

Beelieve Health and Wellbeing Services Support Service

Beelieve Health & Wellbeing Services
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Unannounced

Completed on:
12 June 2025

Service provided by:
Beelieve Health and Wellbeing
Services LLP

Service provider number:
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Service no:
CS2019377540

About the service

Beelieve Health and Wellbeing Services offer care at home support services to young people with disabilities and older adults. The service has an office base in Renfrewshire and offers support in various local authority areas.

At the time of inspection the service was supporting 45 people.

About the inspection

This was an unannounced inspection which took place on 10 and 11 June 2025.

Feedback was provided to the management team on 12 June 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 five people using the service;
- spoke with four family representatives;
- spoke with nine staff and management;
- gathered the views of two external professionals;
- observed practice and daily life;
- reviewed documents.

Key messages

- The service was highly person-centred with support uniquely tailored to each individual.
- A process of meeting and matching with staff meant that people could feel in control of their support right from the start.
- The service was flexible and responsive to people's changing needs.
- Support was compassionate, sensitive and imaginative, with the aim of supporting people in a way that suited them and to achieve the outcomes they wished.
- The service had introduced initiatives to support meaningful connection and engagement within local communities.
- The service was led by an approachable and responsive management team whose oversight ensured people benefitted from high quality support.

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 staff team?	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 found significant strengths in aspects of the care provided and how this supported positive outcomes for people. Therefore, we evaluated this key question as very good.

People's support was person-centred and focussed on their needs and wishes. 'Each of the people I know is supported in very different ways,' was a comment from a professional external to the service.

People were treated with dignity and respect. During the inspection we observed staff interacting with genuineness and warmth. This was evident during one visit when the person had been ready to leave when the inspector arrived. Their support worker said they would be having just a five minute chat with inspector about their role. Although clearly keen to go out, the person waited patiently for that five minutes. They had developed trust in their support and their support worker, indicative of strong person-centred support which promoted wellbeing.

A particular strength of the service was the process for matching people with their support workers. Potential support workers met with the person and their family, and were given an extended opportunity to get to know each other. This process recognised the uniqueness of every person and their family. People and their families felt involved and in control of the support they received. One family member told us that when one support worker, 'didn't quite fit,' the service responded quickly by changing the support worker. This meant people could establish supportive relationships with staff of their choice.

The service promoted individual choice, leading to a sense of empowerment and wellbeing. People were being supported to undertake a very wide variety of activities, including bowling, golf, trampolining, attending college, going to other day activities centres, day trips and art and music groups. One external professional commented, 'whatever the support required Beelieve respond flexibly and creatively.' Whilst people could rely on being supported to regular and planned activities, they were also encouraged where possible to make spontaneous choices about what they wanted to do.

The service had established 'Beehive', a club for people to attend, whether supported by Beelieve or not. This was run by a committee established by Beelieve as a response to the need people have to be in a place which is safe and where they can meet others. We saw Beehive in action. People were enjoying themselves and having fun. It was their space; their pictures and thoughts about what they wanted were on display. We also heard from family that people enjoyed the group activities, and being with other people, whether that was in terms of chatting with each other or just being in their company. And having attended, people wanted to go back. The service offered the opportunity for people to have meaningful connections and to enjoy sharing space and activities with others.

We could see that the service had a positive impact on people's health and wellbeing. People who had previously been very isolated had been encouraged to leave their home to participate in their community and be given the chance to experience new things and to meet new people. One family member said their relative's health had noticeably improved. They used to stay in their room, now they were, 'making friends and socialising.'

Individual teams of staff got to know the people they supported well. They were familiar with their likes and dislikes, needs and wishes, and aware of what might cause them distress. People were being supported to attend college. Staff were sensitive as to how best to support them in a busy social environment they found challenging. A professional commented that without the support of the service one person would not have been able to live in their own home. The service supported people to live life where they chose.

Staff supported people to health appointments and acted as an information resource for the person, mediating but not leading the interaction with health professionals. This fostered informed and focussed health care. The service used an electronic system for recording administration of medication. Management had access for audit purposes which were undertaken daily. This gave assurance medication was well managed. People could be confident that their health needs were addressed and they were kept safe.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how this supported positive outcomes for people. Therefore, we evaluated this key question as very good.

There was a robust recruitment and onboarding process in place for new staff. Staff told us that the training they had received equipped them to do their job. A training tracker gave management oversight of training undertaken and required. The tracker recorded high instances of training completed. The service had adopted a system of separate 'mandatory' training based on the needs of individuals supported. Where they had specific health needs this was addressed in training for new staff supporting them. Therefore, people could be confident that staff had the right knowledge and skills to support them.

Staff had very regular support and supervision to maintain them in their role and support them in professional development. More than one staff member said that they appreciated the service's approach towards their employment, enabling them to maintain a good life/work balance. Staff told us that they had been attracted to work in the service due to the values adopted. They had not been disappointed. We also saw samples of exit interviews for staff indicating high approval of the management approach. Staff told us that they could approach management at any time. Staff felt valued in their role, leading to people having a positive experience of their support.

Recruitment records were comprehensive and methodical. In the context of an increasing level of demand for the services provided, and a commensurate increase in the number of staff to be recruited, we encouraged the service to continue to refine the recruitment onboarding process. In highlighting and maintaining the key stages and checks required, the service will continue to ensure people have support from staff who are right for them.

An electronic rota management system allowed for remote monitoring of staff time. We saw no instances of missed support. This was confirmed by one family member who stated that in over two years on only one occasion had staff been late, and that they had contacted them to say they had been delayed due to a road traffic accident. 'They are 100% reliable, and faithful in coming,' a family member said. Small numbers of staff who knew people well offered support and the service's system allowed for an easy reference of the preferred staff for supporting an individual. People could be confident in reliable, consistent support from staff whom they knew, who knew them well.

Management had regular meetings. Electronic systems ensured effective communication across the individual teams. This meant staff were well informed about people's care arrangements, and wider events and developments within the service. Management was about to implement whole company meetings to which all staff were to be invited to attend and contribute to agenda items. These various systems enabled staff to be up to date with people's support and to suggest ideas to reinforce or enhance it. The service was imaginative in the ways in which it encouraged staff contributions to improve people's experience of their support.

How well is our care and support planned?

5 - Very Good

We found significant strengths in aspects of the care provided and how this supported positive outcomes for people. Therefore, we evaluated this key question as very good.

The service used an electronic care planning and recording system.

People's personal plans were pitched with just the right information for someone to have an understanding of a person and of their needs and wishes. Plans were respectively written in the first person. They included strategies for identifying and supporting a person in stress or distress. Risk assessments were focussed on the areas which were important for people. People's plans enabled staff to support them to safely undertake the activities they wanted and achieve the outcomes they wished.

People's changing or emerging needs and wishes were captured by the service and informed the support they were offered. Regular review meetings had taken place with the involvement of family and professionals. Minutes were detailed, comprehensive and captured people's views. Review outcomes clearly informed updates in care plans. There was the facility for staff to electronically sign to confirm they had read updates to care plans and risk assessments, which was regularly audited. This demonstrated the service was highly responsive to people's changing needs and wishes.

Notes were comprehensive and person-centred. Within one note staff captured a person's comments about a meal they had made for them. It had not been quite to the person's liking. Staff had recorded that they had told the person, 'they would try again, and try to do better next time,' which acknowledged and respected the person's expressed wishes. Notes were respectful and offered insight to the person's experience such as, 'enjoyed beating me again at golf'. The service should continue to encourage recording which capture people's mood and emotional responses, as an assurance that their support persists in being right for them.

The recording system allowed for staff to report incidents. We observed that on the day of inspection one incident had been noted and clarifying details immediately sought from staff. People could be assured that the service worked to keep them safe.

We heard from management that photographs were used at reviews to illustrate what had been happening for a person. In one instance staff had taken photos of the places a person had visited and created a poster montage of them. The person had decided to put this poster up on their wall. This was a strong indicator of the value the person placed on what their support had enabled them to do. In creating the poster, staff had not only enabled an at-a-glance summary of what the person had done, but also a means by which they could see and celebrate their achievements.

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 staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	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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