Abersoch Dental Care

STATEMENT OF PURPOSE	
Name of establishment or agency	Abersoch Dental Care
Address and postcode	19 Cae Du Abersoch Gwynedd LL53 7EN
Telephone number	(01758) 713955
Email address	christofflotter@aol.com
Fax number	n/a

Aims and objectives of the establishment or agency

Our aim is to provide a full range of dental services in a person centered, equitable, efficient, effective, timely and safe manner. Our aim is ,having ensured that oral health is established,to empower the individual towards dental self reliance.This we aim to achieve via respecting the individual's dignity, privacy and personal rights.We aim to consistently improve our service via vigorous quality assurance including audits,risk assessments,training

At Abersoch Dental Care, we aim to provide dental care of a consistent quality for all patients; we strive to meet the high standards expected in any clinical setting. We expect all members of our dental team to work to these standards to help us achieve our aim of providing a quality service. Our management

systems define each practice member's responsibilities when looking after you.

The policies, systems and processes in place in our practice, reflect our professional and legal responsibilities and follow recognised standards of good practice.

At Abersoch Dental Care we aim to achieve the best results for our patients through clear policies and systems and appropriately trained and competent team members. We evaluate our practice on a regular basis through audit, peer review and patient feedback and monitor the effectiveness of our quality assurance procedures.

We work with external agencies, including the British Dental Association, the primary care organisation Betsi Cadwalder University Health Board.

Quality standards and procedures

Abersoch Dental Care has effective procedures for assuring and enhancing the quality of the services we provide for our patients
In providing our patients with care of a consistent quality, we will:

- Provide a safe and welcoming environment
- Ensure all members of the dental team are appropriately trained
- Provide patient with information about the practice and the care available and ensure the patient understands the terms on which care is offered
- Display indicative treatment charges
- Explain all treatment options and agree clinical decisions with the patient explaining the possible risks involved with each option
- Provide treatment plans based on the agreed treatment with an estimate of the likely costs
- Obtain valid consent is for all treatment. Written consent will be sought for extensive or expensive treatments and treatment provided under conscious sedation
- Refer to specialists for investigation or treatment as appropriate and without undue delay
- Maintain contemporaneous clinical records with an up-to-date medical history for all patients
- Provide secure storage of patient records to maintain patient confidentiality
- Explain the procedure to follow for raising a complaint about the service, identifying the practice contact

For our dental team, we undertake to:

- Provide a safe working environment through hazard identification and risk assessment
- Provide induction training for all new team members
- Provide job descriptions and contracts of employment to all members of staff.
- Review and update job descriptions annually to reflect current duties and responsibilities

- Agree in writing the terms for all self-employed contractors working at the practice
- Provide ongoing training and identify opportunities for development for all employees
- Maintain staff records ensuring the following information is up to date:
  - relevant medical history information
  - emergency contact details
  - absence through holiday and sickness
  - performance reviews
  - in house and external training
- Ensure that all staff are kept up to date with all practice policies and procedures, including patient charges and the relevant forms.

The dental team

Team members implement and adhere to the practice policies and procedures which are readily accessible at reception.

All new member of the team receive training in practice-wide procedures, policies and quality assurance activities as part of their induction. Appraisal meetings take place annually and include an assessment of training needs.

We expect everyone working at the practice to

- Understand our aims and objectives
- Have an understanding of the skills and competencies required to deliver the services successfully
- Understand and participate in our quality assurance activities.
- Dealing with emergencies, including a collapsed patient

Dentists and, where appropriate, hygienists also understand the policies and procedures for:

- Referring patients
- Requesting work from laboratories
- Ordering materials and equipment
- Clinical governance requirements and CQC standards of quality and safety
- Professional and legal requirements affecting dentistry.

All GDC registrants meet their continuing professional development requirements and, as required by the GDC, maintain records of their individual CPD activity. In addition, the practice maintains records of all practice-wide training it provides and training provided for individual members.

Policies and procedures

The following policies and procedures are in place in the practice and reviewed at least annually to ensure their relevance and currency]:

- Child protection
- Commitment to staff
- Complaints handling
- Confidentiality
- Consent
- Data protection and data security
- Email and internet usage
- Employment policies and procedures:
    - Adoption. maternity, paternity and parental leave
    - Annual leave
    - Bullying and harassment
    - Disciplinary matters
    - Grievance
    - Redundancy
    - Retirement
    - Sickness/injury absence and pay
    - Stress
    - Staff appraisals
    - Training
    - Underperformance (whistleblowing)
- Equal opportunities
- Health and safety policies and protocols
    - Electrical appliance test records
    - Fire precautions and risk assessment
    - Health and safety
    - Infection control
    - Radiation safety
    - Risk assessment, including COSHH
    - Healthcare waste disposal
- Patient feedback questionnaire
- Patient fees – collecting money and refunds
- Patient referral
- Staff satisfaction survey.
- Staff Recruitment Policy
- Violence and aggression policy

Audit

We undertake regular audits of our procedures and protocols to monitor our service to our patients. On a regular basis, we consider:

Inputs

- Number of patients treated
- Number of patients treated by specific groups.

Outcomes
- Oral health achievements as a direct result of our intervention.

Effectiveness
- Patient views of effectiveness in improving their oral health
- Patient satisfaction levels.

Efficiency
- Patient retention rate
- Referrals to other healthcare professionals for advice and/or treatment
- Quality of data collection.

Quantitative data

On a monthly basis, we record the following:

- Total number of patients seen
- New patients seen
- Failed appointments (and unused time)
- Waiting list numbers – for assessment and for treatment
- Patient safety incidents and the outcome of investigations
- Positive feedback and compliments
- Complaints and negative comments.

Qualitative data

We record the following qualitative data:

- Results of patient and service audits and improvements
- Complaint trends and actions taken to improve the service
- Waiting times and evidence of demand management
- Staffing and staff turnover
- CPD activity on individual and practice-wide basis
- Case mix of clinical presentation and procedure outcome
- Results of annual patient satisfaction survey on a sample number of patients.

Clinical Governance

Abersoch Dental Care uses clinical governance to ensure we deliver a consistent standard of care to our patients. Our clinical governance framework incorporates the following 12 themes of the NHS clinical governance framework:

1. Infection control
2. Child protection
3. Dental radiography

4. Staff, patient, public and environmental safety assessment
5. Evidence-based practice and research
6. Prevention and public health
7. Clinical records, patient privacy and confidentiality
8. Staff involvement and staff development
9. Clinical staff requirements and development
10. Patient information and involvement handling, patient feedback
11. Fair and accessible care
12. Clinical audit and peer review

In relation to clinical governance:

- Everyone understands what the practice is supposed to do
- Everyone understands their role in delivering the service
- We monitor all our policies and procedures and how these are implemented
- We review our policies and procedures on a regular basis to identify where improvements can be made
- We conduct internal audits
- We share information and encourage staff members to raise any issues
- We allow for CPD, staff training and development
- We allow for (and encourage) patient suggestions.

REGISTERED MANAGER DETAILS

Name	Christoff Lotter
Address and postcode	Awelfryn,

	Lon Engan, Abersoch, Gwynedd, LL537LB
Telephone number	(01758)713590
Email address	christofflotter@aol.com
Fax number	
Relevant qualifications BChD	
Relevant experience 24 years plus running/owning practice.	

RESPONSIBLE INDIVIDUAL DETAILS (please delete this section if not applicable)	
Name	Christoff Lotter
Address and postcode	Abersoch Dental Care, 19 Cae Du, Abersoch, Gwynedd.LL53 7EN
Telephone number	(01758)713955
Email address	christofflotter@aol.com
Fax number	n/a
Relevant qualifications BChD	
Relevant experience Qualified from Stellenbosch University in 1992. Worked as a GDP in South Africa for 2 years and then moved to the UK and worked in Kent in a busy	

Dental Practice. In October 1992 opened my own NHS practice in Abersoch Gwynedd.I later converted to private for adults and NHS for children.

Roles and responsibilities within the organisation

The practice is led by Principal Dentist Christoff, who holds overall responsibility for delivering safe, high-quality clinical care.
Chris works four clinical days per week and dedicates one day to administrative duties, including oversight of clinical governance to ensure the practice meets regulatory and professional standards.

Louise Roberts, our Practice Manager, is responsible for the overall management of the practice, including clinical governance, compliance, and Human Resources, ensuring that the practice operates safely, efficiently, and in line with regulatory expectations.

Preventative care is provided by Robyn Clement, our Hygienist, who works one day per week and plays a key role in maintaining patients' oral health.

Sophie Dale, our Lead for Infection Control, ensures that all decontamination processes, cross-infection protocols, and safety procedures are implemented to the highest standard.

The clinical team is supported by Gwenan Baines, our Lead Dental Nurse, who oversees chairside assistance, clinical workflow, and the coordination of the nursing team.

STAFF DETAILS

Please provide the following details for all staff providing services at your establishment or agency

Name	Position	Relevant qualifications / experience
Christoff Lotter	Principle Dentist	Qualified in 1992 and worked as GDP since. BChD
Louise Roberts	Practice Manager	Qualified 2012-working as a dental nurse since.Manager since 2023

Sophie Dale	Dental Nurse Lead infection control	Qualified 2005- working as a dental nurse since.
Gwenan Baines	Lead Dental Nurse	Qualified 2006 – working as a dental nurse since.
Georgina Battye	Dental Nurse	Qualified 2011-working as dental nurse since.

SERVICES / TREATMENTS / FACILITIES

Please detail each treatment you intend providing with the age range and any specialist equipment used

We aim to carry out the full range of general dental services for all ages- currently children and adults are seen privately.

This is inclusive of restorative, preventative, prosthodontic, oral surgery within our competencies Radiography is, as per the norm, carried out at the practice by suitably qualified staff ensuring that the appropriate legislation is adhered to.

PATIENTS VIEWS

How do you seek patient's views on the services / treatments you provide?

We value the views of the patients in all aspects of their treatment and our aim is to take all feedback seriously and use it as an important tool to improve our services. This we do through regular Patient Questionnaires, through continual dialogue with patients both before and after their treatment. We also keep a Daily Diary at reception-where all comments etc made by patients are recorded and then read by the clinical staff at the end of each day. Any suggestions etc are discussed at our monthly meetings and acted upon. We also now ,through displays in the waiting room ,aim to show patients that we act on their suggestions(we also have a suggestion box in the waiting room).

ARRANGEMENTS FOR VISITING / OPENING HOURS

What are the opening hours of the establishment?
What are the arrangements for patients who require urgent care or treatment out of hours?
***If you provide in patient care** what are the arrangements for contact between patients and their relatives i.e. visiting times*

We open mon-Friday-8-1 and 1.30-4.30.
Saturday is via appointment only.

Any private patient with an emergency out of hours can phone the practice where the answering machine will have details linking them to the appropriate telephone number of the dentist on call. The practice telephone number is clearly signed outside the practice. The waiting room has signage indicating the out of hours arrangements/phone numbers.
Any patient with any urgent care needs, can contact the practice via phone or via presenting at reception and we aim to see these patients on the same day

ARRANGEMENTS FOR DEALING WITH COMPLAINTS

Please provide details about

- *how to complain*
- *who to complain to*
- *how you will deal with a complaint*
- *other sources of help if patient not happy with how you have dealt with the complaint (include contact details for HIW)*

Patient Complaints Procedure

It is our aim to always have satisfied patients, to meet your expectations of care and service and to resolve any complaints as efficiently, effectively and politely as possible. We take complaints very seriously, investigating them in a full and fair way and take great care to protect your confidentiality. We learn from complaints to improve our care and service. We will never discriminate against patients who have made a complaint and we will be happy to answer any questions you may have about this procedure.

If you are not entirely satisfied with any aspect of our care or service, please let us

know as soon as possible to allow us to address your concerns promptly. We accept complaints made verbally as well as written complaints. If you do not feel you can raise a complaint about your service directly with us, you can address your complaint directly to the local Health Board -

Healthcare Inspector of Wales, Welsh Government, Rhyd y car Business Park, Merthyr Tudfil. CF48 1UZ . 0300 0628163

Christoff lotter is the Complaints Manager and will be your personal contact to assist you with any complaints. If your verbal complaint is not resolved to your satisfaction within 24 hours or if you complain in writing, the Complaints Manager will acknowledge it in writing within 2 working days and will aim to provide a full response in writing within 30 working days.

You can send your complaints to *19 cae du est Abersoch LL53 7EN* , call us on *01758 713955* or email the Complaints Manager on *Abersochdental@aol.com*

If the Complaints Manager is unavailable, we will take brief details about the complaint and will arrange for a meeting when it is suitable for you and the practice. We will keep comprehensive and confidential records of your complaint, which will be stored securely and only be accessible by those who need to know about your complaint. If the complaint investigation takes longer than anticipated, the Complaints Manager will contact you at least every ten working days to keep you informed of the reason for any delays, the progress of the investigation and the proposed date it will be completed.

When the investigation has been completed, you will be informed of its outcome in writing. We will make our response clear, addressing each of your concerns as best as we can. You will also be invited to a meeting to discuss the results and any practical solutions that we can offer to you. These solutions could include replacing treatment, refunding fees paid, referring you for specialist treatments or other solutions that meet your needs and resolve the complaint.

We regularly analyse patient complaints to learn from them and to improve our services. That's why we always welcome your feedback, comments, suggestions and complaints. If you are dissatisfied with our response to a complaint you can take the matter further, please see the contacts below.

Contacts

For private dental treatment you can contact the GDC private dental complaints service within 12 months of the treatment or within 12 months of becoming aware of the issue by calling 020 8253 0800 or visiting www.dentalcomplaints.org.uk.

If you feel that the practice isn't meeting it's duties regarding the Welsh language you can raise your concern with the Welsh Language Commissioner by calling 0845 6033 221 or visiting http://www.comisiynyddygymraeg.cymru.

If you would like support or advice regarding your complaint, You can also contact

Healthcare Inspectorate Wales (HIW) who is the independent inspectorate and regulator of all healthcare in Wales by calling 0300 062 8163.

The General Dental Council is responsible for regulating all dental professionals. You can complain using their online form at www.gdc-uk.org contact them on information@gdc-org.uk or by calling 020 7167 6000.

Gweithdrefn Cwynion Cleifion (Cymru)

Ein nod ni bob amser yw cael cleifion bodlon, bodloni eich disgwyliadau gofal a gwasanaeth, a datrys unrhyw gwynion mor effeithlon, effeithiol a chwrtais â phosib. Mae cwynion yn peri pryder mawr i ni ac rydym yn ymchwilio iddynt, mewn ffordd lawn a theg, ac yn cymryd llawer o ofal i warchod eich cyfrinachedd. Rydym yn dysgu oddi wrth gwynion er mwyn gwella ein gofal a'n gwasanaeth. Ni fyddwn yn gwahaniaethu yn erbyn cleifion sydd wedi gwneud cwyn a byddwn yn hapus i ateb unrhyw gwestiynau yr hoffech o bosib eu codi ynglŷn â'r weithdrefn hon.

Os nad ydych yn gwbl fodlon gydag unrhyw agwedd ar ein gofal neu ein gwasanaeth, cofiwch roi gwybod i ni cyn gynted â phosib os gwelwch yn dda, fel ein bod yn gallu rhoi sylw i'ch pryderon yn brydlon. Rydym yn derbyn cwynion ar lafar yn ogystal â chwynion ysgrifenedig. Os nad ydych yn teimlo bod posib i chi fynegi cwyn am wasanaeth yn uniongyrchol i ni, gallwch gwyno'n uniongyrchol i'r Bwrdd Iechyd lleol 0300 0604400 customerhelp@gov.wales

Christoff Lotter yw'r Rheolwr Cwynion a'ch cyswllt personol chi i'ch helpu gydag unrhyw gwynion. Os na chaiff eich cwyn lafar ei datrys er boddhad i chi o fewn 24 awr, neu os ydych wedi cwyno'n ysgrifenedig, bydd y Rheolwr Cwynion yn eich cydnabod yn ysgrifenedig o fewn 2 ddiwrnod gwaith ac wedyn bydd yn ceisio darparu ymateb llawn yn ysgrifenedig o fewn 30 diwrnod gwaith.

Os nad yw'r Rheolwr Cwynion ar gael, byddwn yn cymryd manylion cryno am y gŵyn ac yn trefnu cyfarfod ar adeg sy'n addas i chi ac i'r practis. Byddwn yn cadw cofnodion cynhwysfawr a chyfrinachol am eich cwyn a byddant yn cael eu cadw'n ddiogel ac ar gael i'r rhai sydd angen gwybod am eich cwyn yn unig. Os bydd yr ymchwiliad i'ch cwyn yn cymryd mwy o amser na'r disgwyl, bydd y Rheolwr Cwynion yn cysylltu â chi o leiaf bob deg diwrnod gwaith i roi gwybodaeth gyson i chi am y rheswm dros unrhyw oedi, am gynnydd yr ymchwiliad, ac am y dyddiad arfaethedig ar gyfer ei gwblhau.

Pan fydd yr ymchwiliad wedi'i gwblhau, byddwch yn cael gwybod am y canlyniad yn ysgrifenedig. Byddwn yn gwneud ein hymateb yn glir, gan roi sylw i bob un o'ch pryderon cystal ag y gallwn. Byddwch hefyd yn cael gwahoddiad i gyfarfod i drafod y canlyniadau ac unrhyw ddatrysiadau ymarferol y gallwn eu cynnig i chi. Gallai'r datrysiadau hyn gynnwys cyfnewid triniaeth, ad-dalu ffioedd sydd wedi'u talu, eich cyfeirio i gael triniaethau arbennig neu ddatrysiadau eraill sy'n diwallu eich anghenion ac yn datrys y gŵyn.

Rydym yn dadansoddi cwynion cleifion yn rheolaidd er mwyn dysgu oddi wrthynt ac er mwyn gwella ein gwasanaethau. Dyma pam rydym bob amser yn croesawu eich adborth, eich sylwadau, eich awgrymiadau a'ch cwynion. Os ydych yn anfodlon gyda'n hymateb i gŵyn, mae croeso i chi fynd â'r mater ymhellach. Gweler y manylion cysylltu isod.

Manylion Cysylltu
Ar gyfer triniaethau deintyddol preifat, gallwch gysylltu â gwasanaeth cwynion deintyddol preifat y Cyngor Deintyddol Cyffredinol o fewn 12 mis i gael y driniaeth neu o fewn 12 mis i ddod yn ymwybodol o'r broblem, drwy ffonio 020 8253 0800 neu fynd i www.dentalcomplaints.org.uk.

Os ydych yn teimlo nad yw'r practis yn bodloni ei ddyletswyddau o ran yr iaith Gymraeg, gallwch fynegi eich pryder wrth Gomisiynydd y Gymraeg drwy ffonio 0845 6033 221 neu fynd i http://www.comisiynyddygymraeg.cymru.

Os hoffech gael cefnogaeth neu gyngor am eich cwyn am y Hefyd mae posib cysylltu ag Arolygiaeth Gofal Iechyd Cymru, sef arolygiaeth a rheoleiddiwr annibynnol ar yr holl ofal iechyd yng Nghymru, drwy ffonio 0300 062 8163.

Mae'r Cyngor Deintyddol Cyffredinol yn gyfrifol am reoleiddio pob gweithiwr deintyddol proffesiynol. Cewch gwyno gan ddefnyddio eu ffurflen ar-lein yn www.gdc-uk.org , drwy gysylltu â nhw ar information@gdc-org.uk neu drwy ffonio 020 7167 6000.

Zero Tolerance on Violence and Aggression Policy

Pwllheli Dental Care is committed to providing a safe working environment by minimising the risk of violent and aggressive behaviour at work. The working environment is defined as the practice premises and other premises where work is undertaken as part of a person's official duties including, travelling to and from the other premises.

The practice defines violence and aggression as 'any incident in which a person is abused, threatened or assaulted in circumstances relating to their work' including threats, verbal abuse (shouting, swearing, rude gestures), psychological abuse or physical attacks.

The practice carries out risk assessment, paying special attention the practice position, the patient's environment as well as the nature of the job. Based on the results of the risk assessment, the practice security arrangements are reviewed, and team members are provided with information and regular training on how to deal with violence and aggression at work.

All team members are expected to take reasonable care of their health and safety as well as that of other persons who might be affected by their work. The reception team are expected to observe the following guidelines to minimise the risk of violence or aggression:

- Make eye contact in acknowledgement as soon as a patient approaches. If busy, smile and nod to let the patient know that they will be seen soon. (We recognise that being kept waiting without acknowledgement can cause a person to feel aggrieved.)
- Always answered the telephone politely and smile whilst talking
- Aim to answer the phone within 3 rings, state your name, ask for the patient's name and how you can help. Do not say 'please hold the line' before asking a patient for his/ her name and reason for calling.
- Never say NO to a patient, there is always a more polite alternative
- If a patient is kept waiting in reception, keep them informed them of the reason for delay and expected time they will be seen. (We appreciate that anyone kept waiting without explanation is likely to feel aggrieved.)
- Handle cash carefully:
    - Empty the reception till/cashbox regularly out of site of the public
    - Undertake banking regularly at different times on different days, ideally with a varied route
- Always take complaints seriously and listen sympathetically

Report all incidents to the Practice Manager immediately. In the case of actual or threatened violence contact the police. Record the incident on an Event Record (G 110A). Jane Harrington will investigate and record any injuries in the Accident Treatment and Investigation Record (M 252A).

The practice provides support, assistance, and if required counselling to the victims of violence and aggression at work. In pertinent cases a reasonable amount of time off work on full pay will be granted.

PRIVACY AND DIGNITY

How will patients' privacy and dignity be respected in line with the Equality Act 2010 and the protected characteristics of

- *age*
- *disability*
- *gender re-assignment*
- *marriage and civil partnerships*
- *pregnancy and maternity*
- *race*

- *religion or belief*
- *sex*
- *sexual orientation*

In line with the Equality Act 2010, we ensure that we nuture a supportive and all-inclusive envoirnment for all patients at the practice.
Our vision is for Abersoch Dental Care to be a successful, caring and welcoming place for patients to receive their dental care and advice. We want to create a supportive and inclusive environment where our staff can reach their full potential and care is provided in partnership with patients, without prejudice or discrimination. We are committed to a culture where respect and understanding is fostered and the diversity of people's backgrounds and circumstances is positively valued. This policy helps us to achieve this vision.

The non-discrimination rights of our patients and our staff are protected by anti-discrimination legislation including the Equality Act 2010, Part-time Workers (Prevention of Less Favourable Treatment) Regulations 2000, and the Employment Rights Act 1996

By adopting this policy, we undertake to ensure that discrimination does not take place and that everyone is treated fairly and equally.

The aim of this policy is to remove any potential discrimination in the way that people with protected characteristics are cared for by the Practice. This means that we will not treat someone less favourably because of their age, a disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

We will develop and support equality and diversity measures by:

- Providing patient information in a variety of languages, if required-We currently aim to have as much of the practice info etc billing in both Welsh and English.
- Having translation services available for patients who need this-most of the staff speak welsh fluently-we sometimes use online tools to help communicate effectively .
- Providing services that are accessible to patients with disabilities –we have a waist high door bell and a ramp for wheel chairs,we have a downstairs wheelchair accessible surgery.We have large print medical histories available,we have generic reading glasses available in the waiting rooms.We remove masks etc while addressing those hard of hearing to facilitate lip reading,we write down information and give leaflets to read regarding treatment options which those hard of hearing find bebeficial.
- Ensuring that care of individuals is planned with their specific needs at the centre-eg some individuals find mid morning appointments on days when town is quieter,
- Tackling oral health inequalities through positive promotion and care – never being judgemental in either tone speech or body language.

- Involving patient groups and individuals in the design of our service- through constant feedback from patients and embracing all suggestions.
- Responding positively to the diverse needs and experiences of our patients and the community even when those needs are challenging to deal with
- Ensuring that we join up with services involved with the care of patients with particular medical and social care needs.

We will monitor the effectiveness of this policy and the impact on all other relevant policies and practice. This review will happen when necessary and as a minimum annually.

Date Statement of Purpose written	15/1/18
Author	Christoff Lotter

STATEMENT OF PURPOSE REVIEWS

Date Statement of Purpose reviewed	1/6/2026
Reviewed by	Louise Roberts
Date HIW notified of changes	1/6/2026

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