

Mrs J Soobrayen

Faldonside Lodge

Inspection report

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Date of inspection visit:
27 January 2020

Date of publication:
12 February 2020

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

About the service

Faldonside Lodge is a residential care home providing personal care to 13 people aged 65 and over at the time of the inspection. The service can support up to 15 people.

People's experience of using this service and what we found

People received exceptionally individualised care from staff who were thoughtful, caring and accepting. The loving and warm culture of the service promoted an especially open and mutually supportive nature that built strong relationships. People told us the care delivery exceeded expectations and that people's holistic needs were expertly met. Health professionals shared this view.

People were put at the heart of the service which worked around them, their needs and wishes. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. The service was particularly adept at meeting people's communication needs and invested in creative approaches to this meaning people could fully express themselves.

Consistent and robust oversight, although not always on a formal basis, from the registered manager and their staff team meant high quality care was always delivered. People were involved, engaged and consulted on a regular basis. Advocates were encouraged and used as required. Staff were skilled, supported and demonstrated qualities that made people feel comfortable and cared for. No one we spoke with needed to raise any concerns but felt confident that, should they need to, the registered manager would take them seriously and do whatever was required to improve the situation.

People told us the service was safe and responsive. The professional and extremely caring attitude of the staff assured family members that their relatives were very well looked after at Faldonside Lodge. We saw that risks had been addressed and where we found minor issues the registered manager actioned these immediately. Staff had received training in appropriate subjects and used reflective practice to further improve their skills and the service. Accidents were recorded, assessed and appropriately actioned and people received their medicines as prescribed. People's nutritional needs were met, and they had access to a wide range of health services that ensured their health and wellbeing.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (report published 5 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-Led findings below.

Faldonside Lodge

Detailed findings

Background to this inspection

The inspection

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

Inspection team

One inspector carried out the inspection with a second inspector speaking with people who use the service and their relatives.

Service and service type

Faldonside Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included positive feedback we had received from several relatives of those that had used the service. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service and four relatives about their experience of the care provided. We spoke with three members of staff including the registered manager, a senior care worker and a care assistant. Two health professionals were also spoken with.

We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality monitoring audits and maintenance records were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found and they submitted further evidence within 48 hours of the site visit. We looked at training data, the business continuity plan and policies. We spoke with a further two staff, one senior care worker and a care assistant. An additional five relatives called us to provide feedback.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People received their medicines safely and as prescribed.
- Medicines administration records were legible and indicated people received their medicines regularly. For the person who required regular blood tests linked with the administration of a medicine, we saw these were in place with their results clearly recorded.
- Good practice was mostly followed. Where we found minor issues with this, the registered manager took immediate action to rectify it.
- Staff had received training in medicines administration and their competency to do so was checked on a regular basis.

Assessing risk, safety monitoring and management

- The individual risks to people had been identified and well managed. This included where people were at risk of pressure sores, falls, health conditions or malnutrition.
- One relative told us, "[Family member] has improved so much since being here, tremendously so." Whilst several other relatives told us how proactive staff were in identifying potential risks to people's health and gaining prompt professional healthcare assistance as needed.
- Regular maintenance and servicing mitigated the risks associated with the premises and equipment. A business contingency plan considered adverse events such as loss of building, staff or utilities. The risk of fire had been assessed and mitigated.
- The risks associated with Legionella had been managed by regular water sampling and a test had been completed shortly before our inspection which was clear of bacteria. However, although staff were regularly flushing taps and descaling equipment, their actions were not being recorded. The registered manager immediately contacted contractors to come and assess the risk and provided us with confirmation of this.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Faldonside Lodge and their relatives had no concerns with their safety. All the relatives we spoke with told us they were reassured by the care their family members received at the home.
- Staff had received training in safeguarding and demonstrated knowledge. They told us they had confidence that should they raise any concerns, the registered manager would manage it promptly and appropriately.
- We saw that safeguarding information was on display in the home.

Staffing and recruitment

- Staff had been recruited safely and thoroughly and had the skills and attributes to work with the people who used the service. Records and observations confirmed this as did the people who provided us with feedback.
- All the people we spoke with told us there were enough staff on shift to provide person-centred, dedicated and unhurried support and this was confirmed by our observations. Agency staff had not been used for some years and the strong, supportive team work of the staff ensured staffing levels were always as assessed.
- Staffing levels were consistently being assessed by the registered manager through observations and speaking with staff, the people who used the service and their relatives. Staff told us, and the registered manager confirmed, that staffing levels were adjusted as required and when dependency levels changed.

Preventing and controlling infection

- The home, soft furnishings, fixtures and fittings were visibly clean with no malodours and we saw a staff member cleaning thoroughly during our inspection, including high risk areas such as handrails.
- Further measures were in place to control the spread of infection. Staff completed training in the subject and personal protective equipment was used to mitigate the associated risks. Cleaning schedules were in place to ensure the premises and equipment were systematically cleaned.
- People we spoke with told us the home was consistently clean with no malodours.

Learning lessons when things go wrong

- There had been few accidents or incidents within the home. However, where these had occurred they had been recorded, assessed and appropriate actions taken to mitigate future risk.
- The service was an open and transparent one and we saw from staff meeting minutes that good practice, health and safety issues and preventative practices were discussed routinely.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People who used the service, and their relatives, told us the registered manager completed an assessment of their needs prior to them moving into the home. They told us this was thorough and that preferences were established prior to moving in.
- The registered manager talked us through the factors they considered when assessing people to move into the home. This demonstrated their commitment to accommodating any new people's needs as well as those already residing in the home.
- Staff used nationally recognised tools to assess the risks to people and we saw that associated good practice guidance was followed and available to staff.

Staff support: induction, training, skills and experience

- People benefitted from receiving care and support from staff who were trained, supported and highly motivated in their role. The feedback we received on the staff's abilities and attributes was, without exception, very positive. One relative described staff as, "Exemplary" whilst another said, "So compassionate and knowledgeable."
- Staff had been inducted when they first started in their role and they received ongoing training to meet the needs of those that used the service. Staff told us the registered manager was encouraging of any training they wished to pursue, and we saw that most staff had qualifications in health and social care.
- The registered manager nurtured a supportive and inclusive culture within the staff team that meant staff were dedicated, open and skilled in their roles. They told us they felt supported, valued and listened to. They told us they contributed to the running of the home and problem-solved together when issues arose.

Supporting people to eat and drink enough to maintain a balanced diet

- People enjoyed the food provided, were given choice and could eat and drink whenever they chose to. People's nutritional and hydration needs were met.
- One person who used the service said, "The food; now that is good." All the relatives we spoke with were complimentary about the food served in the home. They told us they were encouraged to eat with their family members and made to feel welcome by regular offers of refreshments.
- People's nutritional needs were met, and the service sought appropriate healthcare professional's advice as required and in a prompt manner. One healthcare professional we spoke with said staff were proactive, knowledgeable, communicative and always followed their recommendations.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff understood the importance of working with others to achieve positive outcomes for people that ensured continuity of safe and effective care.
- Relatives spoke of a service that was completely responsive to people's needs particularly when people were unwell or showing signs of becoming unwell. One relative said of the staff being intuitive to their family member's wellbeing, "They're light years ahead of the game. Always looking forward and seeing what they can do to make people better."
- Records showed that people regularly accessed a wide variety of healthcare services to maintain and improve their health and wellbeing. Where people had health conditions, these were regularly screened. Records were comprehensively completed to show what action had been taken at appointments, the outcome and any further actions required. This ensured continuity of care.

Adapting service, design, decoration to meet people's needs

- Overwhelmingly, people told us Faldonside Lodge was a homely, welcoming and warm place to live, work and visit. One relative said, "It's a lovely atmosphere when you come in, everyone greets you." Another told us, "It just has a lovely ambience."
- People were happy living in the home and had personalised their rooms as they wished and to suit their needs and interests.
- There were communal areas for people to use and an accessible garden. The home was well maintained, bright and decorated to suit the needs of those people that lived there.
- Consideration was given to people's needs in relation to their rooms. For example, a relative told us how the registered manager had moved their family member to a more central room as they understood how important it was to them be involved in the day to day running of the home.

Ensuring consent to care and treatment in line with law and guidance

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff obtained consent for people's care and support and other associated tasks.
- People were supported to make their own decisions wherever possible and people had choice and control over their lives and the support they received.
- Appropriate DoLS applications had been made although none had been authorised at the time of the inspection.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- Without exception, all the people we spoke with talked of a service that was loving, generous and accepting. The relatives and people we spoke with told us this and we heard several examples of where staff had exceeded expectations of good care. One relative told us the care their family member received had positively, "Changed life in every way" whilst another said, "I thought the best people to care for [family member] was us but I was wrong; the care [family member] has received at Faldonside Lodge has totally enriched their life."
- People's individuality was celebrated, and they were made to feel valued and enabled. People were at the heart of the service and staff worked with them to deliver outstandingly person-centred care. One relative told us how their family member's health had improved since living in the home and told us, "The service has built a regime around [family member] and they have improved massively since being here."
- Open, nurturing and compassionate relationships were encouraged at all levels and people cared for one another. Staff were highly motivated in achieving the very best for people, their relatives, each other and the service. Staff told us they felt respected, completely involved and empowered to speak up and contribute to the service. Relatives told us they were always made to feel welcome and that staff, without fail, had fostered open, honest and supportive relationships with them and their family members. One relative described the warmth they saw between their family member and a member of staff. They told us their family member saved their last smile for the staff member shortly before they passed away.
- People we spoke with consistently remarked on the warm-heartedness of the home and how it felt like one big inclusive family. One relative said, "Staff are amazing, nothing to fault, they're kind, will drop anything to help you; they're so lovely." Another told us, "The care and compassion are superb." Whilst a third remarked, "I'm seriously impressed with [registered manager], staff and what they achieve here."
- Staff knew people, their likes, dislikes, past histories and preferences exceptionally well. They demonstrated this through discussion and the relatives we spoke with confirmed this. One relative told us how the service had recognised the very early signs of illness in their family member way before medical professionals had simply because they knew them so well. They said, "Staff picked up on the subtle changes; they knew something was wrong."

Supporting people to express their views and be involved in making decisions about their care

- People were fully involved in not only their care provision but the life of the home. The staff and registered manager understood the importance of advocating on people's behalf and we heard examples of where the service had sought advocates for people.
- The service was adept at finding and using creative ways to communicate with people, so they could feel a

sense of belonging and empowerment. We saw communication cards being used for some people whilst others used technology to communicate. For another person who did not speak English, staff had learnt the basics of the person's first language and used an electronic translator when required. We saw that the home arranged a translator for the person when they were required to attend healthcare appointments.

- One relative told us how skilled staff were at managing conflict. They told us their family member was never made to feel uncomfortable or judged and that staff worked hard to ensure they were never isolated.
- The service had a calmness to it which relatives also consistently commented on. Without exception, staff supported people to express themselves and this was evident in the relaxed atmosphere of the home. For one person who had recently been unwell which had left them with some confusion, their relative told us staff supported them to live within their own reality and with compassion. This had reduced the person's distress and anxiety and allowed them to freely express themselves.

Respecting and promoting people's privacy, dignity and independence

- Without exception, staff demonstrated the values of the service which was respect, ethics, honesty and integrity. The registered manager had instilled in their staff an ability to provide incredibly thoughtful, respectful and empathetic care. This had been achieved through mutual respect and an investment in the wellbeing of the staff, resulting in dedicated, individualised care that put people at the heart of the service.
- Staff told us the culture within the home was one of mutual respect amongst everyone and this was demonstrated at our inspection. One staff member explained how understood, listened to and respected they felt by the registered manager. Relatives agreed with one saying, "Staff are engaged with everybody, they're lovely, they make time for people, use humour." Another told us, "Above all, the staff showed great respect, love, kindness and care for everyone."
- Staff spoke with us about the people they cared for with kindness and respect and did so with a smile. They saw their work as a vocation and a collaborative approach, working with those that used the service, each other and the registered manager to achieve excellent care. One staff member said, "I couldn't imagine doing anything else or working anywhere else." Another told us, "Everyone works to a high standard. That's the most important thing, to make people feel welcome and that this is their home."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received exceptionally person-centred care that was adapted to meet their needs, preferences and wishes. A stable team of staff knew people remarkably well; their relatives consistently told us the care their family members received exceeded their expectations.
- We heard several examples where the home surpassed what was expected of them. When one person who used the service was taken unwell whilst on holiday overseas, the registered manager flew over to help and assist the person and their family through a time of distress and uncertainty. On another occasion, we heard how, following a person who used the service falling at a relative's home during social leave, the registered manager attended to assist the family to ensure the person received the care they needed.
- Another relative told us how staff had arranged for them and their family member to have Christmas lunch together at the home. They told us a table was set for just the two of them and that staff had gone the extra mile to make it exceptional. The relative told us, "So thoughtful and made it special."
- A further relative described to us how the service had ensured their family member's favourite meal was available on the day of their admission into the home. They told us how much this helped to settle and reassure the person adding, "It was exceptionally thoughtful."
- People consistently told us the care the service delivered was extraordinary. One relative said the standard of care, "Takes my breath away" whilst another described it as, "Outstanding."
- The health professionals we spoke with described a particularly person-centred service that was proactive and very responsive to people needs. One of those we spoke with said, "I can't speak highly enough of the place."
- People told us the service worked hard to discover what was important to each person to ensure a quality of life that was filled with the things they enjoyed. The registered manager regularly attended football matches with one person who used the service whilst for another, the service had supported a person to continue to attend a club some distance away after they moved into the home. This person's relative told us, "[Family member] was not once isolated. They couldn't have done more than they did."
- The home was part of a vibrant seaside community and people were fully involved in local events. People attended the summer carnival and the theatre amongst other events. During our visit, we saw people access the community.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are

given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- A relative told us the service, "Had a comprehensive approach to communication" and this was evidenced in the creative and especially individualised ways the staff communicated with people. For this relative's family member, who communicated using British Sign Language (BSL), the staff had learnt basic BSL prior to the person moving into the home to enhance their experience. Another relative of this person said, "The staff were enthusiastic and eager to learn. This made the transition for my [family member] so much easier. We continued to teach the staff on a regular basis, increasing their vocabulary and equally enabling them to communicate with [family member]."
- For another person with a hearing impairment we saw that a detailed support plan was in place robustly describing what support this person needed to help maintain their associated equipment. It understood the importance of this in reducing the risk of isolation and ensuring the person felt fully involved and listened to.
- For other people we saw that communication cards were used and assistive technology. For example, one person used an app to allow them to communicate via their tablet which could also be cast onto their television for others to read. Their relative told us, "It's been a miracle finding this place."

End of life care and support

- People received dedicated and exceptionally thoughtful care throughout their time at Faldonside Lodge and particularly at the end of their lives.
- We spoke with three relatives of people who had passed away in the service and they all spoke of dedicated care delivered with kindness, respect and dignity. They told us their family member's needs, and theirs, were completely met and the service rapidly adapted the care delivered as needed.
- One relative said of the end of life care delivered, "When [family member] was dying, the care never faulted, not once. Staff done a better job than we could ever have done." The relative described the special bond their family member had with staff and how the service had kept family members informed at all times. They told us staff ensured their family member had all their favourite things at the end of their life. Another relative told us staff, "Met [family member's] needs without fail."

Improving care quality in response to complaints or concerns

- None of the people we spoke with had any concerns to raise about the service but told us they would not hesitate to speak with the registered manager if they had the need to. The service had not received any complaints since our last inspection.
- People told us they had absolute confidence that the registered manager would listen and take their concerns seriously. A person who used the service said, "[Registered manager] takes a delight in making people satisfied." Whilst a relative said, "It's been a miracle, [registered manager] can't do enough for people, absolutely brilliant." They went on to say, "If anything's not working properly, it's fixed straight away."
- People, and their relatives, were happy with the care received as the service had taken time to find out what was important to each person and ensure it was delivered. In addition, people were regularly consulted in an open and nurturing culture that gave people the confidence and comfort to speak freely and honestly. One relative told us, "The service is constantly evaluating to make people's lives better."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People we spoke with talked of a service that was exceptionally thoughtful, embracing and encouraging. One person who used the service said, "This home is one of the best." A relative told us, "[Registered manager] runs a really fabulous place. I can't praise them enough."
- The service worked hard to build strong and respectful relationships between its staff, the people who used the service, their relatives and health professionals. People told us they valued this and felt consulted and communicated with on all levels. They told us they felt cared for. One relative said, "I want you to know how much I value [registered manager], the staff and the care they provide."
- The registered manager promoted a culture within its workforce that delivered the service's values of respect, ethics, honesty and integrity. A staff member told us, "[Registered manager] likes to get your opinion and we problem-solve together as a staff team. [Registered manager] listens to us, they respect us." All the staff we spoke with told us they felt particularly valued and bonded as a team.
- Staff felt completely supported by the registered manager both in their personal and private lives which helped to ensure excellent outcomes for people. Staff were professional yet warm and understood professional boundaries. They worked especially well together to deliver a shared goal of thoughtful and compassionate care.
- Both health professionals we spoke with talked of a high-achieving service that put people first. They talked of excellent working relationships where staff were knowledgeable, dedicated and skilled. They told us staff communicated with them especially well and knew people and their needs well. One health professional said staff celebrated people's achievements and shared this with them.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- Openness and honesty were integral to the service and its culture and staff consistently applied these qualities throughout their work.
- The registered manager understood their responsibility around the duty of candour and told us they worked openly and collaboratively with others when things went wrong.
- The service used reflective practice and debriefing sessions in team meetings to discuss and review values, staff performance and care delivery. We saw from meeting minutes that staff were acknowledged and praised for their work.
- Whilst there were quality monitoring audits in place within the service, it was the registered manager's

robust and consistent oversight that ensured high standards were maintained and developed. This filtered down to the senior staff who shared the registered manager's ethos and ways of working, ensuring the service was continually being monitored and improved.

- Due to the service's delivery of consistently high care over several years, the registered manager had been invited to The Parliamentary Review that took place in 2019. The Parliamentary Review is a series of independent publications which aims to share best practice.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Everyone we spoke with was happy with the quality of the service provided. Most people told us it exceeded their expectations in every way. One person who used the service said of the service, "They do everything they can [for me]." One relative said, "Ever since I first walked in here, I've been nothing but impressed; seriously impressed." Another relative told us the service met their family member's needs, "Without fail." A health professional said, "Put me in here!"

- Without exception, people praised the registered manager and the qualities they demonstrated and instilled in their staff. We consistently heard how proactive, responsive and thoughtful they were. People who used the service told us they saw the registered manager regularly, that they were approachable and actioned whatever was required.

- Relatives agreed. One relative said of the registered manager, "They're here night, day, whenever you want them." Another told us the registered manager was, "Incredibly helpful and keeps you informed. A lovely person." Staff equally described the registered manager in complimentary terms explaining the positive impact they had on the service, the staff and people. One staff member said, "[Registered manager] is super involved all day every day. They do so much for people. They make a lot of effort to find out what people like when they first come into the home."

- We saw that the home ran smoothly and efficiently with each member of staff being clear on what needed to be achieved and working together to make it happen. Staff took ownership of their roles and understood the importance of them. Senior staff took responsibility in the registered manager's absence and, through discussion, demonstrated a commitment to this and those that lived in Faldonside Lodge.