

Marionville Court Care Home Service

3 Lochend Road South Edinburgh EH7 6BB

Telephone: 01316 528 160

Type of inspection:

Unannounced

Completed on:

30 July 2025

Service provided by:

City of Edinburgh Council

Service no: CS2007145240

Service provider number:

SP2003002576



Inspection report

About the service

Marionville Court Care Home is located in Edinburgh. Local shops and bus links are situated nearby. Edinburgh City council is the provider. The home can accommodate up to 60 adults over two floors. Each floor had three units supporting up to ten people and includes communal lounge and dining areas with a pantry kitchen, bedrooms were ensuite. Enclosed gardens to the rear provided outside space for people.

About the inspection

This was an unannounced inspection which took place on 23, 24, 25 July 2025. 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 15 people using the service and 5 of their family
- spoke with 14 staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with 3 visiting professionals

Key messages

- · People were supported by a staff team they knew.
- · People's health and wellbeing needs were being met by an integrated team.
- · People enjoyed a range of activities.

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 setting?	4 - 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.

People experienced care and support from a staff team they knew. The home used agency staff that were mostly known to the service. We observed positive, warm, kind interactions and conversations between people and staff. People we spoke to told us, 'staff are kind and caring' 'No complaints', 'I'm quite happy in my home'. This meant people experienced care and support from staff they knew well.

Personal plans illustrated peoples likes, dislikes and preferences and contained information about their life stories. These provided staff with knowledge of people's life and helped with meaningful conversations and promoted positive relationships. Personal plans also contained information relating to people's health and wellbeing. This included regular updates from the registered nurses that worked in the home. Where required risk assessments were completed, reviewed and evaluated regularly. Reviews involved people and family members. This meant people had a personal plan that was right for them.

People were encouraged to be independent, for those who needed support this was carried out in a sensitive way. Some people accessed the tea and coffee making facilities in the pantries. Others chose to go out for walks in the local community to maintain an active life and their independence. As a result of this people experienced care and support that was right for them.

We observed safe administration and storage of medications for people. Management undertook regular audits and staff received training that included competency checks. People could be confident they were safely supported and that medications were managed well.

Daily handovers at shift changes as well as a mid morning meeting brought the staff team together to discuss people's health and wellbeing. This included any planned healthcare appointments or new issues that needed to be addressed. In addition weekly head of department meetings were held. People could be assured that staff teams came together to help meet their health and wellbeing needs.

The home had benefitted from having registered nurses in the team. Staff recognised when people's condition changed and worked together to support them. In addition the local GP and a range of healthcare professionals visited when required. They provided advice and care to support people's health and wellbeing. People attended health screening and hospital appointments. Professionals we spoke to told us staff followed advice and sought appropriate support when needed for people. These approaches meant people benefitted from responsive care and support from staff and professionals who worked well together.

People came together at mealtimes with no sense of rush. Some people chose to eat in their rooms and have longer lies with later breakfasts. Menus displayed the daily choices, with alternatives available. A snack trolley each day included crisps, ice creams and ice lollies for people. In addition home made cakes were available each afternoon. Other snacks and fresh fruit were available in the pantry. People had access to water and juices in the communal spaces and their rooms. The kitchen team were aware of any specialised diets, allergies or specific preferences people had. Residents also provided feedback on the meals with a meeting to be planned to look at the autumn menu. This meant people were involved and able to choose when and where they had their meals each day.

The activity team supported people with a range of group or one to one activities. They were aware of what people enjoyed as people's preferences were recorded in their personal plans. People enjoyed coming together for bingo, dominoes, the men's club, gardening. Outings included attending local tea dances, cafes and the festival theatre which encouraged meaningful connections in the local and wider community. This meant people were involved in things that they enjoyed that met their preferences.

The home was clean, the housekeeping team had a regular cleaning schedule which they followed. Staff had access to the appropriate personal protective equipment (PPE). These approaches meant people could be confident guidance about infection prevention control was being followed to maintain their wellbeing.

How good is our setting?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

On entering the main foyer of the home staff offered a warm welcome. The ground floor provided access to secure garden areas from the large central light and airy communal space. This area was where people gathered to do group activities and enjoy the bar. The gardens had some seating people could use in good weather. Some parts of the gardens needed maintenance. The six units over the two floors accommodated up to ten people. This offered people the opportunity to live in a small group. Each unit had a lounge, dining area with a pantry and a quiet seating area situated at the end of the corridor. This meant people experienced a homely environment and were able to access indoor and outdoor spaces.

People's bedrooms had an en-suite including a shower. They had things that were precious and special to them, some had brought furniture from their home. The was enough space to meet with family and friends privately if they wished. As a result people were included and surrounded by things meaningful to them.

The maintenance team and external contractors completed regular monitoring and checks of the environment and the equipment that was in place to supports people's care. There was a range of specialised medical equipment to support people's changing needs. Staff received training to allow them to use this safely when supporting people. These approaches meant people experienced an environment that was maintained.

The home had recently replaced the seating in people's lounges with a plan for ongoing refurbishment of the home. People were able to provide feedback at their residents meetings. The housekeeping team had cleaning schedules for people's rooms as well as the communal spaces. We noted no intrusive noises or odours during the inspection. The laundry operated over seven days and was supported by the housekeeping team, new machines and dryers were due to be installed. This meant people experienced clean, tidy spaces that offered a range of soft furnishings to meet their needs.

Inspection report

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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.