

Dr Anita Patel

Vistara Smiles

Inspection Report

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Date of inspection visit: 16 January 2019
Date of publication: 28/01/2019

Overall summary

We undertook a follow up focused inspection of Vistara Smiles on 16 January 2019.

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 led by a CQC inspector.

We had undertaken a comprehensive inspection of Vistara Smiles on 7 June 2018 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 in accordance with the relevant regulations 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 Vistara Smiles 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.

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 of 7 June 2018.

Background

Vistara Smiles is in Islington, London, and provides private treatment to patients of all ages.

There is level access for people who use wheelchairs and those with pushchairs.

The dental team includes two dentists and a trainee dental nurses.

The practice has three treatment rooms.

The practice is open from Monday to Saturday by appointment

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.

Our key findings were:

The provider had made improvements to the management of the service.

Summary of findings

The practice had arrangements to ensure the smooth running of the service.

At the previous inspection we had found that this practice was providing safe care in accordance with the relevant regulations but told them there were things they should do. We found that the provider had taken action to address the issues we said they should look at. We found that:

- The practice had a system for the documentation of actions taken and learning shared in response to incidents, with a view to preventing further occurrences and ensuring improvements are made as a result. Staff were aware of the procedures regarding documenting and learning from these events.
- The practice had appropriate infection control procedures and protocols in place that took into account

guidelines issued by the Department of Health - Health Technical Memorandum 01-05: Decontamination in primary care dental practices and have regard to The Health and Social Care Act 2008: 'Code of Practice about the prevention and control of infections and related guidance'.

At the previous inspection we had found that this practice was providing effective care in accordance with the relevant regulations but told them there were things they should do. We found that the provider had taken action to address the issues we said they should look at.

We found that:

- The practice had protocols in place for completion of dental care records taking into account guidance provided by the Faculty of General Dental Practice regarding clinical examinations and record keeping.

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

The provider had made improvements to the management of the service.

The practice had arrangements to ensure the smooth running of the service. These included systems to assess, monitor and discuss the quality and safety of the care and treatment provided.

The practice team kept complete patient dental care records which were, clearly written or typed and stored securely.

**No
action**


Are services well-led?

Our findings

At our previous inspection on 7 June 2018 we judged it was not providing well led care and told the provider to take action as described in our Requirement Notice. At the inspection on 16 January 2019, we found the practice had made the following improvements to comply with the regulation:

- There were appropriate processes to ensure all staff had received or updated key training. The principal dentist had checked employees training records.
- The practice had effective recruitment procedures, including procedures to cover arrangements when they employed locum staff.

· The practice had evidence of adequate immunity against vaccine preventable infectious diseases for all staff, and had put systems in place to ensure these checks were regularly updated.

· The practice had effective systems to assess, review and mitigate risks and had systems for associated action plans to be reviewed and updated.

· The practice had sufficient equipment to manage medical emergencies.

· The practice had evidence of safety checks of electrical equipment, including PAT testing that had been carried out in December 2018.