

Lammermuir House Care Home Service

Lammermuir House
East Links Road
Dunbar
EH42 1LT

Telephone: 01368 862999

Type of inspection:
Unannounced

Completed on:
6 November 2025

Service provided by:
Lammermuir House Care Limited

Service provider number:
SP2025000104

Service no:
CS2025000194

About the service

The service is a care home providing care and support for up to 48 older people, located in Dunbar, East Lothian. There were 43 people experiencing care with the service during the inspection. The care home was registered with the Care Inspectorate on 24 April 2025 and is provided by Alor Healthcare.

The service consists of four floors with single bedrooms, each with an en-suite toilet and wash hand basin. Bathrooms and shower rooms are available on most floors of the home. On the ground floor there are two lounges and a dining room. Some rooms have unobstructed views over the Firth of Forth. The service has its own car park and large garden.

About the inspection

This was an unannounced inspection which took place on 30 and 31 October 2025. The inspection was carried out by three inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included registration information, complaints received, intelligence gathered and information submitted by the service.

As the provider for this care home had changed in April 2025 we undertook a full inspection. Therefore, we evaluated how well people's health and wellbeing was supported and their personal plans, the setting, as well as the quality of staffing and management.

To inform our evaluation we:

- spoke with 11 people experiencing care, seven relatives and received five questionnaires
- spoke with eight staff and three managers and received 20 questionnaires
- contacted seven professionals working with the service and received two questionnaires
- observed daily life at the service
- observed how well care staff supported people
- considered the cleanliness and quality of the physical environment
- reviewed documents and electronic records.

Key messages

- Most people were satisfied with the quality of the care and support received.
- Staff interacted warmly and respectfully with people.
- A few people could not get out of bed as early as they wanted to. However, people experienced a consistent staff team who knew them well and we observed that staff worked in a positive and calm manner.
- Mealtimes were well staffed and snacks were available for people.
- Some refurbishments had taken place so that the communal areas were more welcoming and homely and more was planned.
- There were team meetings taking place, though face-to-face supervision and team meetings needed to occur regularly.
- People's personal plans were up to date though needed to focus more on people's outcomes.

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
How good is our staff team?	4 - Good
How good is our setting?	3 - Adequate
How well is our care and support planned?	3 - Adequate

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 the service as operating at a good level for this key question. There were several strengths with the care provided and how this supported positive outcomes for people.

Staff interacted warmly and respectfully with people and knew their history, routines and preferences. Staff would assist people who were anxious in a caring and calming way. When assisting people to move, staff interacted supportively and with encouragement. This meant people could build trusting relationships at the service.

People experiencing care said:

"I've been happy since I moved in. It's good."

"Better than I thought, takes a wee bit of getting used to."

"Staff attitude is generally very good, no complaints about anyone."

Relatives' comments included:

"You can see, as a team, they are really trying to improve the place."

"Home is well run and staff are professional and caring."

"My mum is very happy here."

Mealtimes were well staffed and people were not kept waiting for their meals or being rushed. Support with eating and drinking was undertaken in a dignified way. The service provided a variety of snacks and individual food and drink fortification for people who needed to put on weight.

Medication administration was organised with regular audits. Staff were seen to wear, use and dispose of personal protective equipment such as gloves and aprons in line with guidance. The service was recording care undertaken and monitoring people's health issues.

Activities staff were spending one-to-one time with people to chat or undertake an activity, this is especially important for people who spend a lot of time in their rooms, have advanced dementia or receive few visitors. There were a variety of group activities for people; a useful addition would be a daily activity which includes gentle exercise and stretching to assist people's mobility and flexibility. To improve further, the service needed to use their minibus on a weekly basis for outings. This will keep people stimulated, engaged with interests and connected to the community.

How good is our leadership?

4 - Good

We evaluated the service as operating at a good level for this key question. There were several strengths with the leadership and quality assurance.

The service needed to seek feedback from people experiencing support and their relatives with regular meetings, although people we spoke to considered that managers were accessible and responsive. The service was in the process of undertaking their first satisfaction survey for staff and will be extending this to people experiencing support and relatives. There was a quality newsletter produced and social media usage to support communication and feedback opportunities.

Any incidents were reported with actions on improvements where needed. Regular quality audits were

taking place, such as medication, dining experience and the environment. There was an improvement plan in place to assist the service to plan, make and measure improvement. This will ensure that there is a culture of continuous improvement for people experiencing support.

Professionals' working with the service commented that:

"Manager visible and always involved in resident reviews and care planning."

"Can have open and honest conversations with regards to all aspects of care."

How good is our staff team?

4 - Good

We evaluated the service as operating at a good level for this key question. There were several strengths with the staffing arrangements and staff support.

Staff recruitment processes were thorough. Essential staff training had been completed. Training sessions for building specific fire safety as well as moving and assisting people had a practical element included (as is good practice).

Team meetings were held to assist communicating with staff though minutes of meetings needed to record any actions agreed. The service needed to undertake more regular face-to-face supervision sessions with staff. Formal managerial observations of staff competence for different practice areas were not taking place (see area for improvement one). This is to ensure people experienced quality care and support based on relevant guidance and best practice.

Staffing arrangements had little agency staff being used, therefore care and support were consistent and stable. Care staff were busy; a few people could not get out of bed as early as they wanted to. The staff team knew people well and we observed that staff worked in a positive and calm manner. This ensured people benefited from a warm atmosphere because there were good working relationships.

Professionals' working with the service commented that:

"Staff are very patient focused and care very much about their wellbeing."

"Staff are busy when I visit but seem to be able to respond to people's needs."

"Staff are very helpful and friendly and knowledgeable with residents."

Areas for improvement

1. The service should ensure that staff are well led and managed.

In order to achieve this the service should undertake the following:

a) Management to undertake regular one to one supervision with staff including a written record and actions.

b) Management to undertake regular direct observations of staff regarding their practice. Direct observations to have a written record with any actions when issues arise.

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

'I have confidence in people because they are trained, competent and skilled, can reflect on their practice and follow the professional and organisational codes' (HSCS 3.14).

How good is our setting?

3 - Adequate

We evaluated the service as operating at an adequate level for this key question. There were a number of strengths and improvements needed with the quality of the physical environment and cleanliness.

Some refurbishments had taken place so that the communal areas were more welcoming and homely. Some renovations had taken place and this meant the amount of communal areas and bathrooms had increased. Communal dining space needed to increase which is important for socialising and to encourage some people to eat. More refurbishment and renovations were planned to ensure an environment that has been adapted, equipped and furnished to meet people's needs and wishes.

People's bedrooms and communal areas were clean and tidy. We observed and housekeeping staff reported that they had sufficient supplies. Equipment used to assist people to move was in good condition. There were arrangements in operation for maintenance of the premises and the equipment to ensure people are safe.

Relatives' comments included:

"Big improvements with decoration."

"You can visibly see things have improved every week that you come in."

Professionals' working with the service commented that:

"Environment needs work - mainly due to the age of the building. Bedrooms and bathrooms need updating. Recent improvements evident."

"Has been a massive difference recently, with new furnishings, decorations and new TVs."

How well is our care and support planned?

3 - Adequate

We evaluated the service as operating at an adequate level for this key question. There were a number of strengths and improvements needed with personal planning.

People's personal plans recorded each area of care, for example, communication, and were up to date but varied in the level of detail. There also needed to be more focus about what people consider is important to them and the related outcomes they wanted to achieve. The service was in the process of changing the personal plans so that the voice of the person is clearly reflected throughout the documentation.

Six monthly reviews of personal plans, as required by legislation, were taking place with supported people and their relatives. This was to make sure that everyone had the opportunity for their views to be heard.

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
1.1 People experience compassion, dignity and respect	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

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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