

Bellfield Centre Care Home Service

Stirling Health and Care Village Livilands Stirling FK8 2AU

Telephone: 01786 444 852

Type of inspection:

Unannounced

Completed on:

14 November 2025

Service provided by:

Stirling Council

Service no:

CS2018367283

Service provider number:

SP2003002689



Inspection report

About the service

This service has been registered with the Care Inspectorate since 23 November 2018. The service provider is Stirling Council.

The Bellfield Centre is part of the Stirling Health and Care Village. The village provides a campus of services which brings together a range of health, social care, community and voluntary organisations. The service is divided into small units that are led and supported by social care and health staff.

The service is registered to provide assessments with rehabilitation support on a short stay basis. Support can be provided for a maximum of 68 people, most of whom will be older people.

About the inspection

This was an unannounced inspection which took place on 11 to 14 November 2025. The inspection was carried out by two inspectors from the Care Inspectorate, supported by an inspection volunteer. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service and their families and gather their views.

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 to 20 people using the service and received feedback from seven of their family representatives;
- spoke with and received feedback from 27 staff and management;
- observed practice and daily life;
- · reviewed documents;
- received feedback from nine visiting professionals.

Key messages

People were supported by a range of health and social care staff who were kind, respectful and knew them very well. The service had a very good oversight of people's health and care needs and using this information, supported people to receive the right support at the right time and ultimately return home sooner. The environment was spacious and bright but needed a plan to improve some elements such as areas of interest and access to outdoor spaces.

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?	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?

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.

Staff knew people well, relationships were warm, interactions very kind and staff were attentive and caring. There appeared to be enough staff to meet people's health and wellbeing needs and during our observations staff has time to chat to people and all call bells were answered very quickly.

People could be confident that they received the right support at the right time because the service had a very good oversight of peoples current health needs and most plans were robustly reviewed as needs changed. The overall approach to audit, evaluation and review focussed on improved outcomes for people and meant that their time in the service was shorter and many people returned home at the earliest opportunity.

Mealtimes were interactive and considerate, where staff were immediately accommodating to peoples requests and preferences. When people were at risk of malnutrition or had specific dietary needs, staff were knowledgeable in nutritional information and sought specialist advice when appropriate.

Where people needed support with medication they could be assured that this was managed well. Although there had been some recent recorded errors with medication, there was a robust and systematic approach to risk reduction and support to staff about continuous improvement in practice.

Regular meetings with a range of professionals were pro-active focussing on supporting people to live as independently as possible, and taking into account their unique circumstances, preferences and wishes. The focussed discussions also took into account important factors such as carer involvement, carer stress and risk taking. All of the staff were working well together to ensure the best outcomes for people.

How good is our setting?

4 - Good

We evaluated this key question overall as good where several strengths impacted positively on outcomes for people and clearly outweighed any areas for improvement.

The home was spacious, light and bright with good natural light and use of colour to support this with wide corridors with rails to support people if needed. The environment was well maintained, regular checks were up to date with support from external professionals and people were kept safe. The home was clean and fresh and the team followed best practice guidance to meet infection prevention and control standards. There were a few areas that needed attention to cleaning and the service responded quickly to address these during the inspection.

Although the building was bright we found that some areas were not always well ventilated and people did not always have access to fresh air. When we asked people about the care home most said it was comfortable and homely but people spoke about needing quiet space and getting outside more.

There were many areas for people to sit and chat and bedrooms were clean, nicely furnished and comfortable, with appropriate seating. People did not have the same comfort in some of the communal spaces which were cluttered and access was quite restricted. Corridors also had a lot of clutter and it was

difficult to differentiate between the home environment and staff clinical areas. Orientation needed some attention. Important places such as people's individual rooms were signposted and clear to find but other signage, for example, for toilets, was difficult to see because there was lots of information posted around the signage. Most rooms and communal areas had information about the day and time but because these were not routinely checked, most were displaying different information and had incorrect day, month and time.

Out with the individual units, people had access to community resources and the recent café addition supported people to experience community life. Other areas, however had been repurposed for staff use and needed to be secured to keep people safe.

We were reassured by the leadership team's engagement in discussions about the environment and their plans to improve on the areas identified. We were confident that they would be included in the service's own improvement and development plan.

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 reflect people's individual needs, rights, choices and wishes, the provider should ensure that personal plans are fully completed and regularly reviewed to direct care based on people's current situations. This should include, but is not limited to ensuring that:

- a) documentation is sufficiently detailed and reflects all the care planned or provided;
- b) people's care plans reflect their wishes and where appropriate, those of their representatives;
- c) personal plans include people's individual aspirations and outline the support that will be provided to help them to achieve this;
- d) care plans and daily recording is outcome focused, detailed and written in a person-centred manner, taking account of all the needs of people, not just health concerns.

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

'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.' (HSCS 3.07); and

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.08).

This area for improvement was made on 5 October 2023.

Action taken since then

We reviewed this area for improvement at our inspection. Most of the care plans had improved significantly in the detail captured which was appropriate to people and in identifying goals and plans and the regular reviews of these. However some of the plans we sampled had no goals identified, although people had been in the service for some weeks. For these same samples, recording was limited and evaluation of weekly outcomes were not recorded. The management team were already aware of ongoing improvements needed and had process in place to continue with the improvement journey.

We will continue to monitor this area for improvement at our next inspection.

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
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

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

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