

Pilot, refinement and embedding



This section outlines BelleVie Care’s pilot refinement and embedding model, showing how iterative learning and values-led growth sustain its approach.

BelleVie favours deliberate, organic growth over rapid expansion. Its pilot validated core principles – self-managing teams, monthly membership pricing and full-shift pay – while embedding agile practices into care delivery. Continuous refinement strengthens recruitment, induction and outcome measurement to support autonomy and compassionate practice.

This section is split into the following topics:

- testing what works
- refining the approach
- expanding and embedding
- key decisions, key learning and recommendations.

“We spent the first year exploring with our pioneer team – testing monthly membership, operations and how self-management would actually work. We didn’t know if families would accept a monthly membership model, or how coaching and rotas would function in a peer-led team. So, we gave it a go.”

Trudie Fell, Chief Executive Officer, BelleVie Care

Testing what works

BelleVie Care's journey from concept to operational reality was shaped by a deliberate, iterative pilot phase designed to validate its principles and refine its model before scaling.

- **Controlled pilot** – Rather than launching at scale, BelleVie tested its model in a real-world environment to learn and adapt before broader implementation.
- **Core principles under review** – The pilot validated key elements, such as self-managing teams, full-shift pay and a monthly membership model, while identifying practical adjustments for sustainability.
- **Testing pricing innovation** – The pilot explored monthly membership pricing, initially met with scepticism, but families responded positively to its clarity and consistency compared to hourly billing.
- **Operational experimentation** – Self-managing teams trialled collaborative scheduling, shared decision-making and peer accountability, adapting agile principles from the IT sector to care delivery.
- **Embedding learning** – Insights informed recruitment tools, best-practice documentation and infrastructure for scale, enabling consistent replication across new regions.
- **Evidence of success** – Data from mature teams confirmed the model's viability: productivity targets were exceeded and profitability achieved within six to eight months, while bespoke pricing balanced sustainability with accessibility.

Refining the approach

Refinement at BelleVie is continuous and multilayered, reflecting a commitment to learning and adapting as the organisation grows.

- **Recruitment evolution** – Transitioned from informal conversations to a structured, values-led process using [TeamFit personality and values surveys](#), interactive workshops and shadow shifts. Adjustments strengthened onboarding to better prepare new frontline colleagues for autonomous team working.
- **Enhanced induction and training** – Combines mandatory compliance training with BelleVie-specific modules on self-management, compassionate communication and confirmation practices, while extending development beyond induction to include dementia care, delegated healthcare tasks and bespoke sessions for complex conditions.
- **Outcome measurement** – Shifted from anecdotal feedback to embedding scoring based on the Adult Social Care Outcomes Toolkit (ASCOT) in care plans and reviews, enabling BelleVie to quantify improvements in quality of life and demonstrate impact on people and families.

Expanding and embedding

“When expanding, we either start fresh or split large teams; both routes reach profitability, but the slower one builds stronger foundations. New teams take longer to reach profitability, but that’s because we embed culture and autonomy. It’s not a flaw – it’s the model working.”

Dan Formby, Operations Lead, BelleVie Care

BelleVie Care’s expansion model is rooted in organic, values-led growth, ensuring scale without compromising quality or culture.

- **Core principle: circles** – Growth is built on small, self-managing teams (circles) of five to eight wellbeing support workers. These teams manage rotas, organise care and make decisions collaboratively without traditional managers. When a circle reaches 12 members, it splits into two smaller teams to preserve trust, autonomy and peer accountability. A group of teams in one region is a ‘circle’ with a wellbeing support leader and one or more coaches, depending on the number of teams in the circle.
- **Regional expansion** – BelleVie grows by forming new teams within defined geographic areas – referred to as ‘circles’. For example, after establishing the Oxfordshire pilot, demand from neighbouring Buckinghamshire led to a new circle there, maintaining capacity without overstressing existing teams.
- **Strategic partnerships** – Expansion into Northumberland was driven by regional development funding aimed at creating good jobs in undervalued sectors. Even in such cases, BelleVie maintained its commitment to values-led growth and operational integrity.
- **Community embedding** – Each new team is rooted in its local area, meeting in community venues and building grassroots connections to strengthen trust and visibility.
- **Data-informed decisions** – Office for National Statistics and Care Quality Commission data guide site selection and the timing of team splits. BelleVie monitors care requests, staffing levels and geographic trends to ensure sustainability. However, experience, such as the unsuccessful Henley-Wallingford launch, proved that data must be combined with local market insight.
- **Resilience planning** – In isolated areas, BelleVie over recruits to absorb fluctuations without resorting to agency staff. Cross-team collaboration within regional circles like Oxfordshire enables teams to share visits during demand spikes, safeguarding continuity of care.

- **Financial sustainability** – With new launches, risk is balanced by seeding new teams with experienced colleagues. Profitability typically follows within six to eight months as teams optimise rotas and reduce travel inefficiencies.
- **Core commitment** – BelleVie rejects rapid scaling and franchising, focusing instead on sustainable growth that protects its values – equitable pay, empowered teams and person-centred care.

“When we first started, teams operated in isolation, but as we moved into supporting more complex needs, we wanted resilience. So now, we pair teams up for contingency and share visits when needed.”

Emma Pithers, Wellbeing Lead, BelleVie Care





Key decisions

Here is a summary of the key decisions that made a difference in BelleVie's piloting and rollout of the self-managing teams model:

- BelleVie launched a controlled pilot to validate core principles before scaling, rather than pursuing rapid expansion.
- The organisation tested monthly membership pricing and full-shift pay to improve clarity and sustainability for families and frontline colleagues.
- Self-managing circle teams were adopted as the foundation for care delivery, with built-in mechanisms for splitting to preserve autonomy.

Key learning

BelleVie's experience shows that scaling a values-led care model demands patience, adaptability and strong cultural foundations.

- **Iteration drives resilience** – Continuous refinement of recruitment, induction and training is essential for embedding autonomy.
- **Cultural integrity takes time** – Slower expansion builds stronger foundations and protects values during scale-up.
- **Local insight matters** – Data alone cannot predict success and grassroots knowledge prevents missteps in new regions.
- **Flexibility safeguards continuity** – Cross-circle collaboration and over-recruitment in isolated areas reduce reliance on agency staff.

Recommendations

You can download a checklist of practical recommendations inspired by BelleVie's approach.