

*We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

## Perfect Smile Spa - Dental Practice

132a High Street, Hornchurch, RM12 4UH

Tel: 01708442114

Date of Inspection: 20 December 2012

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We inspected the following standards as part of a routine inspection. This is what we found:

<b>Respecting and involving people who use services</b>	✓ Met this standard
<b>Care and welfare of people who use services</b>	✓ Met this standard
<b>Safeguarding people who use services from abuse</b>	✓ Met this standard
<b>Cleanliness and infection control</b>	✓ Met this standard
<b>Assessing and monitoring the quality of service provision</b>	✓ Met this standard

## Details about this location

Registered Provider	Dr. Jasmeet Sagoo
Overview of the service	The dentist provides diagnostic and screening, surgical, and treatment to people at Perfect Smile Spa - Dental Practice.
Type of service	Dental service
Regulated activities	Diagnostic and screening procedures Surgical procedures Treatment of disease, disorder or injury

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*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

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## Summary of this inspection

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### Why we carried out this inspection

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This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 20 December 2012, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We talked with people who use the service and talked with staff.

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### What people told us and what we found

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We found that Perfect Smile Spa - Dental Practice met all the outcomes that we inspected. Appropriate systems were in place to carry out detailed assessments in order to involve patients in their care and treatment. Suitable arrangements were in place to manage infection control to ensure that patients, staff and visitors were safe when they visited the surgery.

There were quality monitoring systems in place which ensured that standards were maintained for staff, visitors and patient safety. People told us that they were happy with the service provided at Perfect Smile Spa - Dental Practice. They said they were given adequate information about their treatment options and any relevant costs.

People also told us that they were given sufficient time to ask questions. They said the staff were friendly, helpful and knowledgeable, and that they were treated with respect. They said that the surgery was always clean and one person who used the practice for over 10 years told us "They are brilliant here, how you found it today is how it is everyday." Everyone we spoke with echoed the same sentiment. They also told us that they brought their family members to the practice because of its high standards.

You can see our judgements on the front page of this report.

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### More information about the provider

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Please see our website [www.cqc.org.uk](http://www.cqc.org.uk) for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

## Our judgements for each standard inspected

**Respecting and involving people who use services** ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

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### Our judgement

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The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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### Reasons for our judgement

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Care and treatment was planned and delivered in a way that ensured people's safety and welfare. Detailed assessments were carried out with each patient before any treatment was carried out with them. Their care and treatment preferences were recorded to ensure that they were delivered in line with their wishes. Patients told us that prior to their treatment, options and costs were clearly explained to them and that this enabled them to make informed decisions regarding their care.

Patients also told us that they were treated with dignity and respect, and that their privacy was always maintained. We saw that staff spoke politely to people and carried out consultations in a designated room, dedicated for that purpose.

All the patients we spoke with were very happy with the services provided by Perfect Smile Spa-Dental Practice. They told us "this is an excellent and a very well-managed practice, where you get seen on time by a brilliant team " and "we are regularly asked for our comments about the service and would raise a concern if we were unhappy with any aspect of it."

People should get safe and appropriate care that meets their needs and supports their rights

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### Our judgement

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The provider was meeting this standard.

Care and treatment was planned in a way that ensured people's safety and welfare.

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### Reasons for our judgement

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Care and treatment was planned and delivered in a way that ensured people's safety and welfare. The service had processes in place to undertake full clinical assessments that included patients' previous dental and medical histories. Patients were given information that was specific to their treatment for example the benefits and risks involved with each option that was made available to them. This ensured that they made informed decisions that were best suited to them. Treatment outcomes were reviewed with each patient to ensure that they were satisfied with them.

We were told and saw evidence that staff had received training in specialist dental procedures, as well as dealing with medical emergencies. This ensured that patients received care and treatment that promoted their safety and welfare.

We saw that regular maintenance checks of equipment were carried out to ensure that they were safe to use.

**People should be protected from abuse and staff should respect their human rights**

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## **Our judgement**

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The provider was meeting this standard.

People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent it from happening.

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## **Reasons for our judgement**

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People who used the service were protected from the risk of abuse because the provider had systems in place to identify and protect people from coming to harm from abuse. Safeguarding policies were in place and staff were aware of them. Staff also knew how to deal with abuse and who to contact should they suspect or witness abuse.

All staff had attended safeguarding training that included children and vulnerable adults. There was a process in place to support staff to ensure their own safety and patient safety whilst on the premises.

We spoke to several patients and they all told us that they felt safe and comfortable at the surgery.

**People should be cared for in a clean environment and protected from the risk of infection**

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**Our judgement**

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The provider was meeting this standard.

People were cared for in a clean, hygienic environment.

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**Reasons for our judgement**

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There were effective systems in place to reduce the risk and spread of infection. The clinical and waiting areas were observed to be clean on both floors of the practice. Staff told us how they prepared the surgeries before and between patients. The surgeries were cleaned on a daily basis and between each patient using recommended cleaning materials. Staff told us that they wore protective equipment when cleaning the equipment and environment, and during the treatment of patients.

There were separate decontamination rooms on both floors of the practice which housed five surgeries. Staff talked us through the decontamination of instruments from dirty to clean, and 'ready for use'. We checked all 'bagged instruments' and found that they were in date. A system was in place to ensure that expiry dates were regularly checked.

We inspected two autoclave machines and found that test strips were used with each cycle and records kept. Both machines had an annual service to ensure their safety. The provider had a copy of the Department of Health's guidance: 'Decontamination Health Technical Memorandum 01-05: Decontamination in primary care dental practices', which he used as guidance to ensure that the practice was maintained to a safe standard for patient care.

An infection prevention and control policy and procedure was in place and all staff had received training in infection prevention and control. Staff were observed to be wearing visibly clean uniforms on the day. They told us that they changed them daily which was in line with the guidance set out in the Department of health's guidance referred to above.

We saw certificates for Legionella testing to ensure that the water was safe for use at the practice. Appropriate systems were in place for the storage and disposal of sharps and clinical waste. This ensured that patients were seen and treated in a practice that was safe and free from hazards to their health whilst being on the premises.

## Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

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### Our judgement

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The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

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### Reasons for our judgement

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Following their treatment each patient was given a questionnaire to get their views on the people that were involved with them for example the dentist, nurse, hygienist, and the receptionist. They were also asked to comment on their general care and for suggestions on how the practice could improve. We saw samples of the questionnaires and the comments were positive. The provider told us that this was done to ensure that he responded to what people wanted from his service. We spoke with three patients and asked them whether there was anything that could be improved at the surgery. They all told us that there was nothing and that the surgery was fine as it was.

We also saw evidence of a range of audits that were carried out for example on infection control, prescription drugs, the safe use of x-ray equipment, and a cleaning audit relating to 15 areas of the surgery. There was recorded evidence that practice meetings were regularly held with all staff in which quality issues such as the cleanliness of the practice and feedback from patients were discussed. The combination of these systems and practices at Perfect Smile Spa - Dental Practice ensured that patients received a safe service.

## About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

## How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

 **Met this standard** This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

 **Action needed** This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

 **Enforcement action taken** If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

## How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

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**Minor impact** – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

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**Moderate impact** – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

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**Major impact** – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

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We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

## Glossary of terms we use in this report (continued)

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### **(Registered) Provider**

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There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

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### **Regulations**

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We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

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### **Responsive inspection**

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This is carried out at any time in relation to identified concerns.

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### **Routine inspection**

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This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

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### **Themed inspection**

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This is targeted to look at specific standards, sectors or types of care.

## Contact us

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