

## Bellfield Home Care Home Service

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Telephone: 01330 822 692

**Type of inspection:**  
Unannounced

**Completed on:**  
15 October 2025

**Service provided by:**  
Church of Scotland Trading as  
Crossreach

**Service provider number:**  
SP2004005785

**Service no:**  
CS2003000267

## About the service

The service is owned and managed by the Church of Scotland trading as Crossreach to provide a care service to a maximum of 34 older people.

Bellfield Home is a traditionally built home set in its own grounds in the centre of Banchory, Aberdeenshire. The home has lounge areas, a conservatory, and a large paved outdoor seating area to the rear of the building overlooking the hills. The paved garden area is fully enclosed with a variety of raised flower beds and planters. A summer house to the side of the front of the building can be used as a café or sitting area for residents and their families.

## About the inspection

This was an unannounced inspection which took place on 14 and 15 October 2025. The inspection was carried out by two inspectors 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 nine people using the service and three of their relatives
- spoke with 11 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

The home was welcoming and homely and people told us they were happy living in Bellfield Home.

Staff supervision had improved and staff told us they felt supported by managers.

People were receiving regular reviews and felt involved in their care.

The service had improved on notifying significant events to the required regulatory bodies.

## 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 setting?	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 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.

People told us they were happy living in the home and told us the staff were responsive to their needs. One person said, 'I'm quite happy to live here it's a friendly atmosphere'. During our visit staff provided discrete and respectful care, responding to people who appeared anxious or unsure. One person told us, 'I am feeling lonely' and at this time staff promptly provided reassurance and encouragement for them to seek out company. As a result, people were experiencing care that was right for them, at the right time.

The staff had created a warm, welcoming atmosphere in the home. Families who visited regularly, confirmed they were always made to feel welcome. This helped to support meaningful connections for people who lived there.

People looked healthy and well. Attention was taken to help people look their best, for example, with jewellery on and hair attended to. One person told us, 'They wrap you in kindness here'. This meant people were being supported in a nurturing and caring environment.

People told us that communication from the home was good, and that they were kept informed of any changes in their loved ones. Regular meetings had taken place and relatives told us of more informal, social events such as afternoon teas, which they could come along to and find out what's happening in the service and discuss any issues. As a result, people felt involved in the overall development of the home.

There was a system for administration of medications in place. Protocols were in place for the use of 'as required' (PRN) medication. People would however, benefit from staff recording the outcome of administering their PRN medications to ensure this remained effective. There were regular medication audits being completed to identify any issues. As a result, people could be reassured that medication was available and administered safely.

Mealtimes felt relaxed and at the right pace for people. Meals looked and smelt appetising. The dining room was bright and there was a lively atmosphere with people eating and chatting together. People told us, 'I always get a choice. People get different things like boiled eggs or cheese on toast' and 'The food is good, very wholesome, there is usually always something on the menu that I like but I would just ask if I wanted something different.' People were therefore having positive, mealtime experiences, which kept them nutritionally well.

A range of assessments were in place and reviewed regularly. For example, nutritional assessments and skin assessments monitored people's conditions, and this helped people maintain good overall health. The home had established links and relationships with visiting professionals who spoke positively about the staff and the home.

Care plans viewed were detailed with people's needs, choices and how to support them best. Some entries on the daily notes described what people had achieved each day. However, some entries were often focussed on tasks and did not offer evaluative information. One person's care documentation used inappropriate wording to describe the condition of the skin. Documentation around progress of this condition was confusing, as it was not recorded consistently in the same place. We discussed this with managers who assured us they would take prompt action to rectify the situation, and will follow this up at our next inspection.

Recording of accidents and incidents was consistent, with good management oversight. Forms sampled at the time of inspection, evidenced that certain events were reported appropriately, in line with the current guidance. Post falls recordings and observations were good and consistent to ensure all measures were in place to reduce risk for people. This had improved since our last visit.

There was a variety of different activities for people to enjoy in the home. During our visit there was an exercise class in progress, which was well attended with good engagement from people. People had fun at the Halloween bingo in the afternoon. We were told, 'The therapy ponies are coming in this week' and 'I go out to Aberdeen for fish and chips sometimes'. People were accessing the garden for a walk and sitting reading in the quiet outdoor seating areas. Staff told us they had time to sit and spend time with residents for a chat, or go for a walk. People were encouraged to move more and keep active, which benefitted their overall wellbeing.

The home was visibly clean and tidy with cleaning protocols in place and no intrusive odours. Infection prevention control (IPC) stations were available for staff throughout the home and used appropriately. People were confident that they were being cared for in a clean and healthy environment.

## 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 in the home was welcoming and felt relaxed and calm. All areas of the home were very clean and tidy with no intrusive noises or smells evident.

The building was bright and spacious. One person commented, 'I love my room. I have space for this sitting area when people come to visit'. People's rooms were personalised with items and furniture from home, which made for a more comfortable, homely experience.

Ensuite bathrooms were generally clean, however, some were cluttered, which presented potential hazards for people attempting to use them. Toiletries were evident on the backs of toilets rather than in wipeable drawer units already in use. We discussed this with manager who took prompt action to rectify this. We will follow this up at our next inspection.

The home benefitted from a variety of different areas for people to enjoy. Well decorated lounges and a large dining room were being well used, and felt like pleasant, social spaces. People were encouraged to join in and make use of all areas of the home. Staff respected the need for privacy where people wished to spend time in their rooms. People told us, 'There's company in here, everyone is friendly. I go down for meals'. People's choices of where to spend time was seen as important and therefore respected.

A robust process for maintenance was in place, and all required checks were completed and up to date. There was a process in place for staff to report any faults and these had been picked up and resolved quickly. People felt reassured that the maintenance of the service was upkept in order to maintain their safety.

The home benefitted from an enclosed garden area, which was on the one level and paved. Seating areas were available for people to spend time. We were told, 'It's been quite pleasant this year sitting in garden'. People benefitted from accessing fresh air whenever they chose to do so.

People told us that they did get out and about. One person told us they like to go out to the hairdresser. Others told us of frequent trips out to various local shops and cafes with families and friends. The home was at the heart of the community and well placed for people to access local amenities easily, which families told us was a benefit.

## 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 that people benefit from care and support that meets their needs and personal outcomes, the provider should ensure that care and support is reviewed with the person and their family at least every six months, including a record of the discussion and actions taken.

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

'My care and support meets my needs and is right for me' (HSCS 1.19).

**This area for improvement was made on 12 December 2024.**

#### Action taken since then

Managers had a planner in place to keep track of all reviews for people and therefore oversight of all regulatory reviews had improved.

Relatives told us they had been invited to and present at reviews and felt involved with their loved ones care.

People had a record of their reviews in their care files which reflected their views and any required actions.

This area for improvement has been met.

#### Previous area for improvement 2

The Provider should ensure that all notifiable incidents are reported to the Care Inspectorate as per the guidance 'Records all services excluding childminders must keep and notification reporting guidance'.

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

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

**This area for improvement was made on 12 December 2024.**

#### Action taken since then

Notifications of significant events had improved since our last inspection.

A review of all accident and incidents recorded in the service, evidenced that they had notified the regulatory body appropriately and timeously.

Accidents and incidents had been recorded and followed up well and notified in line with current guidance.

This area for improvement has been met.

## Previous area for improvement 3

To promote best practice, good conduct, and support staff to continuously improve their performance, the provider should ensure that systems are in place which allow supervisors and supervisees time to prepare for and take part in meaningful supervision sessions.

This is to ensure that care and support is consistent with the 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 is to ensure support is consistent with the Scottish Social Services Council (SSSC) Codes of practice for Social Service workers and Employers 2016, which state as an employer you will: 3.5 - 'Provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice'.

**This area for improvement was made on 12 December 2024.**

### Action taken since then

Supervision for staff had improved since our last visit.

Managers did state that there was still room for improvement with this, however had a plan in place to move this forward.

All supervisors had flash cards issued with their nominated supervisees and required timescale to complete supervision. This kept senior staff on track.

The manager was in discussions with senior management regarding the current frequency of three monthly supervision as stated in the service policy, as this was at times, hard to achieve.

Staff told us that they received regular supervision and found this meaningful.

Staff felt well supported and told us of the open-door policy operating in the home whereby they could talk to managers at any time.

Staff practice at time of inspection was good.

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](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

  

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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