

Navlette Ommouy McFarlane

The Tulips Care Home II

Inspection report

375 Hither Green Lane Lewisham London SE13 6TR

Tel: 02086951175

Date of publication: 11 July 2022

Ratings

Overall rating for this service	Good •
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

The Tulips Care Home II is a small residential care home providing personal care for up to four adults with mental health needs. At the time of the last inspection four people were receiving care at the service. At the time of our review three people were living in the service.

Background to this report

At our previous comprehensive inspection at The Tulips Care Home II on 20 and 21 August 2019 we identified concerns relating to well-led. We found that quality assurance systems were not robust enough to demonstrate the service was effectively managed.

This was a breach of regulation 17 (Good Governance) for which we issued a requirement notice. The key question well-led was rated requires improvement and the overall location rating was requires improvement.

The full report of that inspection can be found by selecting the 'all reports' link for The Tulips Care Home II on our website at www.cqc.org.uk.

Why we carried out this review

We carried out this review on 21 April 2022 to follow-up on the requirement notice and assess whether the provider has addressed the improvements required at our previous inspection.

We did this using a 'desk-based' review process because evidence to demonstrate that the requirement notice had been met could be obtained and assessed remotely without needing an inspection visit to the location. This was not an inspection: the scope of this review did not include a visit to the service or an assessment of the outcomes for people using the service.

What we found

Details of the findings from this remote assessment can be found under the well-led section of this report.

Through this desk-based review, The Tulips Care Home II was able to provide sufficient evidence that they have taken action to address the breach identified at the last inspection. They therefore are no longer in breach of regulation 17.

Rating at last inspection and update

Following the last inspection, this location was rated requires improvement. Although only the well-led key question was rated requires improvement, if there is a breach of a regulation a location cannot be rated higher than requires improvement overall. As the provider is no longer in breach of regulation 17 the overall rating has changed to good.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?	Good •
The service was well-led.	



The Tulips Care Home II

Detailed findings

Background to this inspection

The review

We carried out this review under section 46 of the Health and Social Care Act 2008, which permits us to conduct a review of how a provider carries on a regulated activity. We can carry out a review under s46 without needing to do an inspection (site visit) but we must assess the performance of the provider and publish a report of our assessment. Any rating adjustment made following the review must reflect the outcome of our assessment.

How we carried out this desk-based review

The review was carried out by one inspector. No notice of the review was given to the provider, but the review included a discussion with the provider.

The well-led key question was reviewed to ensure that appropriate action had been taken by the provider to meet the fundamental standards of health and social care. For this desk-based assessment of evidence we:

- •□Spoke with the provider and deputy manager
- Reviewed policies and audits relating to water temperature checks
- Reviewed relevant records covering financial audits for service users

Service and service type

The Tulips Care Home II 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.

The service did not have a manager registered with the Care Quality Commission as it is not a requirement of their registration. The manager of the home is registered as an individual provider. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided.



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 requires improvement. At this review this key question has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection quality assurance systems were not robust enough to demonstrate the service was effectively managed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this review and the provider was no longer in breach of regulation 17.

- Monitoring and quality assurance processes were in place at the service. Although we saw a typographical error and an administrative issue within some record forms, this had not impacted people and a range of audits were being completed, which showed an improvement since the last inspection.
- Monthly water temperature checks were completed and documented on a recording sheet. Where there was an administrative error on the recording sheet, we discussed this with the provider after the inspection and they confirmed it had been resolved in line with their policy and procedure. We reminded the provider to ensure their key policies and procedures were up to date and staff were aware of procedures to follow.
- Policies were in place regarding people who were supported with their finances. Although there was a typographical error on the audit form, we saw people's finances were checked with records and receipts in place, with no inaccuracies. The deputy manager responded immediately during the review and sent us evidence the issue had been resolved.