

Dr Hanel Suresh Nathwani

Smile Rooms

Inspection Report

44 Peascod Street Windsor Berkshire SL4 1DE

Telephone: 01753 331081 Website: www.smilerooms.co.uk Date of inspection visit: 08/07/2020 Date of publication: 27/07/2020

Overall summary

We undertook a follow-up desk based focused inspection of Smile Rooms on 8 July 2020.

This inspection was carried out to review, in detail, the actions taken by the registered provider to improve the quality of care and to confirm that the practice was now meeting legal requirements.

The inspection was carried out by a CQC inspector who had remote access to a specialist dental adviser.

We undertook a comprehensive inspection of 17 October 2019 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. We found the registered provider was not providing well led care and was in breach of Regulations 18 and 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can read our report of that inspection by selecting the 'all reports' link for Smile Rooms on our website www.cqc.org.uk.

When one or more of the five questions are not met, we require the service to make improvements and send us an action plan. We then inspect again after a reasonable interval, focusing on the area where improvement was required.

This desk-based inspection was undertaken during the Covid 19 pandemic. Due to the demands and constraints in place because of Covid 19 we reviewed the action plan and asked the provider to confirm compliance after a reasonable interval, focusing on the area where improvement was required.

As part of this inspection we asked:

• Is it well-led?

Our findings were:

Are services well-led?

We found this practice was providing well-led care in accordance with the relevant regulations.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 17 October 2019.

Background

Smile Rooms is in Windsor and provides private treatment to adults and children.

Car parking spaces, including those for blue badge holders, are available near the practice.

The practice is based on the first floor. Patients are advised of this when they contact the practice. The practice website also includes this information.

Summary of findings

The dental team includes five dentists, one oral surgeon, three dental nurses, one trainee dental nurse, one receptionist and an assistant practice manager.

The practice has four treatment rooms of which two are in use.

The practice is owned by an individual who is the principal dentist there. They have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the practice is run.

The practice is open:

- Monday 8.00am 7.00pm
- Tuesday and Thursday 8.00am 8.00pm
- Wednesday and Friday 8.00am 6.00pm
- Saturday 8.00am 5.00pm

Our key findings were:

- Recruitment procedures were established to ensure only fit and proper persons are employed.
- Staff received the appropriate training necessary to enable them to carry out the duties.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

We found this practice was providing well-led care in accordance with the relevant regulations.

The provider had made improvements in relation to the regulatory breaches we found at our inspection on 17 October 2019.

No action



Are services well-led?

Our findings

We found that this practice was providing well led care and was complying with the relevant regulations.

At our previous inspection on 17 October 2019 we judged the provider was not providing well-led care and was not complying with the relevant regulations.

We told the provider to take action as described in our requirement notice.

At the follow-up desk based inspection on 8 July 2020 we found the practice had made the following improvements to comply with the regulations:

The provider purchased a practice governance system which included a staff recruitment policy and procedure.

We were sent a staff recruitment checks log sheet which listed checks for:

- Reason for leaving previous employment
- Eligibility to work in the UK
- Full employment history
- Evidence of conduct in previous employment

These were some of the checks required that were not carried out. The provider has sent us evidence to confirm these checks have since been carried out. No new staff had been recruited since our inspection but if used correctly this system would ensure that appropriate checks were completed prior to new staff commencing employment at the practice.

The practice offered conscious sedation to patients who requested it. The staff supporting the visiting sedationist undertook immediate life support training to ensure they had the necessary skills to carry out their role effectively in the event of a medical emergency.

The practice had also made further improvements:

- Action was taken to implement recommendations in the practice's ongoing management of fire safety was effective.
- A referral tracking system was set up to ensure patient referrals to other dental or health care professionals were received in a timely manner.
- Action was taken to implement recommendations in the practice's ongoing management of legionella was effective.

These improvements showed the provider had taken action to improve the quality of services for patients and comply with the regulations when we carried out a follow-up desk based focused inspection on 8 July 2020.