

Statement of purpose

Health and Social Care Act 2008

Part 1

The provider's name, legal status, address and other contact details

Including address for service of notices and other documents

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status

Full name¹	Aqua Lotus Ltd
CQC provider ID	
Legal status¹	Organisation

2. Provider's address, including for service of notices and other documents

Business address²	83 Fern Lane, Heston
Town/city	Hounslow
County	Middlesex
Post code	TW5 0HH
Business telephone	07846 740 221
Electronic mail (email)³	aqualotusltd@gmail.com

By submitting this statement of purpose you are confirming your willingness for CQC to use the **email address** supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email please check or tick the box below. We will not share this email address with anyone else.

I/we do NOT wish to receive notices and other documents from CQC by email	<input type="checkbox"/>
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¹ Where the provider is a partnership please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below

² Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.

³ Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Please note: CQC can deem notices sent to the email or postal address for service you supply in your statement of purpose as having been served as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents.

3. The full names of all the partners in a partnership

Names:

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Part 2

Aims and objectives

Please read the guidance document *Statement of purpose: Guidance for providers*.

Aims and objectives

What are your aims and objectives in providing the regulated activities and locations shown in part 3 of this statement of purpose

To consistently provide dental care of a high standard throughout the practice, promoting good oral health to all patients attending.

Ensure that all staff members are committed and participate in CPD and that they have the correct skills and training to carry out duties.

To provide the highest possible standards of cross-infection control working towards best practice in HTM01-05

Understand and meet the needs of our patients, promote informed decision making and encourage patient feedback.

Ensure proper procedures are in place at all times for the Health & Safety of both Patients and Staff.

Involve other professionals in the care of patients if this is in their best interests and execute referrals in a timely manner

Participate in local initiatives to promote the benefits of good oral health.

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Part 3

Location(s), and the people who use the service there their service type(s) and their regulated activity(ies)

Fill in a separate part 3 for each location

The information below is for location no.:	1	of a total of:	1	locations
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Name of Location	Envy Smile Dental Limited
Address	3 Goldhawk Road London
Postcode	W12 8QQ
Telephone	0203 719 6889
Email	aqualotusltd@gmail.com

Description of the location (The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>A DDA compliant dental practice with city centre parking. We have 2 surgeries, a large reception and waiting area, kitchen, disabled-accessible toilet, decontamination room, and external yard. Envy Smile is a fully private practice.</p> <p>Our Team –</p> <p>Dr Hemani Gill 265440 Principal Dentist</p> <p>Nurses –</p> <p>Patrizia Coppola Trainee Dental Nurse</p> <p>Ludmila Woolf 293621 Qualified Dental Nurse</p>	
No of approved places / overnight beds (not NHS)	n/a

CQC service user bands			
The people that will use this location ('The whole population' means everyone).			
Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>
		Children aged 13-18	<input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>

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The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

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Regulated activity(ies) carried on at this location	
Personal care	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>
Registered Manager(s) for this regulated activity: Dr Hemani Gill	
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Surgical procedures	<input checked="" type="checkbox"/>
Registered Manager(s) for this regulated activity: Dr Hemani Gill	
Diagnostic and screening procedures	<input checked="" type="checkbox"/>
Registered Manager(s) for this regulated activity: Dr Hemani Gill	
Management of supply of blood and blood derived products etc	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Maternity and midwifery services	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Termination of pregnancies	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Services in slimming clinics	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Nursing care	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	
Family planning service	<input type="checkbox"/>
Registered Manager(s) for this regulated activity:	

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Part 4

Registered manager details

Including address for service of notices and other documents

Please first read the guidance document *Statement of purpose: Guidance for providers*

The information below is for manager number:	1	of a total of:	1	Managers working for the provider shown in part 1
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1. Manager's full name	Dr Hemani Gill
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2. Manager's contact details	
Business address	3 Goldhawk Road
Town/city	London
County	0
Post code	W12 8QQ
Business telephone	0203 719 6889
Manager's email address¹	
aqualotusltd@gmail.com	

¹ Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.

3. Locations managed by the registered manager at 1 above (Please see part 3 of this statement of purpose for full details of the location(s))	
Name(s) of location(s) (list)	Percentage of Time spent at this location.
Envy Smile Dental Limited	100%

4. Regulated activity(ies) managed by this manager		
Personal care	<input type="checkbox"/>	
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Surgical procedures	<input checked="" type="checkbox"/>	
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Maternity and midwifery services	<input type="checkbox"/>	
Termination of pregnancies	<input type="checkbox"/>	
Services in slimming clinics	<input type="checkbox"/>	
Nursing care	<input type="checkbox"/>	
Family planning service	<input type="checkbox"/>	

5. Locations, regulated activities and job shares

Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below.

Please also describe below any job share arrangements that include or affect this manager.