

# The Sisters Hospitallers Of The Sacred Heart Of Jesus

## St Teresa's Care Home

### Inspection report

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22 March 2022

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### Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

# Summary of findings

## Overall summary

St Teresa's Care Home provides accommodation and support for up to 26 people. At the time of our inspection 25 people were living in the home. The home was adapted from several neighbouring properties with accommodation over four floors. The home has been run by the Sisters Hospitallers of the Sacred Heart of Jesus for nearly 90 years.

We found the following examples of good practice.

There were robust procedures in place to ensure visitors could enter the home safely, with checks made upon entry, including temperature checks and a requirement to provide a negative lateral flow device (LFD) COVID-19 test result.

Relatives were given information about visiting and were kept updated about any changes in visiting guidelines in the home. Relatives were supported to become essential care givers in line with current guidance. This ensured people would be able to have a visitor even if the home was advised to restrict visits in the event of a COVID-19 outbreak.

There was a designated testing area for staff and visitors. The service was taking part in regular COVID-19 testing for people and staff in line with current guidance.

The home was clean, hygienic and free from odour. The home was kept clean by an external cleaning company who visited the home on a daily basis. Along with the care staff, the home was supported by a team of 'sisters' who lived in the home and supported staff were needed, including cleaning across the home.

The head of care carried out daily checks across the service, which included reminders in daily handovers and observations across the home to help ensure staff understood their responsibilities and were following best practice. A staff member said, "Along with the IPC training we have, we discuss in the handover and get reminders. We are supported well and if we see staff not wearing a mask properly, I would feel comfortable challenging them about it as we are regularly told."

Staff had ongoing IPC training and we observed staff following best practice throughout the inspection. Staff confirmed they had enough PPE and there were posters displayed across the home with reminders about PPE requirements and regular hand hygiene. We saw COVID-19 guidelines and IPC measures were also discussed in team meetings.

The staff team used the COVID-19 outbreak as a learning experience and discussed how they could improve their everyday IPC practices. We saw the provider had worked closely with the local authority and public health team to discuss the outbreak and had supportive meetings for further advice and guidance.

Staff told us they felt well supported in their role and highlighted the positive working environment across the home. One staff member said, "We support each other and help each other, it is very good. We can also contact the regional manager as well."

As there was no current registered manager at the home, the head of care also told us they had been well supported by the quality assurance team and they had always been available for advice if needed.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

Further information is in the detailed findings below.

**Inspected but not rated**

# St Teresa's Care Home

## **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 was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

As part of CQC's response to care homes with outbreaks of COVID-19, we are conducting reviews to ensure that the Infection Prevention and Control (IPC) practice is safe and that services are compliant with IPC measures. This was a targeted inspection looking at the IPC practices the provider has in place. We also asked the provider about any staffing pressures the service was experiencing and whether this was having an impact on the service.

This inspection took place on 22 March 2022 and was announced. We gave the service 24 hours' notice of the inspection.

# Is the service safe?

## Our findings

### Staffing

- The provider told us they had measures in place to mitigate the risks associated with COVID-19 related staff pressures.

### How well are people protected by the prevention and control of infection?

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We saw the provider was facilitating visits for people living in the home in accordance with the current guidance.
- We were assured that the provider's infection prevention and control policy was up to date.
- Although we were assured that the provider was promoting safety through the layout and hygiene practices of the premises, we saw there was not a clear policy in place for cleaning protocols between visits in the communal areas. The head of care acknowledged this and said they would update this immediately.
- Although we were assured that the provider was using PPE effectively and safely, the head of care told us they were not always keeping formal records of their daily walkaround checks to ensure staff were following best practice. The provider acknowledged this and told us this would be actioned. They also explained it was due to the current vacant registered manager position. We have signposted the provider to resources to develop their approach.