

Renaissance@Malin Court Care Home Service

Malin Court
Maidens
GIRVAN
KA26 9PB

Telephone: 01655331457

Type of inspection:
Unannounced

Completed on:
20 March 2025

Service provided by:
Renaissance Care (No 9) Limited

Service provider number:
SP2021000048

Service no:
CS2021000079

About the service

Renaissance@Malin Court is registered to provide care for 32 older people. There were 32 people living in the home during the inspection.

The provider is Renaissance Care (No 9) Limited.

The home is located on the outskirts of the village of Maidens, South Ayrshire. All the bedroom accommodation has en suite shower and kitchen facilities. There is a mix of single and shared accommodation. The bedrooms offer views across the countryside and the Firth of Clyde coast. There is a choice of sitting rooms for people and their families to enjoy. The home boasts a large dining room, which is serviced by a hospitality team.

The home has well managed grounds and an internal courtyard area.

There is sufficient parking at the front of the home.

About the inspection

This was an unannounced inspection which took place on 18 and 19 March 2025, between the hours of 8:00 and 16:30. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with eight people using the service and nine of their family
- spoke with 14 staff and management
- observed practice and daily life
- reviewed documents
- spoke with three visiting professionals

Key messages

- Staff provided a homely, welcoming, and nurturing atmosphere and maintained positive relationships with people and their families.
- Staff cared for people with kindness and compassion.
- There are a variety of activities aimed at offering the people living in the service meaningful stimulation and connection.
- Leaders knew the strengths and areas for development of the service well and used effective quality assurance to drive good practice.
- People received reliable and consistent support from a familiar staff team with whom they had positive, trusting and caring relationships.
- Family members felt involved and well informed, telling us they were very satisfied with the standard of care and support provided.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff knew people well and understood how best to support them. Staff demonstrated skill, care and kindness when supporting people. They engaged with people with a calm and competent manner.

We saw very good examples of genuine, warm connections, which resulted in positive responses from people being supported. This increased people's sense of belonging.

Comments from relatives included:

"Excellent caring staff." "The team are so kind, friendly and caring. My loved one is treated with such warmth and care." "Medical care is excellent, minimising the need for hospital care, even with complex needs."

"My relative looks healthier every year, despite some serious health setbacks. The care really shows."

"My mum has thrived since coming into Malin court. I believe this is a result of the care and support given by staff who know and understand her needs." "We feel like we've got our mum back."

Mealtimes were supported by the hospitality team; they were well managed and created a pleasant sociable experience for residents. Staff understood the importance of supporting people to enjoy their meal without rushing. Staff showed that they were aware of people's food and drink preferences and their specific dietary needs.

People told us that "The food is excellent, there is always plenty of choice." "The food is excellent; I like fish which is served regularly." "I can't eat much now, so they make me smaller portions." "The food is always lovely." This helped support people's health needs through maintaining good nutrition and hydration.

There was a robust medication management system in place and close links with external health professionals. This helped to assure good support with the management of people's healthcare needs. We saw very positive outcomes for people based on the actions of staffs' knowledge and understanding.

There were a range of activities on offer. We saw evidence of both group and individual activities and trips out into the local community. The location of the service provided various opportunities to access the local community. People told us "i enjoyed the quiz today, there is always something on." "There's activities on every day; I can join in if I want." This supported people's health and wellbeing.

Families reported that staff made them welcome when they visited and that "I feel like I am visiting mum in her own home."

Relatives told us they were kept up to date with any changes and invited to attend reviews. This assisted in people maintaining important relationships.

We saw strong, cohesive team working across the home, this meant effective communication had a positive impact on people's outcomes.

Daily meetings with the heads of each department ensured a collaborative approach to residents needs focussing on their outcomes.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The service had very good quality assurance systems in place to monitor the standards across the service. There were a range of audits completed regularly and the actions from these informed the service improvement plan. There was a system in place to monitor completion of these actions which ensured positive outcomes for people were supported.

The service had implemented a self-evaluation tool and had an improvement plan in place. This ensured standards of good practice were adhered to and drove change and improvement where required.

The ethos within the care home informed the care and support provided and how people experienced this. These were regularly reviewed and reflected the involvement of people who live in the care home, their families and the staff.

Managers were hands on, monitoring interactions and outcomes. It was pleasing to see lessons learned being a focus within the team to drive improvements.

Relatives told us that the manager was visible and approachable. We also saw this, which ensured she had good oversight of people's health needs.

Leaders were aspirational, actively seeking to achieve the best possible outcome for people and this was shaped by people's views and outcomes. The home was welcoming, the manager had an open-door policy, and the availability of the management team meant families felt included. Relatives told us, "I am kept up to date with Mums care; they phone me or speak to me when in." "Staff and managers are very welcoming and accommodating." "I believe there is strong leadership in all aspects of the home."

Regular meetings took place to discuss resident outcomes and person-centred care. This gave staff the opportunity to share learning and develop their awareness and knowledge. Staff were able to adapt, or think creatively to meet people's needs, outcomes and wishes.

Observations of staffs practice were regularly undertaken to assess learning and competence. Staff told us that they felt supported and appreciated at Malin Court. We saw a culture of learning and investment in staffs' development. This meant residents could be confident that staff were well trained and competent in their role.

Staff also told us they enjoyed working at Malin Court and felt well supported.

Comments included:

"Malin court is a wonderful place to work and a lovely home to work in; the staff are all very good with the residents and support each one to their own needs."

"All senior staff are approachable; all staff in other departments are also good at working alongside the care/ nursing team."

"The team are great they all pull together when needed."

"It's a lovely home, great place to work, busy role but have enough staff."

"It's a great place to work, by far." "I'm not stressed, I feel appreciated and well supported."

Accidents and incidents were comprehensively recorded and audited to ensure that any lessons learned, or trends identified were actioned. This assisted in ensuring people were safe.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should ensure that medication is managed safely and in line with best practice guidance.

In order to do this, the provider should ensure the following:

- a) all staff involved in medication management undertake relevant training and competency assessments regarding safe medication management;
- b) formally assess the impact training has on staff practice to determine learning and understanding of their responsibilities to manage medication safely;
- c) medication prescribed to be given 'as needed' is managed in line with current best guidance;

and

- d) records detailing the administration of topical medication are accurate and up to date.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14). 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 21 December 2022.

Action taken since then

All staff involved in medication management had undertaken the relevant training regarding safe medication management. There was also evidence of regular competency assessments being completed. This meant that managers had assessed the impact training had on staff practice.

As required medication was managed safely with the addition of another tool to support staff checking in with residents.

We saw that records were fully completed with no gaps, this included T-Mars.

This area for improvement has been met.

Previous area for improvement 2

The provider should ensure that the actions identified following quality audits are verified to ensure that they have been completed. This will ensure that the quality assurance systems are being used effectively to drive improvement and have a positive impact on the outcomes for people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 21 December 2022.

Action taken since then

The manager was able to evidence action plans from each audit area. This meant we could be confident that quality assurance systems were being used effectively to drive improvement and had a positive impact on people's outcomes.

This area for improvement has been met.

Previous area for improvement 3

To support the principle of respect the provider should ensure that staff involved in developing care plans and recording care interventions undertake training such as Promoting Excellence Framework for Dementia Care learning and development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My human rights are protected and promoted, and I experience no discrimination' (HSCS 1.2). 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This area for improvement was made on 21 December 2022.

Action taken since then

All personal plans had been updated, using respectful language, detailing person-centred approaches. All staff who were involved in developing personal plans and recording care interventions had undertaken appropriate training to enhance their professionalism when recording sensitive information.

This area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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