

Heather's Bespoke Care Support Service

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Hamilton
ML3 8PD

Telephone: 07725 625 137

Type of inspection:
Unannounced

Completed on:
6 March 2026

Service provided by:
MacDonald, Heather

Service provider number:
SP2016988389

Service no:
CS2016350328

About the service

Heather's Bespoke Care is a support service offering care at home support for adults and children with learning disabilities and or physical disabilities living in their own homes and in the community.

The service supports with personal care needs and provides support to individuals to access meaningful activities in their homes and in the community. The service office base is in Hamilton and provides support seven days a week. At the point of inspection there were six people accessing the service.

About the inspection

This was unannounced inspection which took place on 05 March to 06 March between 09:00 and 17:00 hours. The inspection was carried out by one inspector.

To prepare for the inspection we reviewed information about the service. This included, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- Spoke with two people using the service and three relatives.
- Spoke with four staff including management.
- Observed practice and daily life.
- Reviewed feedback from eight pre-inspection questionnaires from people using the service, family members, and staff.
- Reviewed documents

Key messages

- People using the service received high quality and consistent care and support.
- Staff were skilled in supporting complex needs and skilled in delivering person-centred care.
- People were respected and treated with dignity.
- People were supported by the right number of staff at times that were convenient to them.
- The service should continue to strengthen and develop its service improvement plan to support ongoing growth and future development

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 leadership?	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 these supported positive outcomes for people, therefore we evaluated this key question as very good.

Heathers Bespoke Care demonstrated the Health and Social Care Standards in their everyday practice. This encouraged a climate of warmth, respect, and dedication to giving people a good quality service. People were treated with compassion and dignity. We observed staff using their knowledge and skills to provide care in a warm and considerate manner. Throughout the inspection, staff consistently engaged with people politely and respectfully, showing a strong awareness of each individual's needs.

Staff demonstrated a strong awareness of individuals' non-verbal communication and had developed a clear understanding of the meaning behind their gestures and sounds. We were assured that people's wishes and preferences were recognised and respected. Staff provided person-centred support and encouraged individuals to be as independent as possible. People using the service were supported to remain active in the local community and to spend meaningful time together. People enjoyed their weekly routines, which included activities such as ice skating, swimming, visiting local cafés, and spending time with friends. This enabled individuals to lead fulfilling lives, as staff adopted an empowering approach and recognised each person's potential.

Relatives shared that they are happy with the service provided for their loved ones. One person said, "It gives me peace of mind, I am happy and content as I know she is safe" another shared "went above and beyond since day one to ensure they are doing what is wanted by the person and needed by the family". We observed this ourselves during the inspection, which evidenced responsive care and support.

The service supported people to improve their health and wellbeing. Staff were experienced and continuity within teams meant that the service thoroughly understood people's needs. The service also demonstrated a multi-disciplinary approach where they worked in partnership with learning disability nurses, and other health professionals. The service evidenced good communication and responded well to advice ensuring that people received high quality care and support.

There was good practice in the management of people's medication. We observed clear communication, appropriate support, and robust recordings when medication was given. Staff encouraged people to be as independent as possible, provided more thorough support when needed, and liaised with health professionals when any issues around medication arose. This evidenced that staff promoted people's health and wellbeing.

How good is our leadership?**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.

There were high levels of morale across the service and people described it as having a close, family atmosphere. One member of staff shared "The team are really supportive and what attracted me to the role was the enthusiasm that came from the manager".

People, relatives, and staff told us they were confident giving feedback and asking for support. Management had a welcoming open-door policy which made them accessible. We were able to observe positive communication during the inspection. Having leaders who were visible and available to offer guidance empowered staff to provide high quality care and support that benefitted both people using the service and families.

The management team supported staff through regular team meetings, supervision, and observations of practice. This ensured that staff had ongoing support and guidance, training needs were identified, and high standards of care were delivered for people. We did note that some of the minutes from these meetings were brief and asked management to encourage more reflection. Reflection can further enhance staff understanding, evidence good practice, and improve outcomes for people. The management team recognised this which reflected the pro-active approach of the service.

Leaders had strong oversight of the service, with a clear understanding of both what was working well and where improvements might be needed. This was supported by an effective quality assurance and auditing system. As the service is small, there had been no reportable accidents or incidents. Leaders demonstrated good knowledge of risk identification, how to minimise potential harm, and how to make timely referrals to relevant health professionals. Management also carried out regular audits of medication and care plans to further ensure people's safety and promote their health and wellbeing.

The service had a self-assessment and improvement plan that outlined areas for further development. As the service is small, the plan appropriately reflected its current needs and the steps required to continue improving standards and outcomes for people. However, the plan was management-focused. People, relatives, and staff regularly provided feedback through meetings. To support a more rounded and inclusive approach, we asked the service to incorporate this feedback into the improvement plan, which would strengthen its effectiveness in shaping future developments.

How good is our staff team?

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.

There was positive morale across the service and people described it as being a pleasure being able to help people live life to the full. A member of staff shared, "We are valued and my job means a lot to me" another shared "such a fantastic service and managers emphasis is one the people we care for and each other". Staff shared that management were always accessible and promoted an open-door policy. We observed good communication between management, staff, and relatives throughout the inspection. Having leaders who were visible and supportive empowered staff to provide high quality care for both people and families.

Staff were recruited safely in accordance with national guidance, with all necessary checks, references, and professional registrations in place. The service offered comprehensive training, including in-person courses, e-learning, and opportunities for self-development. The manager was developing additional refresher training to help staff continually expand their knowledge and skills. Regular observations of practice were being carried out, and it was suggested these could be further strengthened through more detailed narrative and improved coverage of infection prevention and control. Enhancing these areas will help ensure training needs are clearly identified and that high standards of care continue to be delivered.

Staffing arrangements were appropriate to meet people's varied needs and wishes. For example, people received at least four-hour visits which promoted meaningful interactions and effective care and support. Prior to someone joining the service, the manager goes out to meet the person to gain an understating of their needs and if the service would be suitable for ensuring responsive care and support.

A review of rotas evidenced that people were supported by staff who were familiar to them. There was consistency in staffing and people were cared for by the right number of people at the right time, promoting effective care and meaningful relationships. Rotas were planned in advance taking into consideration staff and people using the service. This meant that care was not interrupted for people who continued to have ongoing activities and positive outcomes.

Staff wellbeing was valued and the management team recognised the complexity of the role. Staff had access to an employee assistance programme which offered counselling and wellbeing assistance. By promoting a positive working environment where staff feel supported, and their achievements recognised, there was high levels of morale and performance. To strengthen this further, the service plans to increase opportunities for staff to meet in person to support improved communication among colleagues. Investing in staff wellbeing helps ensure that people receive care from a motivated and dynamic team who are well-equipped to meet their needs, wishes, and outcomes.

How well is our care and support planned?**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.

Every person supported by the service had a personal plan, known as a care plan. These plans were person-centred and highlighted each person's life history, likes, and dislikes, and what they wanted to achieve from their support. This gave staff good insight into people and helped work towards achieving people's desired outcomes. Plans contained detailed information about people's needs and how they would like to be supported. There was comprehensive information in important areas such as nutrition, continence, and medication. This gave staff clear guidance to promote people's health and wellbeing.

There were up to date risk assessments which outlined potential risks of harm and how to reduce them to keep people safe. The service also recognised the importance of people having a full life and taking appropriate, positive risks.

Care plans were regularly reviewed to ensure the information was accurate to meet people's needs. People and families told us they were involved in reviews, offering their unique perspectives and views, which evidenced the inclusive nature of the service. The holistic approach to care planning allowed people and families to achieve their outcomes, share special moments, and have active lives.

Monthly summaries were completed for each individual, capturing key highlights and any areas to be aware of throughout the month. Families spoke positively about the monthly updates and the value these brought. Updates were routinely shared with families where appropriate providing activity and health information as well as details of family interactions, helping people stay connected and informed.

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

In order for people to be supported by trained and competent staff, the provider should ensure that there is a clear staff development policy for staff training and assessment of competency. This should include, but not limited to, a training matrix which includes all mandatory and desirable training needs along with a clear process for assessing staff competency.

This is to ensure that the care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 area for improvement was made on 22 January 2025.

Action taken since then

This area for improvement has been met. Training matrix in place and a training strategy in place for staff.

Previous area for improvement 2

In order for people to benefit from a culture of improvement, the provider should introduce methods for self-evaluation and an improvement plan.

This is to ensure that the care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This area for improvement was made on 22 January 2025.

Action taken since then

This area for improvement has been met. A service improvement plan is in place and self evaluation for core assurance. Due to the nature and size of the service this meets their current needs and the service manager will continue to develop this.

Previous area for improvement 3

To support people safely with their medication needs, the provider should ensure that there are clear protocols in place. This should include, but not limited to, recording any support provided with prescribed creams and/or other ointments and introducing a protocol for supporting with homely remedies.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 22 January 2025.

Action taken since then

This area for improvement has been met. Medication Administration records are in place along with clear detail in personal plans and protocol for homely remedies.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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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