

# Cumloden Manor Nursing Home Care Home Service

Cumloden Road  
Minnigaff  
Newton Stewart  
DG8 6AA

Telephone: 01671 403 903

**Type of inspection:**  
Unannounced

**Completed on:**  
14 November 2025

**Service provided by:**  
Cumloden Manor Nursing Home Ltd

**Service provider number:**  
SP2003002253

**Service no:**  
CS2003010886

## About the service

Cumloden Manor Nursing Home provides a care home service for up to 42 people, including a maximum of three places for adults with physical and sensory impairment and three of the places in the maximum of 42 may be used for short breaks/respite. The provider is Cumloden Private Nursing Home Limited.

The home is situated on the outskirts of Newton Stewart close to local amenities. It has 38 single and two double rooms. Five bedrooms are located on the upper floor; these are accessed by a passenger lift. All rooms have en-suite toilet and hand washing facilities, 27 rooms have en-suite showering facilities and there is two rooms with en-suite accessible showering facilities. There are some shared bathing facilities in the home however these are not fully accessible.

Communal lounges are available throughout the home along with a dining and kitchen area. There is an enclosed garden with seating, including a greenhouse for people using the service and a car park is available to visitors.

At the time of there were 41 people living at the service.

## About the inspection

This was an unannounced inspection which took place on 11 and 12 November 2025 between 07:30 and 17:00 hours. Feedback was provided on 12 November 2025. Following this, further discussion with the provider about securing an outdoor area took place which completed the inspection on 14 November 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 11 people using the service and three relatives
- for people unable to express their views, we observed interactions with staff and how they spent their time
- spoke with 13 staff and management
- reviewed 24 completed questionnaires (This included people using the service, relatives, staff and visiting professionals)
- observed practice and daily life; and
- reviewed documents.

## Key messages

- Staff delivered compassionate, person-centred care, creating a warm and respectful environment where people felt valued and safe.
- The service demonstrated strengths in supporting people's health and wellbeing.
- Daily recording and clinical oversight documentation should be improved.
- Opportunities for meaningful activity and social engagement should be increased and better promoted to people.
- Making outdoor areas secure and accessible, showering and bathing facilities should be increased.
- The service had met five of the six areas for improvement made at previous inspections.
- From the findings of this inspection, we have made five areas for improvements.

## 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 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?

4 - Good

### 1.1 People experience compassion, dignity and respect

### 1.2 People get the most out of life

### 1.3 People's health and wellbeing benefits from their care and support

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

People consistently experienced care delivered with compassion and respect. People and relatives described staff as "lovely and friendly" and said, "the amount of respect is amazing". We observed staff interactions that were warm and attentive, creating a calm, homely atmosphere. Personal plans included life history and preferences, supporting person-centred care. Health professionals confirmed staff escalated health concerns promptly, and relatives praised the cleanliness and décor in the home. This meant people felt valued, listened to, and confident their needs would be met.

Recording of how people's needs had been met should be improved. Where people preferred to spend their time in their room, observation and reporting of meaningful conversations, activities and interaction were at times limited. Lounge spaces were underused, and reliance on scheduled activities limited some interactions. Gaps in recording personal care tasks such as showers and oral care were noted. While we saw strong practice of the care being provided and people told us they get help when needed, this was not consistently documented. Without accurate records, the service cannot fully evidence the positive experiences people described. (See area for improvement 1)

People benefited from some opportunities to enjoy life through outings and classes, which supported their wellbeing and sense of purpose. People told us they enjoyed bus trips, theatre visits, and exercise classes, and families were supported to personalise rooms, creating meaningful connections. Suites with kitchen areas promoted independence, and residents reported enjoying jigsaws and dominoes with peers and staff. These experiences helped people maintain interests and positive relationships.

However, opportunities for meaningful connection and daily activities were limited and should be improved. At the time of inspection, there was no full-time activity coordinator, and in-house activities were not planned effectively or clearly advertised, which reduced participation. Communal areas were underused, increasing the risk of isolation for those who remained in their rooms. Reference should be made to the Care Inspectorate's "Care about Physical Activity (CAPA)" Programme and the Care Inspectorate's "Meaningful Connection - Supporting meaningful connection: good practice guidance for care homes". This would help promote regular, person-led engagement and improve wellbeing through everyday opportunities for connection. Improving the planning, visibility, and documentation of activities would help people stay socially connected, engaged and better facilitate friendships and informal group activities. (See area for improvement 2)

People's health needs were observed to be supported well. People told us they received help when needed and staff responded promptly. Relatives said they felt reassured by the support their loved one received for their health and wellbeing, describing the home as "a blessing." Improvement had been made to future care planning, stress and distress plans were in place, and external professionals confirmed health referrals were appropriate. These strengths contributed to people feeling safe and supported.

Medication and nutritional oversight should be improved. The service had identified recurring medication errors, and further work was needed to ensure these were reduced and managed effectively. Without effective oversight and prompt action, people could be at risk of harm and may not experience safe or positive outcomes. (See area for improvement 3)

Health professionals fed back positively on the escalation by the service to support people's health needs. However, evidence of clinical oversight could be strengthened. This should include but not be limited to information on legal arrangements, wound management and nutritional needs. This would ensure reduced risk for people's health needs and evidence the action that had been taken and outcomes for people. (See area for improvement 1)

Overall, people experienced warmth, kindness and respect in their care, and enjoyed positive relationships with staff. Strong practice supported people's wellbeing and safety, although improvements are needed in recording, activity planning and clinical oversight to ensure positive experiences are consistently evidenced and sustained.

### Areas for improvement

1. To support people's health, wellbeing and safety, the provider should improve the accuracy and consistency of clinical oversight and daily care records. This includes ensuring that clinical oversight and care needs are fully documented, and that systems for monitoring health needs being met are effective.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: "My care and support meets my needs and is right for me." (HSCS 1.19)

2. To support people's wellbeing and reduce the risk of isolation, the provider should improve the planning, visibility and documentation of daily activities and opportunities for meaningful connection. This includes ensuring that activities are well-organised, clearly communicated, and accessible to everyone, and that communal spaces are used effectively to promote social interaction and friendships.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: "I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors." (HSCS 1.25)

3. To promote safe and effective care, the provider should strengthen medication management and quality assurance processes. This includes ensuring robust systems are in place to prevent and reduce medication errors, supported by regular audits and trend analysis to identify and address recurring issues.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: "My care and support meets my needs and is right for me." (HSCS 1.19)

## How good is our setting?

## 4 - Good

### 4.1 People experience high quality facilities

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

The home benefited from a warm and welcoming atmosphere, which created a homely and inviting environment for people. Communal areas, including lounges and dining rooms, were clean, well decorated, and furnished with soft furnishings that contributed to a comfortable and relaxed setting. The main dining areas were used flexibly, helping to promote social interaction and enjoyment.

People's bedrooms were well sized and comfortable, with some rooms offering ensuite showering facilities. This supported people's privacy and dignity. Rooms were personalised to people's needs and preferences, with individual choices reflected in décor, photographs, and personal belongings.

While people had access to both baths and showers, accessibility was limited. The range of accessible bathing and showering options in en-suite and communal facilities should be improved to ensure everyone's preferences and needs are fully met. Equipment should be in place to support safe and dignified bathing and showering for all. (See area for improvement 1)

The outdoor area was well maintained, offering an attractive enclosed garden and accessible spaces for people to enjoy. Access was available from different parts of the building. While there was an enclosed garden, there was area in the grounds that gave access to a river, presenting a potential risk to people. Assurances were provided at the time of inspection that fencing would be erected as priority to keep people safe. (See area for improvement 2)

We found that the service had robust systems in place to maintain a clean and hygienic environment, which promoted people's health and wellbeing. Cleaning schedules were in place for both communal areas and individual bedrooms, and housekeeping staff demonstrated good knowledge of infection prevention and control practices. As a result, people could feel confident that their living environment was safe, comfortable, and supported their overall wellbeing.

The service demonstrated a proactive approach to maintaining a safe environment. Environmental checks and maintenance needs were taking place and being actioned. Suggestion was made to improve recording of this. For example, checking the working order of window restrictors and ensuring the maintenance needs and action taken were recorded more effectively. Contracts were in place with external companies for the servicing and maintenance of key equipment, and the manager maintained oversight of these arrangements. As a result, people could be reassured that the environment and equipment were safe, well maintained, and supported their comfort and wellbeing.

An environmental plan formed part of the service's development plan. However, it would be beneficial to have a more detailed environment plan that links ongoing work to timescales and completion. To support improvement the service should reference Best Practice guidance such as "The Kings Fund Tool" and the Care Inspectorates "Care Homes for Adults - The Design Guide". By taking these steps, people can experience a safe, comfortable, and better-adapted environment that continues to meet their needs and enhance their quality of life.

The environment supported people's comfort, safety, and wellbeing, enabling them to feel at home and maintain their independence. The strengths identified had a positive impact on people's daily experiences. Some areas for improvement were identified, particularly in relation to accessible bathing options, storage, and garden safety, and these should be addressed to further enhance outcomes for people.

## Areas for improvement

1. To support people's dignity, choice, and wellbeing, the provider should improve the range and accessibility of bathing and showering facilities in en-suite and communal facilities to ensure everyone's preferences and needs are fully met. This should include ensuring appropriate equipment is in place to support safe and dignified bathing and showering for all.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: "If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected." (HSCS 1.4)

2. To ensure people's safety and wellbeing, the provider should install secure fencing in all areas of the grounds to prevent access to the river. This will help reduce potential risks and ensure that outdoor spaces are safe and accessible for everyone living in the home.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state: "My environment is secure and safe." (HSCS 5.17)

## 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 service provider and manager should continue to ensure robust quality assurance systems are used effectively. This should include: regular audit of key areas such as IPC practice, personal plans, medication, dementia care. Monitoring of health and safety checks, staff training and supervision. Feedback from people experiencing care and their relatives.

This is to ensure care and support is consistent with Health and Social Care Standards which state that: "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 3 October 2024.**

#### Action taken since then

We found that the service had made good progress in strengthening its quality assurance systems. There was increased delegation within the team, with clear plans and oversight of quality assurance activities. The manager and senior staff regularly audited key areas, including IPC, care plans, and medication, with monthly audits available and completed. A wide range of audits were undertaken, and oversight was in place for staff supervision and training dates. Surveys were carried out in July with residents, relatives, and professionals, and an action plan was developed in response to resident feedback. While analysis of audit findings and recording of actions taken could be further strengthened, the systems in place were effective in identifying areas for improvement and supporting ongoing development.

This area for improvement has been met.

#### Previous area for improvement 2

The service provider needs to ensure the manager of the care home is supported and able to navigate their roles and responsibilities as well as being able to provide some element of nursing cover. Although, this cannot be sustained over long period of time or made a consistent expectation. The provider needs to recruit suitable nursing staff to support the manager to run the home.



This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed". (HSCS 4.23)

**This area for improvement was made on 3 October 2024.**

#### Action taken since then

We found that the manager continued to provide nursing cover one day per week, which at times reduced their availability for management duties during the day. People experiencing care, relatives and staff told us they felt well supported by the manager. It remains important for the provider to monitor this arrangement and adapt as service needs change. As a result, this area for improvement has been met, but ongoing attention is required to ensure the manager is fully supported and nursing cover is sustainable.

This area for improvement has been met.

#### Previous area for improvement 3

The provider needs to ensure that all necessary servicing and maintenance checks are carried out by appropriately qualified people. This should also include the organisation of this information to ensure these are kept up to date and easily accessible. The provider should review the maintenance role as the size of this care home requires full time support to ensure these important requirements are maintained.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment" (HSCS 5.22) and "My environment is secure and safe". (HSCS 5.17)

**This area for improvement was made on 3 October 2024.**

#### Action taken since then

We found that the service had made effective improvements in this area. Two maintenance staff were in place, which was appropriate for the size and needs of the home. All required safety certificates and inspection records were up to date and stored in an accessible folder. A maintenance log was in place, although there was scope for it to be used more effectively to record actions taken. Overall, the systems and staffing arrangements ensured that the environment was safe, well maintained, and met the needs of people living in the home.

This area of improvement has been met.

#### Previous area for improvement 4

The service provider should:

- Improve the content of personal plans to provide greater detail on personal preferences for all aspects of care and support. Include life story, people who are important consider one page profiles for ease of reference.
- Demonstrate clear involvement of people experiencing care and/or their representative in the personal plan process. Ensure changes to care have been reviewed and choices provided. Review the use of anticipatory care plans, include thresholds of care and individual preferences. Carry out regular personal plan audit to check for completion and quality. Ensure language used to describe people is positive and not detracting so people are valued.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "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 3 October 2024.**

## Action taken since then

We found that the service had made progress in improving personal plans. Audits were being carried out regularly and were effective in identifying actions for improvement, although further analysis of audit findings would help to identify themes and trends. Personal plans now contained good detail on people's personal preferences, life stories, and those who are important to them, with one-page profiles holding key information for ease of reference. Reviews of personal plans were taking place with clear involvement of people experiencing care and, where appropriate, their representatives. Future care planning was evident, with additional documents being implemented for all.

This area of improvement has been met.

## Previous area for improvement 5

So people get the most out of life the service provider should provide people with opportunities for activity and stimulation that are matched with their interests and preferences consider how people who are currently in bed can be given options of supportive seating which allows time up and opportunities for stimulation consider how the use of space can be altered to provide better for people's differing needs. e.g. use of lounges, small quiet unit, areas of smaller group living, more accessible bathrooms/ en-suite facilities ensure safer access to outdoor space, by the erecting a fence to protect people from accessing the river.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: "If I live in a care home the premises are designed and organised so that I can experience small group living, including access to a kitchen, where possible". (HSCS 5.7)

**This area for improvement was made on 15 March 2022.**

## Action taken since then

A fence has been installed in the enclosed garden, which had improved safety; however, fencing at the rear of the garden still allows access to the river, presenting a continued risk if people were to leave the home unsupervised. The service is currently in process of trying to recruit a full-time activity coordinator. While there are no reported issues with seating, and some group and individual activities are available, the range and consistency of opportunities for all people, remain limited. As a result, this area for improvement has not been met and will be re-written to provide more specific guidance for further improvement.

This area for improvement is no longer in place. New reworded Areas for improvement have been made under "How well do we support people's wellbeing?" and "How good is our setting?"

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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