

Voyage 1 Limited Woodlands

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

We inspected Woodlands on 21 November 2018 and 7 January 2019. The first day of the inspection was unannounced. When we last inspected the service on 29 December 2016 and 12 January 2017 we found the provider was meeting the legal requirements in the areas that we looked at and rated the service as good with an outstanding rating in caring. At this inspection we found that the service had improved further and was outstanding overall.

Woodlands is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Woodlands provide care, support and accommodation for up to 14 people who have a brain injury. The aim of the service is to support people to regain their social, cognitive, and independence skills and to develop people's confidence to enable them to return to independent living. At the time of the inspection there were 13 people who used the service.

A registered manager was in place. A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service provided outstanding care, emotional support and rehabilitation to people following their brain injury. The registered manager and staff were exceptionally caring and encouraged people to do well in achieving their goals. Staff demonstrated a real empathy for the people they cared for. The service's visions and values promoted people's rights to make choices and live a dignified and fulfilled life, this was reflected in the care and support that people received.

There was a strong recognition that people were individuals and the care and support provided ensured their needs were met and resulted in positive and improved outcomes for people. People received a service that was extremely responsive and based upon a person-centred approach and best practice. They had achieved exceptional results with people's rehabilitation and improved people's emotional and psychological wellbeing.

The registered manager and staff worked extremely hard to find ways to ensure people were engaged and stimulated. Activities were meaningful and people had regular holidays. People were provided with choice and opportunities dependent on their needs or interest. There was a dedicated activities room with people's art work proudly displayed.

The registered manager and staff worked in a way that put the needs of people first. Care plans were extremely informative and reflected people's likes and dislikes in detail. The registered manager and staff

knew every person they cared for in depth, what was important to them and the best way to provide care to them.

The registered manager displayed exceptional leadership qualities, drive and enthusiasm. They empowered staff to provide care that was tailored to individual's needs. Staff were highly motivated by the registered manager and showed pride in their work and the support they gave to people.

Without exception people, their relatives and professionals told us they experienced compassionate care from staff. This ensured the service was run in the best interest of people who used the service.

A comprehensive programme of audits and checks was in place to monitor all aspects of the service, including care delivery, accidents and incidents, health and safety, infection prevention and control and medicines. Audits resulted in clear action plans to address shortfalls or areas of improvement.

We observed care delivered in a way that truly reflected the provider's values of empowering people, sharing and engaging together, listening, honesty, outstanding leadership and support. The registered manager led by example and they had a pride and passion for the service that was reflected in everything they did. This in turn inspired staff to do their best to deliver the extremely high standard of care that was observed throughout the inspection.

Staff understood the procedure they needed to follow if they suspected abuse might be taking place. Risks to people were identified and plans were put in place to help manage the risk and minimise them occurring.

Medicines were managed safely with an effective system in place. Staff competencies around administering medicines were regularly checked.

The home was clean and tidy and communal areas were well maintained. Appropriate personal protective equipment and hand washing facilities were available. Appropriate checks of the building and maintenance systems were undertaken to ensure health and safety was maintained.

There were enough staff employed and on duty to ensure people's needs were met. We found that safe recruitment and selection procedures were in place and appropriate checks had been undertaken before staff began work. People were supported by a team of staff who were extremely knowledgeable about people's likes, dislikes and preferences. A training plan was in place.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. The registered manager and staff promoted positive risk taking to increase people's independence.

Staff supported people to maintain a healthy and nutritional diet. People were encouraged and supported with their rehabilitation, to maintain their health and attend routine health care appointments.

At the time of our inspection no one was receiving end of life care. However, the support of health care professionals was available to ensure people could remain at the home at the end of their life.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Medicines were managed safely and effectively. Staff had assessed risks to people to ensure their safety.

Good recruitment procedures were in place to help ensure suitable staff were recruited and people were safe.

There were sufficient skilled and experienced staff on duty to meet people's needs.

Staff were aware of the different types of abuse and action to take if abuse was suspected.

Is the service effective?

Good ●

The service was effective.

Staff had the knowledge and skills to support people who used the service. Staff received regular training, supervision and an annual appraisal.

Systems and procedures were in place to assess, monitor and implement support in relation to the Mental Capacity Act 2005.

People were provided with a choice of nutritious food and where able were supported to prepare their own food.

People were encouraged and supported in their rehabilitation and had access to healthcare professionals and services.

Is the service caring?

Outstanding ☆

The service was extremely caring.

Without exception the feedback from people, their relatives and professionals was all positive. People were truly respected and valued as individuals.

The service had a strong and visible person-centred culture. The registered manager and staff were passionate about people

receiving the best possible care and support.

Staff interacted with people in a way which was kind, caring and compassionate.

Is the service responsive?

Outstanding 

The service was extremely responsive.

People consistently received person centred care. People were involved in decisions about their care rehabilitation and positive outcomes were achieved.

The registered manager and staff were totally committed to assisting people to pursue their interests which created a sense of wellbeing. Careful thought had been given to enhancing people's lives and to ensure social inclusion.

Care plans were extremely informative and included information on people's likes and dislikes.

People and relatives were aware of how to make a complaint. They were confident their complaint would be dealt with effectively

Is the service well-led?

Outstanding 

The service was exceptionally well led.

People benefitted from a registered manager who had created an exceptionally open culture. There was a strong framework to monitor performance.

The registered manager was passionate about providing exceptional care to people and in driving improvements in the service.

There was excellent engagement with people, their relatives, visiting professionals, and the surrounding community.

Woodlands

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 21 November 2018 and 7 January 2019. The first day of the inspection was unannounced. This meant the provider and staff did not know we would be visiting. The inspection was carried out by one adult social care inspector.

Before the inspection we reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales.

We contacted commissioners and other health and social care professionals who worked with the service to gain their views of the care provided by Woodlands. During the inspection we spoke with two health and social care professionals who were visiting people who used the service.

The provider had completed a provider information return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help plan for the inspection.

During the inspection we reviewed a range of records. This included two people's care records including care planning documentation and medicines records. We also looked at three staff files, including recruitment, supervision, appraisal and training records, records relating to the management of the service and a wide variety of policies and procedures.

During the inspection we spoke with the registered manager, deputy manager, operations manager, therapy co-ordinator, two senior support workers and six support workers. We spent time observing staff interactions with people throughout the inspection. In addition, we spoke with five people who used the service and three relatives.

Is the service safe?

Our findings

At the last comprehensive inspection, we found the service was safe and awarded a rating of good. At this inspection, we found the service continued to be safe.

People told us the service was safe. Comments included, "I feel very safe here" and "All the staff are kind and caring. I do feel safe." A visiting professional wrote and told us, 'During our time at Woodlands, we have not had any concerns regarding the safety and safeguarding of individuals. Any time that therapists raise issues regarding clients or practices in Woodlands, these have always been fully address with immediate effect.'

Health and safety checks of the building and equipment were carried out. Water temperature of baths, showers and hand wash basins were taken and recorded on a regular basis to make sure they were within safe limits. Relevant checks had been carried out on the hoists, fire extinguishers and the fire alarm.

Staff understood what constituted abuse and the processes to follow to safeguard people in their care. Staff confirmed they attended safeguarding training updates to refresh their knowledge and keep them up to date with any changes. The provider, registered manager and staff recognised their responsibilities and duty of care to raise safeguarding concerns when they suspected an incident or event that may constitute abuse had occurred. Agencies they notified included the local authority, CQC and the police.

Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns. Learning from incidents took place and appropriate changes were implemented. Staff identified any trends to help ensure further reoccurrences were prevented.

Staff continued to be safely recruited and had all the required pre-employment checks in place. This included references, employment histories and Disclosure and Barring Service checks to make sure staff were safe and suitable to work with people. There were enough staff on duty to ensure people's support needs were met. This included providing support with personal care and taking part in activities and outings of people's choice.

Risks to people's safety had been assessed by staff and records of these assessments had been reviewed. Risk assessments covered areas such as going out into the community, falls, behaviour that challenges, moving and handling and nutrition. This enabled staff to have the guidance they needed to help people to keep safe.

The provider had systems and processes in place for the safe management of medicines. Staff were trained and had their competency to administer medicines checked. Checks on medicines were undertaken.

The home was clean and tidy and communal areas were well maintained. Appropriate personal protective equipment and hand washing facilities were available. Staff had completed infection control training. Equipment was available to control the spread of infection including, disposable gloves, aprons, sluicing facilities, and cleaning materials.

There were plans in place for emergency situations. For example, what to do in the event of a fire, and each person had an up to date personal emergency evacuation plan. This meant staff had the information they needed to ensure people were safely evacuated in an emergency.

Is the service effective?

Our findings

At the last comprehensive inspection, we found the service was effective and awarded a rating of good. At this inspection, we found the service continued to be effective.

People and relatives told us staff were experienced and provided an effective service. They told us staff supported people to achieve good outcomes and maintain a good quality of life. Comments included, "The staff are fantastic. I really can't believe how much [person] has progressed and that is down to the staff here" and "The staff here do an excellent job."

Prior to using the service an assessment of people's needs was completed. This was to ensure people's care, support and rehabilitation needs could be met and the correct equipment was available for people's safety and comfort. One person told us, "[Deputy manager] came to see me in hospital and did an assessment to look at the help I needed."

Care staff told us they were well supported in their role and received regular supervision and an annual appraisal. Supervisions provided staff with the opportunity to discuss any concerns or training needs. Staff told us they felt well supported by the registered manager. Staff said, "[Registered manager] is so supportive you can talk to [them] about anything" and "[Registered manager] is such a supportive person and has a genuinely caring nature."

The service continued to ensure staff received training updates and they were suitably skilled to meet people's needs. Staff had the skills and confidence to carry out their roles and responsibilities effectively. Staff felt encouraged and supported to increase their skills and gain other qualifications in care and management. The registered manager listened to staff and encouraged them to progress in their career. New staff completed induction training and shadowed more senior staff until they were confident and competent. One staff member told us, "I worked at here for four weeks before I was counted in the staff numbers. I did all my training before supporting people."

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. Staff had received appropriate training and had a good knowledge of MCA and DoLS. Decision specific mental capacity assessments were undertaken and clear records of these were kept. Best interest decisions were made and recorded appropriately.

People who lived in the main part of the service met with staff to plan menus. The menus were healthy and balanced and staff encouraged people with a wide variety of choices. People told us they enjoyed the food provided. Comments included, "We can have what we want. I like the food and its very good quality" and "We get choices about what we want to eat. All the food is very nice." Those people who lived individually in the flat/bungalows made their own choices and where needed staff supported them with shopping, food preparation and cooking.

People and their relatives told us that people received effective support with their health. Staff worked with other healthcare services to monitor people's physical and mental health and sought advice from external professionals when their health needs changed. In addition, people were supported to attend health screening appointments with the NHS and to access dentist, chiropody, and GP services as required.

The service accessed support from the 'Neural Pathways'. Neural Pathways is an independent service which specialises in helping people with their rehabilitation after a brain injury. They visited the service on a weekly basis to assess and review people's individual needs. The providers therapy team and staff at the service then worked with people to ensure their rehabilitation needs were met. We contacted health professionals as part of this inspection process who wrote and told us, 'The staff are aware of therapy input and programmes in place and the communication between the therapy coordinator and our therapy team is excellent. Regular and appropriate feedback is always provided and any urgent matters are raised immediately. The care team follow guidelines provided with additional support from the therapy coordinator, manager and operations manager.'

The service was well maintained and homely in style. In the main service there were 10 spacious en-suite bedrooms. In addition, there was one self-contained flat and three bungalows to the rear of the property. As people improved they moved from the main service to the independent flat/bungalows. In the main part of the service there were spacious shared areas providing people with the opportunity to socialise or spend time alone. In addition, there was a gym area to support people with their rehabilitation.

Is the service caring?

Our findings

The service continued to provide an outstanding level of care that was person-centred. The service sustained its strong culture of supporting people as individuals and a dedicated, caring team continued to support people with kindness, understanding and compassion.

Feedback from people and their relatives was all extremely positive. Comments included, "The care and support [person] has received is exceptional. [Registered manager] leads by example and the other staff follow. They [staff] are brilliant", "[Registered manager] is very caring in every way and so are the staff" and "I think they do an excellent job. I think [person] interacts with staff now better than us." These comments were typical of the feedback we received.

Health and social care professionals we contacted or spoke with as part of the inspection process consistently praised the caring nature of the registered manager and staff. Comments included, "It's like a giant family. It doesn't feel clinical and people are very well cared for" and "Person has a really nice life. I don't use these words lightly. The staff are exceptionally caring."

There was a strong, visible person-centred culture. The service ensured that staff in all roles were highly motivated and offered care and support that was exceptionally compassionate and kind. The therapy co-ordinator told us how they were inspired to motivate and instil confidence into people to support them with their rehabilitation. They told us how they motivated people in their exercise and rehabilitation with music. We saw the therapy coordinator working with people during our visit. They engaged extremely positively with people, provided encouragement and used general banter to drive people to progress.

Staff cared for individuals and each other in a way that exceeded expectations. Staff demonstrated a real empathy for the people they cared for. For example, one person had suffered a family bereavement and when they showed signs of being upset, staff spoke with them at length and provided emotional support, kindness and understanding which provided comfort to the person. We saw staff were appropriately affectionate with people which brought about comfort and reassurance.

The registered manager and staff spoke passionately about each person living at the service and often spent their own time attending activities, outings and holidays with people. This was because they believed in people having fulfilling lives. It was clear the registered manager and staff cared about each other as a team.

All staff were highly motivated and inspired to offer care that was kind and compassionate. They were determined and creative in overcoming obstacles in achieving this. The registered manager shared with us examples where they had achieved positive outcomes for people and their families. They spoke with us about one person who had behaviours that challenged others. However, over time with the compassionate support of staff, this person now regarded staff at the service as their family. This person was living with a diagnosis of dementia and staff worked extremely hard to recreate the routine they were comfortable and familiar with when they lived with their own family. Staff supported and encouraged the person to go out

each day, as they did prior to admission, and when they returned the evening meal was ready for them on the table. This routine had created security, reduced tension and frustration as the person's life had returned to how their life was before they lived at the service. The registered manager told us how working positively with this person had enabled a strong bond and as such the behaviours that challenged others had reduced.

Staff were matched with people who shared similar interests to support with building and maintaining relationships. For example, one person presented with behaviours that challenged. However, staff quickly realised when this person engaged with the younger staff members their behaviours decreased and the person became more comfortable, friendly and engaging in regular conversation.

An equality, diversity and human rights approach to supporting people's privacy and dignity was well embedded in the service. Staff knew the importance of ensuring people were treated equally. The person-centred approach which was at the heart of ensuring equal treatment and meeting people's individual needs, was very evident throughout our visit. Without exception, we saw each person was treated as an individual, their views and opinions respected, and their care delivered in a way which met their individual needs. One person had strong religious beliefs and spoke freely about this. This person also expressed their faith in their art work which was displayed in the activity room for everyone to see.

Respect for people's privacy and dignity was at the heart of the service's culture and values. Staff listened to people, respected their choices and upheld their dignity when providing personal care.

Information on advocacy was available for anyone who required this. At the time of the inspection there was one person who used the advocacy service.

Is the service responsive?

Our findings

At the last inspection, the service was rated as good in responsive. At this inspection, we saw that the service had shown continuous improvement which demonstrated the characteristics of an outstanding service.

People and relatives praised the staff, care and service provided and told us the registered manager and staff were extremely responsive. Typical comments included, "They [staff] are unbelievable just how much they have brought [person] on. We [family] can't believe how much they have improved. The staff are absolutely brilliant", "[Therapy co-ordinator] is a great with the right attitude and patience. To see how far [person] has progressed is really remarkable" and "I came in here in a wheelchair and now I am walking. I have only been here six months but I have made great progress."

Health and social care professionals consistently praised the registered manager, staff and support people received. One professional told us before moving into Woodlands a person had used other services that had not been able to support them effectively with their needs. However, since moving to Woodlands staff had enabled the person to feel safe, secure and develop. The person had progressed from having a room in the main service to now living in a bungalow on site and was now being supported to move to supported living. They told us, "[Person] has done phenomenally well. [Person's] improvement is a real credit to these guys [staff]. To think about [person] getting their own tenancy and where [person] was is unbelievable. A couple of years ago this would never have been possible." Another professional wrote and told us, 'Staff tailor care delivery to the client's specific needs.' A satisfaction survey completed by another professional read, 'Keep up the wonderful work.'

The service demonstrated they were offering an exceptional level of responsive and personalised support and had gone the extra mile organising meaningful activities. Prior to using the service one person told us they had a real talent in sport. This person fell into a spiral of low mood and lack of motivation following their brain injury and lost interest in this sport. However, with encouragement to buy a new kit, they started to attend a local club. With the support from the registered manager and a dedicated support worker this person has recently received an award, having shown themselves to be a person of outstanding character and having met all the requirements of high proficiency in techniques. Staff had gone out of their way to ensure this person was able to integrate with people within the local community.

During the inspection we spoke with this person who told us there were exceptionally proud of their achievement. They said this push from the registered manager and staff to go back to the sport had resulted in a vast improvement in their mental health and given them a sense of pride and self-worth. They told us they were also working towards achieving their teaching qualification at the end of January 2019.

Some people who used the service attended therapeutic art sessions within the service. Staff told us how this art therapy was a way of people expressing themselves, helped to improve memory, their attention span and redevelop motor skills. People's art work was on display in the activity room. A visiting professional told us how this art work had allowed a person to, "Express their faith." One person showed us their own art work which they had displayed on the walls of their flat/bungalow. They were immensely proud of this art

work and told us how this helped their patience, communication and strength in their self-esteem.

The registered manager told us the art therapy had proved to be a huge success and the art work processed had been fantastic. They told us how they and the therapy co-ordinator were looking at ways of showcasing this art and the positivity this has had on mental health and disability. They were in the process of looking for a workspace to display the art and for people to work to sell their art. This project was in the early days, however the registered manager and therapy co-ordinator demonstrated passion in achieving this.

The provider held regular events and competitions for people from different services in the organisation to take part in. These included competitions in art, chess, fishing, football, baking and growing fruit and vegetables. Events took place at different locations in the country and if needs be people were supported with an overnight stay. One person who used the service won an art competition. Their art work was made into coasters which were used at other services operated by the provider and head office. This person enjoyed the prize of afternoon tea with a friend and adult colouring books and pens. A recent piece of art this person had completed was to be sent to a popular television programme for the picture to feature in a spring edition.

One person told us about their excitement and happiness when they received a birthday gift from the service of concert tickets to see Kylie Minogue. This person was absolutely thrilled to go to this concert. This person told us how they had chosen the staff member they had wanted to go with them and said, "It was fantastic."

The service held regular events and parties. In the summer neighbours were invited to a garden party so they could meet people who used the service. The registered manager told us this community event had enabled neighbours to ask questions of the therapy team about rehabilitation and for them to understand the challenges a person with a brain injury has. We were told the garden party was a huge success with people and neighbours enjoying food, drinks and a live music.

The provider has a caravan at Bridlington which people could use with the service funding the cost. People could enjoy a heated swimming pool, amusements, the sea, bars and restaurants. In addition, there were other nearby attractions for people to visit. People could go with staff on their own or with others who used the service. One person had booked to go on their own and had chosen the staff member who was to go with them. They had bought some paints and a canvas to draw and paint the landscape whilst they were there. Two other people had chosen to go together and at the time of the inspection staff were supporting people with saving each week to ensure they had enough spending money to enjoy themselves whilst on holiday.

Staff were also going to support a person when they go on holiday with their family. This person has not seen their family in some time. The registered manager told us how the holiday would be a fantastic opportunity for the family to reunite. However, will also mean the person has staff to support them emotionally whilst ensuring they remain safe and well.

We observed staff changing the way they interacted depending on the person they were supporting. Staff were calm and quiet with some people and with others they were lively and outgoing. They were very skilled at reading body language and responding accordingly to minimise any distress. Staff had identified unavoidable triggers to the behaviour that challenged for one person who used the service and were proactive when they saw any signs of upset or aggression. Staff were extremely knowledgeable about this person and had received training on distraction techniques to work and engage positively with them. This had resulted in a positive impact on the person as previously there would have been a level of aggression

that would result in the person hurting themselves. However, staff have worked with a multidisciplinary team to de-escalate the aggression allow the person to offload any negative feelings and keep the person safe.

We saw people consistently received person centred care. This meant the service putting people at the centre of all decisions whilst working alongside other professionals to achieve the best possible outcomes. The registered manager and staff told us how they carefully considered what people wanted, their values, family, lifestyle and treated each person as an individual. Care plans included a detailed assessment of people's need, information on preferences, likes dislikes and dislikes. There was clear information for staff to follow to ensure they followed people's routines. A professional we spoke with during our inspection told us they regularly saw a person who used the service out in the local community getting their daily newspaper. The care plan clearly described to staff that being out in the community and getting a newspaper was important to ensure the person had a good day. The professional told us, "[Person] seems to have a really nice life. I see [person] waiting at the bus stop and they have their newspaper. [Person] has tested staff with their behaviour but with perseverance from staff [person] is now happy and secure." People confirmed they were involved in discussions regarding their care and making choices about the support they received.

At the time of our inspection no one was receiving end of life care. However, the support of health care professionals was available to ensure people could remain at the home at the end of their life. The registered manager and staff told us how the involvement of family and friends and people's spiritual, religious and cultural needs were considered. At a recent funeral of a person who used the service staff had shown compassion and kindness by being pallbearers as a sign of respect.

The service had a complaints policy and procedure, details of which were provided to people and relatives when they first joined the service. People told us they would feel comfortable in speaking with the registered manager and staff if they had any concerns. People or relatives did not raise any concerns at the time of our inspection.

The service looked at ways to make sure people had access to the information they needed in a way they could understand it, to comply with the Accessible Information Standard (AIS). The AIS is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. The provider understood their responsibility to comply with the AIS and could access information regarding the service in different formats to meet people's diverse needs. Staff knew people well and knew how each person communicated.

Staff worked with an occupational therapist for one person who used the service who had problems with their speech. They worked together to create a workbook that showed pictures of objects, and activities to aid communication and understanding. Communication boards and orientation aids were utilised to assist people to follow a route easily. The service also used laptops, iPhones and iPads to support people. One person used an iPad for direct communication with their GP. Staff also used iPads for picture recognition and memory work.

Is the service well-led?

Our findings

At the last inspection, the service was rated as good in well-led. At this inspection, we saw that the service had shown continuous improvement which demonstrated the characteristics of an outstanding service.

The registered manager was an exceptional leader whose clear vision and ethos was visible throughout the service. The registered manager was supported by an operations manager and deputy manager and they all shared an enthusiasm and passion for providing people with high quality, person centred care.

People and relatives spoke exceptionally highly of the registered manager. Comments included, "[Registered manager] is fantastic", "[Registered manager] is absolutely brilliant. You can talk to [registered manager] and they say it how it is", "[Registered] manager is amazing. [They] know this place inside out. [Registered manager] is brilliant with staff. [Registered manager] doesn't tell them what to do [registered manager] asks" and "I love [registered manager] they will do anything for me."

Health and social care professionals consistently praised the registered manager. Comments included, "[Registered manager] is excellent." We asked why and were told, "[Registered manager] is strong, approachable a good listener and reactive. [Registered manager] is a good communicator" and "[Registered manager] is lovely and very insightful. [Registered manager] knows absolutely everything about people and what is going on and keeps outside agencies very much up to date."

Other professionals wrote and told us, '[Registered manager] is always aware of every client in the unit and their needs, goals and clinical presentation. [They] employ a teaching role within the unit, demonstrating to [their] team effective practices and leads by example. [Registered manager] is never afraid to roll up [their] sleeves and get the job done. The senior management team, in particular [operations manager] is extremely reliable and encourages effective communication' and 'In my opinion, The Woodlands is a very well-run unit. My patients speak highly about the care they receive there. I have found the manager to be very approachable and helpful in facilitating my reviews. The staff are friendly and cooperative.'

There was a strong ethos around effective partnership working and it was clear excellent working relationships had been forged with many professionals from the local authority, North of England Commissioning Support and NHS. The registered manager worked closely in partnership with other professionals such as occupational therapists, physiotherapists, GP's, dieticians, speech and language therapists and other therapists to proactively discuss people's care.

The vision and values of the provider were clear and we saw how these were translated into the provision of high standards of care. The provider and registered manager were driven by a shared set of values. This included empowering people to live their lives the way they chose, to listen, share and engage together, to be honest and have mutual trust and understanding and to be outstanding leaders in quality and to be supportive. The registered manager was passionate that people were all equal, were not judged by appearances or defined by race or disability. They told us by sharing these values with staff and their continued non-judgemental, fully inclusive approach enabled them to develop an open, happy and

transparent culture where they continually strived for excellence.

The inspection highlighted that people were encouraged and supported to lead fulfilling lives. People were very much supported by the registered manager and staff to understand and overcome difficulties in their mental and physical well-being. We saw a committed, highly motivated and enthusiastic staff team was employed. They were led by an effective management team who gave the staff the confidence to support each person in the way they wanted to be supported. Staff understood their roles and responsibilities and the high standards that were expected of them. Their actions demonstrated they were trained and supported to provide care that was in accordance with the provider's clear aims and values.

The registered manager led by example and modelled excellent practice to staff. Throughout the inspection if a person needed support or assistance the registered manager prioritised the person above everything else. The registered manager supported people with their emotional wellbeing and personal care. People, relatives and staff told us this was the registered manager's usual practice. The registered manager told us they were proud of the service, staff and exceptional support people received.

They told us they had an open-door policy in which people who used the service, staff and relatives could approach them at any time. We saw that people and staff regularly took advantage of this open-door policy and when passing popped in to ask questions, seek reassurance and guidance.

We observed there was an effective governance structure for ensuring that work was completed. A comprehensive system of audits was in place that ensure the standards within the service were regularly monitored to maintain the existing high standards. The registered manager, deputy manager and senior support staff carried out in-house audits and the operations manager visited and completed audits on a regular basis. Senior support staff were passionate about their lead roles in infection control and medicines and were driven to maintain excellent standards.

The registered manager and staff had developed good links with people in the local community. The garden party had enabled people and staff to get to know neighbours. People regularly visited the local pub, shops and cafés. The registered manager and staff had formed excellent working partnerships with all those professionals involved in people's care. Other professionals such as the ambulance service could use the service as a pit stop for refreshments.

The service has achieved accreditation with the UK's leading brain injury charity, Headway. The approved provider status is an accredited sign of quality to show the service has a provision of appropriate specialist care for those with complex, physical and cognitive impairment as the result of an acquired brain injury. The provider kept the registered manager and staff up to date with any changes in legislation and good practice. Communications were sent weekly by the provider and any updates were displayed on the notice board for staff and shared at meetings. The operations manager also kept staff up to date at the monthly manager's meeting. The registered manager told us how they regularly accessed relevant websites such as the Department of Health, Nice and Headway. Voyage Care are members of Care England, British Institute of Learning Disabilities, and Learning Disability Alliance England which means that changes, initiatives and learning from across the sector were shared where required.

Regular staff meetings had taken place and minutes of the meetings showed that staff were given the opportunity to share their views. Management used these meetings to keep staff updated with any changes within the service. Meetings for people who used the service also took place. Minutes of meetings showed people were actively involved in making decisions about the service provision.

The registered manager understood their role and responsibilities and could describe the notifications they were required to make to CQC and these had been received where needed.