good respectful care and we saw a natural familiarity between staff and people they support. We observed friends' and relatives being welcomed into the home, supporting, and promoting people's emotional well-being. There is a sense of the community being brought into the service and also people freely accessing the outside community if they choose to do so.

There are systems in place to help protect people from abuse and harm. For example, regular clinical meetings take place to review people's health and incidents of concern. Innovative technology is being utilised to try and reduce the number of falls in the service. Staff receive safeguarding training and have a good understanding of who to report matters of concern to. Disclosure and Barring Service (DBS) checks are completed on staff. The DBS helps employers maintain safety within the service. Governance, auditing, and quality assurance arrangements are in place. These help the service to self-evaluate and identify where improvements are required. Safe staffing levels have not been maintained at all times during the night. From our observations during our visit and care records we reviewed we found there are some occurrences where people's needs are not always met in line with their personal plan.

People can express their views and know they will be listened to. Regular meetings take place where people and their relatives/representatives voice their opinions on things of importance to them. Minutes of meetings reflect views are taken on board and acted upon. People have control of their day to day lives and are involved in activities of their choice. Care recordings reflect if people are not able to access things they enjoy due to poor health, the activity is taken to them, thus, promoting their well-being. People's bedrooms illustrate their individual personalities and the things they enjoy. The provider has systems in place to seek people's views and opinions on any aspects of the service.

The environment and outside areas are outstanding and the views exceptional, enriching the lives of people living in the home. The home is well maintained to a very high standard. People have access to facilities such as a gym, cinema room, library areas, hairdressing salon, bar, café and also have the opportunity to book a private dining suite to celebrate special occasions together with loved ones. The outside spaces are beautifully maintained and easily accessed by all. People take great pleasure in growing their own fruit and vegetables. Some individuals' who are supported in bed for most of the time have a flowerpot of choice brought to their room to ensure all people are included.

## Care and Support

There are many opportunities for people to be involved in activities of their choice promoting people's happiness and overall sense of well-being. The provider promotes the Welsh language and culture. Welsh classes are run weekly by people living in the home. A hair stylist is employed by the provider who visits on a regular basis, and we saw people really benefiting from this experience. Relatives and friends are very complimentary of the support provided and feel very much involved in the care arrangements. People access places of interest independently or with support. The service is very much part of the community, with visits from school children, library groups and the local church. There are two activity co-ordinators in place consistently promoting people's emotional well-being. Staff are kind and compassionate in their engagement with people they support.

People receiving a service have a personal plan which is individualised and detailed. The service utilises person centred software which is a high tech digital platform to record people's care needs and support. Each personal plan covers the core areas of an individual's care needs detailing how staff can support them safely, including people's life history, and things of importance to them. Staff complete detailed risk assessments and update these as required. However, we did identify occasions where care and support is not provided consistently in keeping with the person's individual plan. For example, one person requires support from staff to eat their meal, but we found this was not being provided and the person struggled to eat their breakfast. We saw a call bell used to summon the assistance of care staff was not always accessible to one person who needs this to help them communicate with care staff in line with their assessed needs. This is an area for improvement, and we expect the provider to take action.

Mechanisms are in place to support people's health and protect them from harm. The provider makes referrals to health professionals in a timely manner to support people to remain healthy. We observed care staff using equipment to support people with their mobility, promoting people's independence in a caring and considerate manner. We saw staff engaging with an individual with warmth and understanding, easing their anxieties. The provider is using 'RoomMate.' This is a high-tech safety sensor to reduce and detect falls in people's bedrooms to protect and promote people's safety. The provider assured us this enhanced monitoring of people's movements is being updated within Deprivation of Liberty Safeguards (DoLS) applications already submitted to the relevant authority.

Arrangements are in place to support people with their medication. Medication is stored safely and administered in people's rooms. This practice is sensitive to people's needs and upholds their right to privacy. We found administrations are completed accurately; however, we did note some staff practice needs closer monitoring. The service provider gave assurance all matters identified have been acted on.

## Environment

The environment is of an exceedingly high standard and is consistently effective in supporting people's well-being. The premises, facilities and equipment are of a high quality. All areas are safely accessible to people and each communal area supports them to reach their full potential. The communal cafe area, towards the entrance of the service is a hive of activity, the décor is bright, welcoming and furnishings are of a high standard. People were observed to be comfortable, sitting together, chatting, and enjoying their meals and activities together. Alternatively, people are just as content relaxing in the comfort of their own, well decorated and furnished bedroom.

All bedrooms have ensuite facilities and there is ample space for the use of equipment, where necessary. Memory boxes holding something of interest to the person are displayed next to the entrance of their bedroom. We spoke with one person enjoying the use of a well-equipped gym, and then we spent time with three people watching a film together in the cinema room opposite. There is smart technology available and interactive touch screen therapies for people to experience. There is also a well-designed and comfortable bar area for people to enjoy.

There is a separate lounge and dining room on each floor which are spacious, comfortable, and appealing. The service has a Food Standards Agency (FSA) rating of five, meaning hygiene standards are 'very good.' The dining experience provides people with an opportunity to socialise and enjoy a choice of meals. There is a variety of options on the menu, with people offered alternatives on a daily basis. The food is high quality and people told us consistently the food is of a very good standard. Meals look appetising. Tables are set very nicely with people having access to menus and condiments on their table. People have access to homemade nutritious snacks during the day and a range of hot and cold drinks. Kitchen staff understand and cater for people's dietary preferences.

People's well-being is enhanced from the easily accessed, spacious and very well maintained outside spaces. Bedrooms on the ground floor have access to their own private patio area and rooms on the upper floor have access to a safe enclosed balcony. These overlook the glorious gardens and take in the stunning views of the mountains in and around Abergavenny. Vegetable plots give people the opportunity to be actively involved in growing their own fruit and veg. We were told the produce is then used in the kitchen and consumed by people living in the home. The maintenance team and external contractors' complete health and safety checks and assessments to promote people's safety in the environment. Regular fire checks on equipment and in the environment are recorded.

## Leadership and Management

There are systems in place for monitoring quality and these take in to account the views of people living in the home, relatives, staff and other stakeholders. The RI has a regular presence at the service and oversees service delivery. The manager told us they feel very well supported by the service provider. The RI provides regular 1:1 supervision to the manager. Quality assurance audits are completed, and actions identified in order to drive service improvement. The manager maintains daily oversight of the service and is hands on in their approach, helping out delivering care if required. Systems are in place to obtain the views and opinions of people, staff and visitors. Relatives we spoke with told us communication is good. The service provider holds award events recognising staff efforts and achievements.

Maintaining safe staffing numbers and the oversight of care delivery requires attention to ensure people receive the support they need. We reviewed staffing rotas over a five week period and found staffing levels are mostly maintained. But we identified seven night shifts when the service run below what the provider deems as safe staffing levels. The provider explained the issue was with short notice staff sickness, which they tried to obtain cover but were unable to. CIW are required to be notified of events such as these, but we had not been informed by the provider. We reviewed care records for two people who require regular repositioning due to a risk of skin breakdown. We found care is mostly delivered in a timely manner but found multiple delays in pressure relief being provided in line with assessed needs. Staff told us meeting people's needs can be difficult when staffing levels are decreased. We were told this means some people may have to wait for their care needs to be met. This is an area for improvement, and we expect the provider to take action.

Mechanisms are in place for safe staff recruitment, support and development. Staff files contain appropriate references as required and include the relevant identification. DBS information indicate the relevant checks have been completed. Employment histories are recorded, however reasons for leaving previous employment are not always verified where required. Training statistics indicate staff receive refresher training in key areas, such as manual handling, dementia, and safeguarding. New staff complete an induction programme and care staff are registered with Social Care Wales.

Clinical and care staff meetings are held to share information and keep staff informed. Staff feel supported in their role but they do not receive regular 1:1 supervision with their line manager. We reviewed supervision records for four staff and found that three out of the four had not received supervision every three months. Formal supervision in this sense relates to a documented one-to-one discussion between a member of staff and their line manager to ensure their professional competence is maintained. It enables staff to reflect on their practice, the home's philosophy of care, discuss any issues and identify development goals. This is an area for improvement, and we expect the provider to take action.

### 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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34	The service provider must ensure that at all times a sufficient number of suitably qualified, trained and competent staff are deployed to work at the service having regard to the care and support needs of the individuals	New
36	The service provider must ensure all staff receive appropriate supervision every three months	New
21	The service provider must ensure care and support is provided to each individual in accordance with the their personal plan	New

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**Date Published** 21/02/2024