

Lorimer House Nursing Home Care Home Service

491 Lanark Road
Juniper Green
Edinburgh
EH14 5DQ

Telephone: 01314 422 123

Type of inspection:
Unannounced

Completed on:
15 August 2025

Service provided by:
Lorimer House Ltd

Service provider number:
SP2011011665

Service no:
CS2011299821

About the service

Lorimer House Nursing Home provides care for up to 37 older people and is owned by Lindemann Healthcare. Care is provided over 24 hours by a team of registered nurses, carers and support staff.

The home is situated in Juniper Green to the south west of Edinburgh. It is set back from the main road and by mature landscaped gardens with open views from the rear of the home to the Pentland Hills. Parking is available at the front within the care home grounds.

The original upgraded Edwardian building has been extended providing modern accommodation over two floors with access to the upper floors by lift. All residents have their own bedrooms with en-suite facilities and there are additional bathrooms on each floor. In the modern extension sitting/dining rooms are situated on each floor. There is a smaller additional sitting/dining area within the older part of the home from which there is easy access to an extensive south facing garden.

About the inspection

This was an unannounced inspection of the service which took place on 12 and 13 August 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 people using the service as well as feedback from relatives. We also spoke with management and staff, observed practice and daily life as well as reviewed a wide range of documents.

Key messages

- Staff were knowledgeable about peoples care needs and preferences, this resulted in people feeling confident in their care.
- There were good working relationships between management and staff.
- Support plans were person centred and reflected peoples individual needs, intended outcomes and associated risks.
- People benefitted from staffing levels that supported their care needs.
- People living in the nursing home and their families were very happy with the care and support delivered.

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
How good is our staff team?	5 - Very Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	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 made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Care and support was delivered with compassion, underpinned by warm, respectful relationships between staff and residents. Staff demonstrated a deep understanding of each individual's needs, preferences, and goals, enabling consistent, person-centred support. This fostered confidence among residents that their care was informed, responsive, and outcome-focused.

Residents were supported to make choices about how they spent their day, with no sense of being rushed. The activity coordinator facilitated a diverse programme of group and one-to-one activities, including outings beyond the home. Preferences were routinely gathered and respected, ensuring activities were meaningful and inclusive. Staff applied the principles of meaningful contact effectively, and both the manager and activity coordinator maintained oversight to ensure equitable participation.

The nursing and care team were skilled and knowledgeable, contributing to a very good management of residents' healthcare needs. Staff were familiar with the range of external healthcare professionals available and sought advice appropriately.

Medication administration was safe and effective, adhering to prescriber guidance. Daily nursing presence, robust audits, and regular competency assessments ensured staff administering medication were well-trained and confident in their practice.

Clinical oversight was strong, with regular health assessments and timely referrals to external practitioners such as dietitians and podiatrists. Personal plans were comprehensive, current, and reflective of residents' health and wellbeing needs, supporting consistent and informed care delivery.

Nutrition was well-managed, with kitchen and care staff working collaboratively to promote healthy intake and independence. Mealtimes were relaxed and dignified, with residents offered choices and supported appropriately. Management maintained clear oversight of nutritional needs, with targeted strategies in place for individuals at risk of malnutrition.

Through observations of staff during the inspection it was evident staff were an asset to the service, contributing significantly to its effectiveness.

How good is our leadership?

5 - Very Good

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

Leadership within the care home was consistently effective, proactive, and person-centred.

The manager demonstrated a clear commitment to high standards of care, fostering a culture of openness, accountability, and continuous improvement and was visible and approachable, ensuring staff felt supported and empowered in their roles.

Audits were in place covering all aspects of the service and evidence supporting compliance to guidance and policies within the home.

Regular supervision, training, and team meetings promoted professional development and reinforced shared values.

This strong leadership promoted a safe, compassionate, and well-organised environment where those supported had their wellbeing prioritised.

How good is our staff team?

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 staff team was well established and demonstrated strong collaboration, underpinned by respectful communication and positive working relationships. This contributed to a warm and supportive atmosphere within the service.

Individuals receiving care benefitted from consistent staff, with team members who knew them well and have developed meaningful, caring relationships. Staff were confident in their roles, worked cohesively, and appeared highly motivated. Feedback from families and people using the service was positive.

All staff had access to a comprehensive training programme, delivered through both online platforms and face-to-face sessions.

Staffing arrangements were guided by assessments of individual needs, regularly updated using the provider's dependency tool. During the inspection, staffing levels were observed to be sufficient, enabling staff to deliver compassionate care and engage in meaningful interactions with those they supported.

Regular supervision sessions, observations of practice, and staff meetings were in place to support continuous development and quality assurance.

Safe recruitment practices were clearly demonstrated. While the addition of dates on the recruitment checklist was recommended, all required documentation was present in the samples reviewed.

Staff induction processes were well evidenced, and all staff were appropriately registered with relevant professional bodies.

How good is our setting?

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 environment within the care home was of a very high standard, contributing positively to residents' wellbeing, safety, and comfort. The setting was warm, welcoming, and thoughtfully designed to promote independence, dignity, and inclusion. Communal areas were spacious, clean, and well-maintained, offering a homely atmosphere that encourages social interaction and relaxation.

Bedrooms were personalised and reflected individual preferences, helping people residing there feel a sense of ownership and belonging.

Infection prevention and control measures were robust and consistently applied, ensuring a safe and hygienic setting. Regular audits and maintenance checks were carried out to uphold high standards of cleanliness and safety.

Outdoor spaces were well-kept and easily accessible, providing opportunities for fresh air, physical activity, and meaningful engagement with nature. People were supported to use these areas regularly, contributing to their physical and emotional wellbeing.

The environment was continually reviewed and adapted in response to residents' changing needs and preferences. Feedback from residents, families, and staff was actively sought and used to inform improvements.

This commitment to a high-quality environment ensures that people living in the home experience a setting that is not only safe and functional, but also nurturing and empowering.

How well is our care and support planned?

5 - Very Good

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

All sampled support plans provided staff with clear, structured guidance on delivering individualized care and support. The documentation reviewed offered a comprehensive overview of each person's life history, values, preferences, and personal choices, ensuring that care was both person-centred and meaningful.

Individuals benefitted from personal plans that were routinely reviewed, evaluated, and updated in collaboration with relevant professionals. These plans reflected best practices and were tailored to each person's unique preferences and aspirations.

Support extended to end-of-life care, enabling individuals to live well through to the final stages of life. Plans clearly articulated what mattered most to each person, including their future wishes and preferred place of care in the event of illness, ensuring dignity and respect were upheld throughout.

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 make sure people's planned care reflects needs and things that are important to them they should be involved and central to planning care and support. The person should feel like they own the plan and decide who else can access it. This might include making access via a personal computer/tablet possible as well as paper copies.

1. Service reviews must be held at a minimum of six monthly intervals and they should have an evaluative focus, highlighting key outcomes derived for the care provided.
2. Review minutes should be routinely shared with key stakeholders.

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

'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2.17),

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS1.15),

'I receive and understand information and advice in a format or language that is right for me.' (HSCS 2.9),

'I am empowered and enabled to be as independent and as in control of my life as I want and can be.' (HSCS 2.2).

This area for improvement was made on 6 August 2021.

Action taken since then

Individuals receiving support, along with their families, are actively engaged in the decision-making process related to their planned care and support. Care plans are reviewed regularly every 6 to 8 weeks, or earlier if circumstances change. All relevant information within the plan is communicated appropriately and in accordance with best practices.

This area for improvement has been met.

Previous area for improvement 2

The service should develop protocols around managing stressed/distressed presentation and the administration of as required medication. These protocols should indicate preventative strategies and indicate the basis for when as required medication should be used.

The care plan should include but not be limited to the following:

- detailed guidance for staff around preventative approaches used prior to the administration of as required medication
- National Institute for Health and Care Excellence "Managing Medicines in Care Homes" 2014

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

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14),

'My human rights are central to the organisations that support and care for me.' (HSCS 4.1).

This area for improvement was made on 6 August 2021.

Action taken since then

Significant progress has been made in enhancing protocols for managing stress and distress-related behaviours. Care plans now incorporate clearly identified triggers and outline proactive strategies to be implemented prior to the use of 'as required' medication. These measures are thoroughly documented within the care plans and consistently reinforced through daily staff huddles to ensure continuity and shared understanding across the team.

This area for improvement has been met.

Previous area for improvement 3

In order to maintain a safe and infection free environment, the provider should continue to promote best practice around infection prevention and control, ensuring staff practice is consistent and follows national best practice guidance.

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24),

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11).

This area for improvement was made on 6 August 2021.

Action taken since then

Best practice guidelines are followed to maintain a safe and infection free environment. High quality care regarding an infection free environment is promoted and audits are in place to ensure staff are following the policies and procedures.

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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
2.4 Staff are led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.1 Staff have been recruited well	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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