

Dryfemount Care Home Care Home Service

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Lockerbie
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Telephone: 01576 203 013

Type of inspection:
Unannounced

Completed on:
10 February 2026

Service provided by:
Horizon Healthcare Ltd

Service provider number:
SP2003002537

Service no:
CS2003010839

About the service

Dryfemount Care Home is registered for 31 older people. This includes two places for respite care/short breaks. The provider is Horizon Healthcare Ltd.

Dryfemount Care Home is a large period property close to Lockerbie town centre. It provides accommodation over two floors connected by a passenger lift. There is a lounge, dining room and a hairdresser's facility on the ground floor. On the first floor there is a large sitting/dining room with kitchen facilities.

There are 30 bedrooms in the home. Twenty five bedrooms have en-suite wet room shower and toilet facilities. Five bedrooms have wash basin facilities. There is an adapted bathroom on the first floor with a bath aid and spacious wet floor shower on the ground floor. There is a well-designed garden with raised beds and animals to create outdoor interest. There is a car park for visitors.

There were 29 people using the service at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 9 and 10 February 2026 between 07:15 and 16:15. Feedback was provided on 10 February 2026. 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, for people unable to express their views, we observed interactions with staff and how they spent their time
- spoke with two relatives
- spoke with 12 staff and management
- spoke with one health professional
- reviewed 52 completed questionnaires (this included feedback from people receiving care, relatives, staff and professionals)
- observed practice and daily life
- reviewed documents.

Key messages

- People felt safe, comfortable and reassured due to the warm, respectful interactions and strong relationships staff built with them.
- Staff responded promptly to changes in people's health, working effectively with external professionals to ensure coordinated, timely care.
- Relatives expressed confidence in the care provided, highlighting the warm approach of staff and the positive difference this made to their family members' daily experience.
- Medication was managed safely overall, though improvements to 'as required' recording are needed to support consistent, informed decision making.
- People benefited from meaningful social opportunities, though increasing engagement outside planned activities would help reduce loneliness for some.
- Care records should have more consistent detail to ensure planned care is clearly evidenced and supports personalised, effective practice.
- The service had met one of the two areas for improvement identified at previous inspections.
- We have made two areas for improvement as a result of this inspection.

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

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| 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

Quality indicator 1.3: People's health and wellbeing benefits from their care and support

We made an evaluation of good for this key question, as several important strengths outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

People experienced positive, compassionate relationships with staff. Feedback consistently described staff as kind, caring and responsive, helping people feel valued and listened to. One person told us, "Staff always do what they can and they listen to me," and another said, "From my perspective, they couldn't do any more." These views reflected strong, trusting relationships that supported people's wellbeing.

Our observations, along with feedback from relatives and visiting professionals, showed that staff were warm, respectful, and understood people's needs well. There was clear rapport which helped people feel comfortable and reassured. A relative told us their family member "loves living at Dryfemount, and is enjoying being looked after," and another shared, "Staff are so friendly and make me feel part of the home atmosphere when I visit." These experiences demonstrated the positive impact of consistent, person centred care within the home.

People experienced timely and effective support when their health needs changed. Referral pathways worked well, with regular input from community nurses, ANPs and other professionals, and people told us they received prompt help when unwell. Professionals highlighted strong partnership working, telling us, "The care team are outstanding. They have a holistic approach and person centred to each individual." People living with diabetes were supported, though some plans required clearer guidance, which the service was addressing with health partners. Recent dietetic referrals demonstrated that concerns were acted on quickly, helping ensure people received coordinated care that reduced the risk of avoidable deterioration.

Medication was managed safely and effectively. Medication Administration Records were consistently completed to a high standard, demonstrating robust routines. People benefited from receiving medication at times that suited their preferences, supporting their wellbeing and autonomy. Medicines were stored securely in people's rooms, reducing risk. While protocols existed for as required medication, the reason for administration and its effectiveness were not always recorded. This helps ensure people receive medication only when needed and that it is working as intended. (See area for improvement 1)

Staff knew people well and responded with warmth and reassurance, which helped reduce stress or distress. External professionals also recognised the positive relationships in place. However, personal plans did not always include the level of personalised detail needed to guide effective approaches. While most plans identified potential triggers, some strategies were broad rather than individualised. Improving recording, alongside input from external health teams, will support more accurate assessment and ensure responses remain consistently effective. As a result, people will benefit from tailored support that reduces distress more quickly and enhances their comfort and wellbeing.

People benefited from meaningful opportunities for social connection, supported by warm and reassuring interactions. Daily activities, weekly outings and café days open to the public helped people stay engaged, and activity boards promoted awareness of what was available. Last year's 'Wish Tree' enabled people to enjoy experiences such as days at the races, walking barefoot on grass and seeing the night lights at the Forth Road Bridge. Some people told us they sometimes felt lonely or bored, and some staff said they could feel rushed, which may limit one to one time. The manager's daily presence supported meaningful engagement and will help identify where further opportunities are needed, particularly for people who prefer spending time in their rooms.

Recording of people's care needs should be improved. Although people told us their health and wellbeing needs were being met, documentation for postural changes, dietary needs and personal care required more consistency. Most people did not need intensive monitoring and many maintained stable health, but where formal monitoring was required, records were inconsistent, meaning we could not fully evidence that all planned care occurred as scheduled. Improving accuracy will help ensure people consistently receive the care they need and provide clearer assurance that important aspects of daily support are not being missed. These improvements will build on the strong foundations already in place and further enhance people's health and wellbeing. (See area for improvement 2)

Areas for improvement

1. To promote people's safety and wellbeing, the provider should improve the recording of as required (PRN) medication. This should include staff clearly documenting the reason medication is administered and evaluating and recording its effectiveness. This will support safe decision making and ensure outcomes for people are monitored and understood.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: "Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)

2. To support people's wellbeing and ensure their care is delivered as planned, the provider should improve the accuracy and consistency of recording daily care needs. This should include, but is not limited to, clear and timely documentation of dietary needs, postural changes and personal care needs.

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) and "I experience high quality care and support because people have the necessary information and resources". (HSCS 4.27)

How good is our setting?

4 - Good

Quality indicator 4.1: People experience high quality facilities

Quality indicator 4.2: The setting promotes people's independence

We made an evaluation of good for this key question, as several important strengths outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

People benefited from a warm, comfortable and homely environment that supported their sense of belonging and wellbeing. Bedrooms reflected individual preferences through personalised décor and belongings, helping people feel at home. Communal areas were clean, well maintained and welcoming, and people could choose quieter spaces, spend time in their own rooms, or enjoy the secure garden. Involvement in choosing décor and themes for shared spaces further enhanced people's sense of ownership and identity within the home. These features helped ensure people experienced care in an environment that felt safe, personalised and supportive of their independence.

People's rooms and outdoor views, including bird feeders and ornaments, supported familiarity and comfort. A variety of communal areas such as lounges, dining and kitchen spaces, hydration stations, the snack shop and the well used secure garden offered appealing places for people to spend time. The outdoor space remained a popular feature in better weather, with sheltered seating, a herb garden, pet ducks and the barbeque and pizza oven contributing to a relaxed atmosphere. While many people used these areas regularly, some may benefit from further encouragement to enjoy shared spaces and increase opportunities for social engagement.

Maintenance and safety checks were well managed in the home. Safety checks were up to date, and the daily maintenance system supported timely action when issues were identified. Fire safety arrangements were robust, with regular testing, evacuation drills and external assessments showing no material concerns. Kitchen safety checks and environmental inspections were completed consistently, providing assurance around food safety. The environment was clean, fresh and well maintained, with effective housekeeping, clear cleaning records and equipment audits. This helped ensure people lived in a safe, comfortable environment where potential risks were identified early and addressed before they could impact people's wellbeing.

Most ensuite rooms promoted privacy and independence, although five rooms remained with hand washing sink facilities only, meaning people who preferred to bathe, or shower may need to use facilities on other floors. While the listed building limited structural changes, the provider continued to explore options with external partners to address this. People told us they received help when needed and call alert systems supported prompt responses. People could move freely throughout the home, although one downstairs lounge remained underused. With improved ambience there was potential for this space to support greater social interaction, especially as some people reported feeling lonely or bored at times.

There was wayfinding signage throughout the home however there was areas that could be improved. Some doors lacked signage and one person told us they had difficulty finding their room. Enhancing personalised signage and dementia friendly cues consistently throughout the home would better support orientation and confidence. (See area for improvement 1)

The service had environmental needs incorporated into the services improvement plan. This was informed by people's preferences, with decoration themes such as Clydesdale horses and stags chosen by residents for communal areas. The service addressed environmental needs in a timely manner with a minimal number of highlighted areas of improvement outstanding. A recent Kings Fund dementia audit highlighted strengths and areas where environmental adjustments could further support people, and future audits would benefit from clearer explanations where standards were only partly met. This will help ensure the environment continues to evolve in ways that support people's comfort, orientation and independence, and reflects what matters most to them.

Areas for improvement

1. To support people's independence, confidence and orientation within the home, the provider should ensure that wayfinding signage is consistent and clearly displayed throughout the environment. This includes ensuring signs are easy to understand, accessible, and placed in a way that enables people to move safely and independently around the home.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state: "I can independently access the parts of the premises I use and the environment has been designed to promote this". (HSCS 5.11)

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 keep people safe and promote their wellbeing, the provider should improve the recording of the administration of as required medication and the timing of postural changes. This includes the use protocols to guide staff and the recording of the impact of any administered as required medication.

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)

This area for improvement was made on 16 December 2024.

Action taken since then

Protocols were in place for as required medication, however there was inconsistent recording to document the reason for administration or evaluating its effectiveness. Daily care records, including the required positional changes people need, showed gaps over several samples. This could indicate the planned support was not reliably delivered.

This area for improvement is no longer in place. Reworded areas for improvement have been made under "How well do we support people's health and wellbeing?"

Previous area for improvement 2

To promote people's safety the provider should carry out a review of lighting to eliminate the dark areas within the corridors.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that "My environment is secure and safe". (HSCS 5.19)

This area for improvement was made on 16 December 2024.

Action taken since then

A review of the corridor lighting was carried out, and adequate lighting was put in place to remove the previously identified dark areas. This improvement helped promote people's safety and supported a safer environment within the home.

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

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| 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 setting? | 4 - Good |
| 4.1 People experience high quality facilities | 4 - Good |
| 4.2 The setting promotes people's independence | 4 - Good |

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