Kingsmills Care Home
Care Home Service

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Inverness
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Telephone: 01463 240 555

Type of inspection:
Unannounced

Completed on:
8 May 2026

Service provided by:
Renaissance Care (No1) Limited

Service provider number:
SP2011011731

Service no:
CS2019378593

About the service

Kingsmills Care Home is a purpose-built facility for older people, located in a residential area of Inverness, close to the city centre, local amenities and transport links. The two-storey building is set within well maintained grounds.

Accommodation is available across both floors. Bedrooms are spacious and include en-suite facilities. Each floor features comfortable lounges and dining areas where residents can enjoy meals, socialise, or participate in group activities.

The home includes on-site laundry and kitchen facilities, with most meals freshly prepared daily. A hairdressing service is also available. Residents can access the garden and ground floor via an elevator.

The service is operated by Renaissance Care (No1) Limited, and provides residential and nursing care for up to 60 people. At the time of inspection, 55 people were living in the home.

About the inspection

This was an unannounced inspection which took place between 5 and 8 May 2026.

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 13 residents and 12 family members and reviewed 11 completed online surveys;
- Spoke with nine staff and reviewed 33 completed online surveys the management team;
- Observed practice and routine activities;
- Reviewed documents.

Key messages

- People experienced kind and compassionate care and support from skilled staff.
- Staff knew their individual needs, preferences, and routines well.
- People and families felt care and support was provided to a good standard.
- Some improvements were needed in people's mealtime experience.
- The provider should ensure there are effective 'early warning systems' in place to identify risks in the management and leadership of the service.

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?	4 - Good
How good is our leadership?	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? 4 - Good

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

Staff treated residents with compassion, dignity, and respect. We observed positive and trusting relationships between staff and people living at Kingsmills. It was evident that staff knew their individual needs, preferences, and routines well. People told us they enjoyed living in the home and were positive about how they were supported, for example;

- 'It is wonderful here staff are so helpful kind and polite, chatty'.
- 'Everyone is great here, I like them. They were good to me'.
- 'I am quite happy here'.

We spoke with families who said:

'I have never come across anyone who doesn't smile and chat, they do a wonderful job'.
'Staff are amazing, they go over and above to help the residents'.

Health assessments were in place for all residents, covering areas such as continence, mobility, nutrition, skin care, and falls prevention. Associated risk assessments were completed. They were reviewed regularly to ensure they were up to date.

We observed safe moving and handling practices by staff. There was effective monitoring of people's skin. This included support with regular position changes to prevent skin damage. These measures help ensure that residents' health and well-being needs are met safely and effectively. Where people had experienced skin breakdown the service had responded quickly to ensure any wounds were treated, based on good practice and evidence-based guidance.

We undertook a short observational framework for inspection (SOFI 2) during mealtimes which were relaxed and peaceful events, held in pleasant, spacious dining areas. Staff appeared confident in supporting people to eat well. People living in Kingsmills said the quality of the home cooked meals had improved. Where someone did not want to eat from a menu, they were offered an alternative. Plated options were made in advance to help to assist people living with dementia to choose what they would prefer to eat. All these measures meant people had access to a varied, well-balanced diet.

However, there were some areas for attention identified. For example, staff congregated at the end of the dining room with trays to take out to people who remained in their rooms. At the same time, there was limited conversation with people who were sitting at the tables waiting for their meal. It is also important to ask people if they are enjoying the food. Where people were living with dementia or reduced appetite, they may need reassurance throughout the meal to encourage a better nutritional intake. We have made an area for improvement to provide a focus on this area which will be followed up at the next inspection. **(See area for improvement 1).**

Jugs of water and juice were available in people's rooms and the communal areas, so that people could access refreshments independently. Where people were at risk of dehydration, they need additional support to ensure their fluid intake is sufficient. However, this was not consistently recorded in some cases. This

meant an individual may not reach their fluid intake goals over a period of time. This could lead to dehydration and poor health.

The service took immediate action to address this. However, we have made an area for improvement to make sure improvement is sustained. **(See area for improvement 2).**

To ensure that people's medical needs were met, there were strong and effective links with the local health service staff such as General Practitioner and specialist nurses. It was evident that staff were quick to highlight concerns. This provided confidence that everyone involved in people's care worked well together, especially if there was an unexpected event including end of life.

To support people's medical needs there was an effective medication system. Records confirmed that people were receiving their medication as prescribed. Staff completed training and undertook an annual competency assessment to ensure medication was administered by well-trained staff.

Areas for improvement

1. To promote well-being and a good nutritional intake, staff should support people who need help with eating and drinking in a person-centred way.

The provider should ensure that;
a) staff follow good practice guidance such as "Eating and drinking well in care: good practice guidance for older people" (Care Inspectorate);
b) where improvements are identified as a result of a mealtime observational exercise or feedback during a residents' meeting, action is taken to address the concern.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'If I need help with eating and drinking, this is carried out in a dignified way, and my personal preferences are respected'. (HSCS 1.34);
'People have time to support and care for me and to speak with me'. (HSCS 3.16)

2. To ensure prompt recognition and monitoring of people at risk of dehydration, the provider should ensure that;

a) treatment plans and tools, such as fluid intake records, relating to people at risk of dehydration, are completed regularly and consistently;
b) prompt action is taken where a person may not/has not met their 24-hour fluid intake goal.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'Any treatment or intervention that I experience is safe and effective'. (HSCS 1.24);
'I can enjoy unhurried snack and meal times in as relaxed an atmosphere as possible'. (HSCS 1.35).

How good is our leadership? 4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. For the purpose of this key question, we focused on quality assurance.

Earlier this year, senior management of Renaissance Care (No1) Limited had recently identified that the leadership and management of Kingsmills Care Home were performing below their expectations. This had been having a negative impact on staff and people who live in Kingsmills. Some families had lost confidence in how the home was run.

It was positive that senior managers responded quickly and effectively to this concern. Actions taken were supported by a robust action plan to monitor progress. Recent meetings with relatives had provided reassurance and families felt these were informative and helpful. Senior management worked closely with the Care Inspectorate throughout this period. All these measures provided assurance that effective action was being taken.

However, there had been a comparable situation in the past, despite having robust quality assurance systems to monitor management performance. We have therefore made an area for improvement to ensure additional measures are put in place to reduce the risk of reoccurrence in the future. **(See area for improvement 1).**

As a result of recent improvements in the home's leadership and management, feedback from relatives was positive overall. They felt reassured that any concerns raised would now be dealt with promptly and effectively by managers or staff and told us:

"I know I am listened to if I have any concerns. At the moment and going forward I hope to have no concerns".

"Since the manager returned to her role, she has been proactive in communicating with me about any matters I have raised and has followed up on all agreed actions".

Some people who lived in Kingsmills felt the service needed more staff to be able to provide responsive support. We saw staff responding quickly to people but there were some occasions when there appeared to be an absence of staff available. From the quality assurance records sampled, we saw that staffing levels had improved. The service was also in the process of recruiting more staff. Staffing levels were being constantly reviewed according to people's dependency levels. This process enabled the team to respond to people's changing support needs.

Staff were positive about current staffing levels and the support they were receiving and said;

"Teamwork has improved and staff feel more listened to. Communication is better and morale is much higher, which has had a positive impact on the care we provide".

The service had a detailed quality framework for management oversight and governance reporting, for example, monthly audits of the environment, people's dining experience, and staff practice. Nursing staff and team lead managers were actively involved in this process. Findings from these audits informed the service improvement plan which included plans to develop the garden and a 'sensory'/'comfort' room for people. This would also provide an area for families to use when a loved one was approaching end of life.

The manager had completed a comprehensive self-evaluation to identify strengths and areas for further

development. A number of environmental improvements had already taken place which has been viewed positively by everyone.

Moving forward, the provider is committed to building leadership capacity within Kingsmills, and senior management were continuing to support the manager. The management team had worked hard to address concerns over the past few weeks to good effect. We concluded that the management and staff team were well placed to make further progress to ensure Kingsmills provides a safe, caring, and responsive environment.

Areas for improvement

1. To ensure people benefit from a service which is well led and managed, the provider should ensure that effective 'early warning systems' are in place to identify risks to people's care and support.

This should include the use of monitoring trends over time to ensure that any areas requiring improvement are identified early and addressed promptly.

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);
'I use a service and organisation that are well led and managed'. (HSCS 4.23).

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

To ensure people's dignity and choices were consistently supported, the provider should ensure that;

a) people's preferred daily routines and preferences in relation to their personal presentation were documented in their plan of care;
b) staff remain mindful of and respect the dignity of residents;
c) staff document in daily notes when someone has declined support with personal grooming.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:
'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected'. (HSCS 1.23) .

This area for improvement was made on 29 August 2025.

Action taken since then
The service had made satisfactory progress to meet this area for improvement. People's preferred daily routines and preferences in relation to their personal presentation were documented in their plan of care. Staff treated residents with compassion, dignity, and respect. Where people declined personal care, this was documented.

The twice daily staff and manager 'huddle' provided an opportunity to review progress in meeting people's care needs during the day. The electronic care planning system had built in 'alerts' which highlighted people's preferences. For example, care staff could easily see an individual's preference for which clothes to wear.

We concluded the area for improvement had been met.

Previous area for improvement 2

In order to support good outcomes for people's health and wellbeing, the provider should ensure that staff were supported in their role through effective and regular meetings with their management team.

This should include implementing a formal process of professional support, through regular 1:1 meetings with their manager or supervisor. Outcomes from professional support and supervision meetings should inform future training for individuals and contribute to annual staff appraisals.

This is to ensure that care and support is consistent with 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).

This area for improvement was made on 29 August 2025.

Action taken since then

The service had made satisfactory progress to meet this area for improvement. Standard templates for supervision records, goal setting, and follow-up were now in place. Supervision leads had been identified and managers or senior staff were carrying out 1:1 meetings. Staff also benefited from one to one practice supervision sessions observed.

Their annual appraisal provided an opportunity to review and consider their future development. Staff talked positively about their supervision and felt supported to develop. Group supervision sessions continued to be held monthly. These sessions covered different areas of practice such as skin health and personal care.

We concluded the area for improvement had 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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