North Cardiff Dental & Implants
RHIWBINA

STATEMENT OF PURPOSE	
Name of establishment or agency	North Cardiff Dental & Implants Ltd
Address and postcode	165 Pantbach Road, Rhiwbina, Cardiff CF14 1TZ
Telephone number	02922679999
Email address	reception@northcardiffdentalimplants.co.uk
Fax number	N/A

Aims and objectives of the establishment or agency

We wish to promote good oral health and to provide the best quality dental services for our patients whilst always keeping them informed of the cost of their treatment and obtaining their permission to proceed. We provide a confidential and safe environment through excellent teamwork and leadership.

▪ At all times we show our patients courtesy and respect regardless of their ethnic origin, sexual orientation or religious belief.

▪ Our patients are informed and motivated through education and encouragement to help maintain their oral health, our hygiene team being an integral part of this.

▪ We try to help with all disabilities and assist with language and hearing difficulties.

▪ To provide personal care in ways that have a positive outcome and experience for our patients.

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▪ Wherever possible, see patients on time and give an apology and an explanation if we run late.

▪ Spend sufficient time with patients

▪ To ensure we are fit for purpose through constant maintenance of our equipment and surgeries and staff training.

▪ Use good quality modern materials and techniques.

▪ To cooperate with other professionals where referral is necessary whilst maintaining confidentiality under Information Governance.

▪ To ensure an awareness of current national guidelines affecting the way we care for our patients.

▪ Promote a culture of good and open communication with patients so they can help shape our service provision.

REGISTERED MANAGER DETAILS	
Name	Alex McWhirter
Address and postcode	[redacted]
Telephone number	[redacted]
Email address	manager@northcardiffdentalimplants.co.uk
Fax number	N/A

Relevant qualifications:

Diploma in Dental Nursing Level 3 NVQ City and Guilds 2019

Certificate in Phlebotomy Skills Level 3

Certificate in the Taking of Digital Dental Impressions

BSc Hons Environmental Science 2012, Ulster University

Relevant experience:

- Started at the practice as a nurse in September 2021, quickly progressed to treatment coordinator in November and then Practice Manager in December.

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- Prior to joining North Cardiff Dental & Implants, several years' experience as a dental nurse in a busy mixed practice, hybrid role which involved elements of treatment coordination and diary management as well as working chairside.
- Confident communication skills, able to deal with the public well and reassure them where necessary.
- Flexible and adaptable approach to working to ensure business and patient needs are met.
- Inquisitive to learn and develop within my role.
- Ability to work to set criteria and follow processes, having worked to set standards within my roles.
- Maintaining CPD and ensuring I stay up to date in my knowledge, as well as yearly practice CPR and medical emergencies training.

RESPONSIBLE INDIVIDUAL DETAILS (please delete this section if not applicable)	
Name	Dr Zara Virani
Address and postcode	[redacted]
Telephone number	[redacted]
Email address	[redacted]
Fax number	N/A
Relevant qualifications: BDS MJDF RCS (Eng)	
Relevant experience: - Advanced experience with Windows and Mac, Software of Excellence with Clinipad and digital radiography - Yearly training in Basic Life Support and Medical Emergencies Management - Regular CPD covering recommended GDC topics, including Safeguarding of Vulnerable Adults and radiography safety. - An experienced Associate Dentist.	
Roles and responsibilities within the organisation: Principal Dentist Company Director	

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STAFF DETAILS		
Name	**Position**	**Relevant qualifications / experience**
Alex McWhirter	Practice Manager	Diploma in Dental Nursing Level 3 NVQ City and Guilds 2019 Certificate in Phlebotomy Skills Level 3 Certificate in the Taking of Digital Dental Impressions Certificate in Clinical Photography BSc Hons Environmental Science 2012, Ulster University
Dr Zara Virani	Principal Dentist Responsible Individual Company Director	BDS MJDF RCS (Eng) Cardiff University 2012
Dr Aly Virani	Clinical Director Company Director Implant Dentist	BDS MJDF RCS (Eng) Cardiff University 2012 Dip Imp Dent RCS Ed Diploma in Implant Dentistry - Royal College of Surgeons, Edinburgh
Dr Aston Parmar	Associate Dentist	BChD University of Leeds 2010
Dr Florence King	Associate Dentist	BDS Cardiff University 2020
Dr Hannah Crowe	Associate Dentist	BDS Cardiff University 2020
Dr Chris Chucas	Visiting Sedationist	BDS University of Liverpool 2012 SAAD Intravenous & Inhalation Sedation 2019

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Meng Jin	Dental Technician	Diploma of Dental Technology, Sydney Institute Randwick, Australia 2013 (GDC Registered under s36C of the Dentists Act 1984 2017) MSc Dental Technology Cardiff Metropolitan University (ongoing)
Rochelle Cronick	Qualified Dental Nurse	Diploma in Dental Nursing Level 3 QCF City and Guilds 2019 Certificate in the taking of Dental Impressions Certificate in Clinical Photography Certificate in Phlebotomy Skills Level 3 Certificate in Suture Removal Certificate in Dental Radiography
Natasha Sewell	Qualified Dental Nurse	Diploma in Dental Nursing Level 3 QCF City & Guilds 2020 Certificate in the taking of Dental Impressions Certificate in Phlebotomy Skills Level 3 BDA Certificate in Dental Radiography Certificate in Suture Removal

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		Certificate in Clinical Photography
Cirwyn Watkins	Qualified Dental Nurse	Dental Nursing National Certificate NEBDN 2005 BDA Certificate in Dental Radiography Certificate in Fluoride Varnish Application Certificate in the taking of Dental Impressions ILM Level 3 Leadership and Management Certificate in Clinical Photography Certificate in Suture Removal Certificate in Phlebotomy Skills Level 3 NEBDN Certificate in Orthodontic Nursing
Amelia Edmonds	Qualified Dental Nurse	Diploma in Dental Nursing Level 3 QCF City & Guilds 2022 Certificate in the taking of Dental Impressions Certificate in Phlebotomy Skills Level 3 Certificate in Dental Radiography Certificate in Suture Removal Certificate in Clinical Photography

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Aiva Davis	Qualified Dental Nurse	Diploma in Dental Nursing (Universirty of Portsmouth, 2025)

ORGANISATIONAL STRUCTURE

Principal Dentist: Dr Zara Virani (Wani)
Clinical Director: Dr Aly Virani
Practice Manager: Alex McWhirter

Clinical Team:

Dentist: Dr Aston Parmar
Dentist: Dr Florence King
Dentist: Dr Hannah Crowe
Visiting Sedationist: Dr Chris Chucas

Nursing Team:

Senior Dental Nurse: Natasha Sewell
Dental Nurse: Rochelle Cronick
Dental Nurse: Amelia Edmonds
Dental Nurse: Aiva Davis

Patient Coordinator/Dental Nurse: Cirwyn Watkins

SERVICES / TREATMENTS / FACILITIES

- Routine Dentistry (to include examination, emergency appointments, composite fillings, inlay/onlay, crowns, bridgework, extraction, radiographs including OPG & Cone Beam CT scans, mouthguard/gumshields) (for all ages)
- Cosmetic Dentistry (to include composite bonding, tooth whitening, veneers) (for 18+ years old)
- Orthodontic Treatment (to include Invisalign, Six Month Smiles, Quick Straight Teeth, Inman Aligners and traditional orthodontic appliances) (for 18+ years old)

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- Hygiene Services (including Airflow) (for 18+ years old)
- Endodontics (for 16+ years old)
- Dental Implants (for 18+ years old)
- Oral Surgery (to include surgical extraction, bone expansion, bone graft supplement, sinus tap, sinus lift and soft tissue graft) (for 18+ years old)
- Facial Aesthetics (for 18+ years old)
- Intravenous Sedation with visiting seditionist Dr Chris Chucas (for 18+ years old)

All treatments will be provided in the Primary Care setting in fully equipped clinical rooms. Specialist materials will be provided.
The people who use our services will have a variety of needs in relation to oral health. Specific health needs - we aim to focus of preventative oral healthcare, providing care of the highest standard, and address patients' aesthetic concerns. Our governance arrangements will ensure that responsibilities are clear, quality and performance are regularly considered, and risks are identified, understood and managed; team members will be clear about their lines of accountability and all employees will have job descriptions. Team members will be supported to meet their professional standards and follow their professional code of conduct. The registered manager, who is in day-to-day charge of regulated activities, will understand their responsibility. We will have robust record-keeping processes in place to ensure that clinical and team records are complete and contemporaneous and are kept in line with the current regulatory requirements. We will operate a QA programme with ongoing risk assessment reviews and the following internal practice audits: health and safety, infection control, x-ray quality and safety, care standards, patient involvement and consent, emergency procedures, patient complaints, clinical notes, practice management, domestic cleaning, audit of prescription drugs and clinical waste. Our quality assurance system will support communication about quality and safety of services. We will actively seek views of the service users' opinion about the level of service we provide. Team members will be actively involved in the planning and delivery of services. We will conduct regular practice meetings where quality and safety is discussed, any concerns and/or complaints are acted upon in a timely manner and the necessary improvements are made. Our practice policies and procedures that are also codes of conduct ensure candour, openness, honesty and transparency. Our QA system will encourage continuous improvements. It will include planned reviews of each area of our business compliance and on-going training and discussions in each area are provided to all team members via regular staff meetings. We also carry out an annual management review of overall practice performance and our standards and make sure they show continuous improvement. Patients and those close to them will be involved in their care and receive

the support they need to cope emotionally with their care and treatment; when discussing treatment options team members will not use clinical jargon and always check that the patient fully understands the information provided. Where necessary we use visual aids or help of the interpreter to improve the patient's understanding. We will provide patients with sufficient information for them to make an informed choice about their care. Patients will be encouraged to ask questions about their care and treatment needs and options. Team members will respect patients' choices and preferences by following them whenever possible. We will encourage patients to ask further questions if further information is provided to them that the choice they made was not in their best interest. Patients will be provided with treatment plans detailing their treatment options and associated costs. We will have: Systems, processes and procedures in place to ensure all care and treatment is carried out safely. Quality assurance processes in place if things go wrong. Systems, processes and practices in place to keep people safe and to safeguard them from abuse. Arrangements in place to make sure that risks to service users are assessed, their safety is monitored and maintained. Schedule of risk assessment reviews (at least annually) to ensure that potential risks to the service are anticipated and plan in advance, these include the following areas: Information Security, Business Impact Analyses, Health and Safety, Infection Prevention and Control, Legionella, Fire, COSHH, Domestic Cleaning. Systems and processes in place to protect people from unsafe use of equipment, materials and medicines. Our premises and equipment will be clean, secure and properly maintained and kept in accordance with the current regulations and guidance. The premises and equipment will be properly purchased, used and maintained. Appropriate arrangements will be in place for managing medicines. Our decontamination procedures will ensure that sufficient quantities of instruments/equipment will be available for each clinical session.

We offer intravenous sedation with an external visiting seditionist. There is an annual sedation audit carried out, and the clinical team undertake annual immediate life support (ILS) training. We hold copies of all sedation case records in relevant patient files. Each patient undergoes a comprehensive pre sedation assessment to ensure their suitability and safety. Our visiting sedationist has provided evidence of all qualifications and competencies which we hold on file. All equipment brought into the practice is checked by our team to ensure it is fit for purpose. A facility checklist for sedation safety is completed prior to each sedation to ensure consistency and standards.

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PATIENTS VIEWS

We obtain patients' views by requesting completion of an anonymous feedback form. This can be completed electronically or on paper.
We also obtain patients' views via requests for feedback, both verbal and via text/email.
All feedback is reviewed during team meetings and changes made to best practices where necessary.
Where the feedback has not been anonymous, we will respond to the patient and advise of the outcome from the review of the feedback.
People will be able to access care and treatment in a timely way; waiting time, cancellations and delays will be kept to a minimum. We will monitor our performance in this area by conducting patient waiting time surveys and take appropriate action as required. We will have processes in place to ensure that people have timely access to urgent treatment, including out-of-hours arrangements.

ARRANGEMENTS FOR VISITING / OPENING HOURS

The practice opening hours:

Monday – Thursday: 9:30am-5:30pm

Friday: 9:30am-1:15pm

Saturday & Sunday: Closed

Emergency out of hour care instructions are on our normal telephone line.
Outside working hours appointments by arrangement.

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ARRANGEMENTS FOR DEALING WITH COMPLAINTS

The Patient Complaints Procedure will be available in the reception area and will also be available on the practice website.

Patients can complain either in person, via email or telephone and in writing.

Complaints are to be made to Alex McWhirter (Practice Manager).

The complaints will be investigated, and an outcome provided to the patient within 3-5 working days.

A copy of all complaints along with the outcome and any details of any changes made as a result of the complaint will be recorded and available if requested by the registration authority within 28 days of the request being made.

If necessary, if the patient feels that the matter has not been resolved to their satisfaction, they can contact the General Dental Council at www.gdc-uk.org or by contacting HIW:

Healthcare Inspectorate Wales
Welsh Government
Rhydycar Business Park
Merthyr Tydfil
CF48 1UZ

Telephone: 0300 062 8163 Email: hiw@gov.wales

People's concerns and complaints will be listened and responded to in a timely manner and are used to improve the quality of care; the practice will support the culture of openness and actively seek comments and feedback from team members and patients to make continuous improvement to our services. The practice will have a Patients Complaints policy and procedure in place - these will identify the person responsible for complaints handling and the time limits for complaints handling, which will be adhered to. Details of all problems, complaints and significant events and their investigations will be recorded using Event Records and Registers. All comments and complaints will be investigated fully and where possible, resolved to the satisfaction of the person raising the complaint. There may be occasions when this is not possible, where the complaint is outside the practice responsibility and cannot be upheld - contact details of any external complaints services including: The Dental Complaints Service for private

treatment and HIW will be provided in this instance. All problems, complaints and significant events will be summarized in the Event Register which will be regularly monitored and updated as the issues are resolved. The progress of resolution, any lessons learned and how these affected the practice policies and procedures as a result will be discussed during the practice meetings. An Audit of Patient Complaints will be carried out at least once a year or more often if required. The result of the audit will be discussed at the practice meeting as well as at the Annual Management Review when practice standards will be reviewed. People's consent to care and treatment will always be sought in line with legislation and guidance; The team will be trained in obtaining consent and follow the GDC standards on Valid Consent. When valid consent is obtained the clinician discusses treatment options with the patient and this discussion will then be recorded on patient notes. The record will include a note whether the patient gave consent to treatment or refused. The patient will be asked to sign a treatment plan to confirm their agreement. If there are changes to agreed treatment, the treatment plan will be modified, and the patient will be asked to sign it to accept the changes before the treatment is carried out. Team members will be trained in the Mental Capacity Act and will be able to recognize when a patient does not have capacity to give consent. Team members will also be encouraged to respect the cultural, social values and beliefs of patients and the impact these might have on the patient's willingness to consent to some procedures.

PRIVACY AND DIGNITY

People will be treated with kindness, dignity, respect and compassion while they receive care and treatment; the reception staff will be provided with appropriate customer service training to make sure they are able to deal with difficult demands from patients. There will be an area in the practice for holding private discussions and we will always check that patients feel comfortable and relaxed to allow them to concentrate on discussion about their care. All team members will understand principles of patient confidentiality. Our services will consider the needs of those in vulnerable circumstances; training in equality and diversity will start during staff inductions and will be maintained via training during practice meetings. The practice seeks the patients' views on the services available to them and makes reasonable adjustments as a result. We will be aware of religious festivals and holidays and avoid offering these days when patients book appointments or offering early appointments on known fasting days. We will be familiar with individual patient's issues related to their disability and appointments are offered at the times best suited for them and any additional arrangements are made.

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Date Statement of Purpose written	23/11/2020
Author	Lauren Venables

STATEMENT OF PURPOSE REVIEWS

Date Statement of Purpose reviewed	20/06/2022
Reviewed by	Alex McWhirter
Date HIW notified of changes	20/06/2022

Date Statement of Purpose reviewed	13/06/2023
Reviewed by	Alex McWhirter
Date HIW notified of changes	13/06/2023

Date Statement of Purpose reviewed	08/08/2024
Reviewed by	Alex McWhirter
Date HIW notified of changes	08/08/2024

Date Statement of Purpose reviewed	07/04/2025
Reviewed by	Alex McWhirter
Date HIW notified of changes	07/04/2025

Date Statement of Purpose reviewed	14/01/2026
Reviewed by	Alex McWhirter
Date HIW notified of changes	14/01/2026