North Cardiff Dental & Implants
RHIWBINA

PATIENT INFORMATION LEAFLET	
Name of establishment	North Cardiff Dental & Implants
Address and postcode	165 Pantbach Road Rhiwbina Cardiff CF14 1TZ
Telephone number	02922679999
Email address	reception@northcardiffdentalimplants.co.uk
Fax number	N/A
Name of Registered Manager	Alex McWhirter
Name of Registered Provider	Cloves Dental Care Ltd

North Cardiff Dental & Implants
RHIWBINA

Summary of the Statement of Purpose

Treatment and Facilities:

We provide the following to the whole population:

Routine dentistry
Restorative dentistry
Orthodontics
Hygiene treatments, including direct access
Facial aesthetics
Endodontics and Implants - we have a CBCT in the practice
Intravenous sedation by arrangement with a visiting sedationist

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 supports communication about quality and safety of services. We actively seek views of the service users' opinion about the level of service we provide. Team members are actively involved in the planning and delivery of services. We conduct regular practice meetings where quality and safety are 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 encourages continuous improvements. It includes 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 are kept 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 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.

Systems, processes and procedures are in place to ensure all care and treatment is carried out safely. Quality assurance processes are in place if things go wrong. Systems, processes and practices are in place to keep people safe and to safeguard them from abuse. Arrangements are in place to make sure that risks to service users are assessed, and their safety is monitored and maintained. Risk assessment reviews are scheduled (at least annually) to ensure that potential risks to the service are anticipated and planned for 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 are in place to protect people from unsafe use of equipment, materials and medicines.

Our premises and equipment are kept clean, secure and properly maintained and kept in accordance with the current regulations and guidance. The premises and equipment are properly purchased, used and maintained. Appropriate arrangements are in place for managing medicines. Our decontamination procedures ensure that sufficient quantities of instruments/equipment are available for each clinical session.

Our primary aim is to deliver the highest standard of dental care while ensuring patient comfort and safety. As part of our commitment to enhancing the patient experience, we are dedicated to providing Intravenous (IV) Sedation as a safe and effective method to alleviate anxiety, manage pain, and facilitate complex dental procedures.
IV Sedation will be offered to patients following a thorough assessment of their medical history, dental needs, and anxiety levels. The decision to provide sedation will be made collaboratively with the patient, taking into account their preferences and the clinical requirements of the procedure.
Our practice ensures that IV Sedation is administered only by dental professionals who have undergone rigorous training and are fully accredited in conscious sedation techniques. Our team holds the necessary certifications and adheres to the guidelines set forth by the General Dental Council (GDC), the Royal College of Surgeons, and the Society for the Advancement of Anaesthesia in Dentistry (SAAD).

Continuing professional development (CPD) is a priority within our practice to ensure that all staff involved in sedation are up-to-date with the latest practices, safety protocols, and emergency procedures. At North Cardiff Dental & Implants we are committed to maintaining the highest standards of care. We regularly review our sedation protocols and outcomes to ensure ongoing improvement. Feedback from patients is actively sought and used to refine our practices and enhance patient satisfaction.

The practice opening hours:

Monday to Thursday: 9:00am – 5:30pm
Friday: 9:00am – 1:30pm
Saturday & Sunday: Closed

Emergency out of hours care instructions are on our normal telephone line.

Outside working hours appointments by arrangement.

Dealing with patients who are violent or abusive to staff:

Violence is unacceptable in whatever form it takes, for whatever reason. We define violence and aggression as:

• actual or threatened physical assaults on staff
• psychological abuse of staff
• verbal abuse which includes shouting, swearing and gestures
• threats against practice personnel which occur in the workplace.

There is a Zero Tolerance on Violence and Aggression policy within the practice that we adhere to.

We will: undertake risk assessments, ensure that the practice premises are secure, provide training in dealing with difficult/aggressive patients during staff meetings.

All incidents will be reported at once and a recording form completed. In the event of any actual or threatened violence, the police will be called.

Injuries will be recorded in the accident book.

Complaints Procedure:

Patients will be advised on how to provide feedback on the service and how to raise a complaint about the service or the care they receive. The Patient Complaints procedure will be on display in the reception area and will also be on the practice website.

Complaints are to be addressed to Alex McWhirter (Practice Manager) either in person, via email or telephone or in writing.

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 because 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:

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

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

OR

Dental Complaints Service
Stephenson House
2 Cherry Orchard Road
Croydon
CR0 6BA

People's concerns and complaints will be listened to 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.

North Cardiff Dental & Implants
RHIWBINA

STAFF DETAILS		
Name	**Position**	**Relevant qualifications / experience**
Alex McWhirter GDC 287327	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 GDC 229408	Principal Dentist Responsible Individual Company Director	BDS MJDF RCS (Eng) Cardiff University 2012
Dr Aly Virani GDC 229404	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 GDC 194901	Associate Dentist	BChD University of Leeds 2010
Dr Florence King GDC 289259	Associate Dentist	BDS Cardiff University 2020 SAAD Intravenous & Inhalation Sedation 2025
Dr Hannah Crowe GDC 289013	Associate Dentist	BDS Cardiff University 2020
Dr Chris Chucas GDC 230600	Visiting Sedationist	BDS University of Liverpool 2012

		SAAD Intravenous & Inhalation Sedation 2019
Meng Jin GDC 269709	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 GDC 287586	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 Suture Removal Certificate in Phlebotomy Skills Level 3 Certificate in Dental Radiography
Natasha Sewell GDC 291373	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 Certificate in Dental Radiography Certificate in Suture Removal

		Certificate in Clinical Photography
Cirwyn Watkins GDC 115672	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 GDC 304729	Qualified Dental Nurse	Diploma in Dental Nursing Level 3 QCF City & Guilds 2022 Certificate in the taking of Dental Impressions Certificate in Clinical Photography Certificate in Suture Removal Certificate in Phlebotomy Skills Level 3 Certificate in Dental Radiography

Aiva Davis GDC 330021	Qualified Dental Nurse	Diploma in Dental Nursing (Portsmouth University) 2025

PATIENTS VIEWS

We obtain patients' views by requesting completion of an anonymous feedback form. This is available both electronically and on paper.

All feedback will be 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 are able to access care and treatment in a timely way; waiting time, cancellations and delays will be kept to a minimum. We monitor our performance in this area by conducting patient waiting time surveys and take appropriate action as required. We have processes in place to ensure that people have timely access to urgent treatment, including out-of-hours arrangements.

DEVELOPMENT AND TRAINING

The team have the skills, knowledge and experience to deliver effective care and treatment; The team skill set, and training requirements is continually reviewed, and annual training schedules agreed to and followed.

Our services takes into account 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. Our governance arrangements 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 have job descriptions. Team members are 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, understands their responsibility. We 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 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 supports communication about quality and safety of services. We actively seek views of the service users' opinion about the level of service we provide. Team members are actively involved in the planning and delivery of services. We 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 includes 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.

OTHER ADDRESSES

We provide our dental service from one location:

North Cardiff Dental & Implants

165 Pantbach Road

Rhiwbina

Cardiff
CF14 1TZ

Telephone: 02922679999
Email address: reception@northcardiffdentalimplants.co.uk

ARRANGEMENTS FOR ACCESS TO THE PRACTICE

Our practice has disabled access and is located on the ground floor with modified toilet facilities.

Please inform our team at the time of booking of any access requirements.

North Cardiff Dental & Implants
RHIWBINA

PATIENT RIGHTS AND RESPONSIBILITIES

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 have processes in place to ensure that people have timely access to urgent treatment, including out-of-hours arrangements.

We will explain the treatment options and patients will be provided with treatment plans detailing their treatment options and associated costs.

Keeping Appointments:

We have an Appointment Cancellation Policy that we adhere to in the practice.

Patients who have missed appointments or cancelled within 24 hours may incur a charge; the amount charged will depend on the length and type of appointment. The patient will be advised of this at the time of booking the appointment.

Repeated failure to attend appointments may result in being asked to no longer use the practice.

Our deposit and cancellation policy is viewable in full on our website and in the patient information folder at reception. It is also linked in all automatic appointment confirmation emails, and verbally confirmed at time of booking all appointments.

ACCESS TO PATIENT INFORMATION

The practice staff who have access to patient information are:

Dr Zara Wani - Company Director, Principal Dentist and Responsible Individual

Dr Aly Virani – Clinical Director, Company Director, and Implant Dentist

Alex McWhirter – Practice Manager

Dr Aston Parmar – Associate Dentist

Dr Hannah Crowe – Associate Dentist

Dr Florence King - Associate Dentist

Dr Chris Chucas – Visiting Sedationist

Meng Jin – Dental Technician

Rochelle Cronick – Dental Nurse

Natasha Sewell – Dental Nurse

Cirwyn Watkins – Dental Nurse

Amelia Edmonds – Dental Nurse

Aiva Davis – Dental Nurse

The practice complies with the Data Protection Act. Records will be kept secure and, in a location where it is not possible for other patients or individuals to read them.

Collection of data:

North Cardiff Dental & Implants keep records about your health and any treatment and care you receive from our practice. These records help to ensure that you receive the best possible care. They may be written down in paper records or held on computer. These records may include:

- Basic details about you such as name, address, date of birth, next of kin, etc.
- Contact we have had with you such as appointments.
- Notes and reports about your health, treatment and care.
- Results of x-rays.
- Relevant information from people who care for you and know you well such as health professionals and relatives.
- Financial information for payment of any treatments

It is essential that your details are accurate and up to date. Always check that your personal details are correct when you visit us and please inform us of any changes as soon as possible.

The Data Protection Act gives you the right to access information held about you. Your right of access can be exercised in accordance with the Act. All requests for information are to be directed to the practice manager, Alex McWhirter.

If, after investigation, a member of staff is found to have breached patient confidentiality or this policy, he or she shall be liable to summary dismissal in accordance with the practice's disciplinary policy.

Date Patient Information Leaflet written	23/11/2020
Author	Lauren Venables

This document is reviewed and updated regularly, please see next page for details.

PATIENT INFORMATION LEAFLET REVIEWS & UPDATES

Date Patient Information Leaflet reviewed	20/06/2022
Reviewed by	Alex McWhirter
Date HIW notified of changes	20/06/2022

Date Patient Information Leaflet reviewed	13/06/2023
Reviewed by	Alex McWhirter
Date HIW notified of changes	13/06/2023

Date Patient Information Leaflet reviewed	08/08/2024
Reviewed by	Alex McWhirter
Date HIW notified of changes	08/08/2024

Date Patient Information Leaflet reviewed	07/04/2025
Reviewed by	Alex McWhirter
Date HIW notified of changes	07/04/2025

Date Patient Information Leaflet reviewed	14/01/2026
Reviewed by	Alex McWhirter
Date HIW notified of changes	14/01/2026