

**General Dental Practice  
Inspection (Announced)**  
Cardiff and Vale University  
Health Board,  
**Canton Dental Care**

17 March 2015

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## 1. Introduction

Healthcare Inspectorate Wales (HIW) completed an announced inspection to Canton Dental Care at 339 Cowbridge Road East, Canton, Cardiff CF5 1JE within the area served by Cardiff and Vale University Health Board on 17 March 2015.

During the inspection we considered and reviewed the following areas:

- Patient experience
- Delivery of Standards for Health Services in Wales
- Management and leadership
- Quality of environment

## 2. Methodology

HIW inspections of General Dental Practices seek to establish how well practices meet the standards in *Doing Well, Doing Better: Standards for Health Services in Wales*<sup>1</sup>.

HIW understands that Canton Dental Care is a mixed practice providing both private and NHS dental services. In this respect, any dentist working at the practice who is also registered with HIW to provide private dentistry will also be subject to the provisions of *The Private Dentistry (Wales) Regulations 2008* and *the Private Dentistry (Wales) (Amendment) Regulations 2011*.

During the inspection we reviewed documentation and information from a number of sources including:

- Information held by HIW
- Interviews of staff including dentists and administrative staff
- Conversations with nursing staff

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<sup>1</sup> *Doing Well, Doing Better: Standards for Health Services in Wales* came into force from 1<sup>st</sup> April 2010. The framework of standards sets out the requirements of what is expected of all health services in all settings in Wales. [www.weds.wales.nhs.uk/opendoc/214438](http://www.weds.wales.nhs.uk/opendoc/214438)

- Examination of a sample of patient dental records
- Examination of practice policies and procedures
- Examination of equipment and premises
- Information within the practice information leaflet and website (where applicable)
- HIW patient questionnaires

At the end of each inspection, we provide an overview of our main findings to representatives of the dental practice to ensure that they receive appropriate feedback.

Any urgent concerns that may arise from dental inspections are notified to the dental practice and to the health board via an immediate action letter. Any such findings will be detailed, along with any other recommendations made, within Appendix A of the inspection report.

Dental inspections capture a snapshot of the application of standards at the practice visited on the day of the inspection.

### 3. Context

Canton Dental Care provides services to mainly NHS patients with some private patients, in the Canton region of Cardiff. The practice forms part of dental services provided within the geographical area known as Cardiff and Vale University Health Board. The practice employs a staff team which includes: three dentists, one hygienists, four nurses, one practice manager and one receptionist.

A range of services are provided. These include:

- General dental services
- Crowns and bridges
- Implants
- Teeth whitening
- Hygienist.

## 4. Summary

HIW explored how Canton Dental Care meets the standards of care in the Doing Well, Doing Better: Standards for Health Services in Wales.

Overall, patients told us that they were very satisfied with the standard of care at the practice and received sufficient information about their treatment. Patients we spoke with and patient questionnaires were positive about all areas of care.

We found some issues with clinical documentation, lack of audits, out of date stock and an empty oxygen cylinder, therefore we were not assured that care and treatment was always planned and consistently delivered in a way that was intended to ensure people's safety and welfare. However we found good standards of on-going treatment recording, history taking and adherence to national guidelines

On the day of the inspection, we were assured that the practice was being appropriately managed with some systems in place to ensure patients safety.

Patients using the practice and staff can be assured that the building is safe, is very well maintained and provides a very comfortable environment for patients to receive treatment.

## 5. Findings

### *Patient Experience*

**Overall, patients told us that they were very satisfied with the standard of care at the practice and received sufficient information about their treatment. Patients we spoke with and patient questionnaires were positive about all areas of care.**

Prior to the inspection, we asked the practice to distribute HIW questionnaires to patients to obtain views on the dental services provided. In addition, we spoke with a small number of patients who were receiving treatment on the day of the inspection.

Twenty six questionnaires were returned, however one patient did not agree for HIW to use the comments in this report, therefore we considered twenty five questionnaires. The patients who completed the questionnaires and those spoken with had been using the service for between three months and 20 years. All 28 people indicated that the practice team made them feel welcome with half suggesting they were made to feel “*very welcome*”.

All patients felt that they were given enough information regarding their treatment.

The practice was not involved in the NHS out of hours service as this was the responsibility of the the health board. There was an automated message connected to the practice telephone line, which gave information on the out of hours contact details. There was also a sign with the contact number in the front window and a take away card with contact details for both NHS and private out of hours facilities.

There was a flexible appointment system in place and patients could book appointments both in advance and on an emergency basis. There was also a text reminder service available. This meant that patients could be confident that there was a system in place to try to ensure they were seen quickly when required. Patients stated that they were satisfied with the system with most stating they had not experienced a delay in their appointment time. A few made comments such as;

*“Sometimes but not for long, never a big problem.”*

*“Nothing unreasonable.”*

*“Short delays.”*



*“Sometimes no more than 10-15 minutes.”*

*“Yes every visit.”*

*“Not very often, only short delay if there is one.”*

There was a practice information leaflet available which gave basic information. This document needs to be reviewed to ensure it has the correct information regarding:

- Organisations to contact in the event a patient had a concern
- What services the practice offers
- Clear information about whether the practice is NHS, private or both
- Make sure that General Dental Council registration numbers are included.

***Improvement needed***

***The practice needs to ensure that the practice leaflet is in line with the General Dental Council guidance on advertising.***

There was clear signage at the front of the premises indicating the opening times for the practice for patient information.

Staff told us that the practice did not have systems to regularly assess patients' views and act upon them such as; a suggestion box, patient surveys or the annual NHS patient questionnaire. This meant that the practice did not take into account the views of patients when planning delivery of service.

***Improvement needed***

***The practice needs to explore ways of regularly assessing patients' views and acting upon them.***

We looked at a sample of patients' notes and found that records for social histories, such as smoking and alcohol consumption which affect oral health were available. We saw oral health promotion posters in the reception and waiting areas and staff told us that the dentists and the hygienist gave hand outs and leaflets when necessary. There was also a very informative and easy-to-read oral health information board, which staff told us was the responsibility of the nurses to update in accordance with initiatives being promoted at the time. This was evidence of noteworthy practice.

A complaints policy was available and visible to patients in the reception area. It was not fully compliant with the NHS complaints procedure known as 'Putting Things Right'<sup>2</sup>. We also noted that neither the HIW nor the Community Health Council (CHC) addresses were on the policy for patients to contact should the need arise. When we asked patients if they would know how to make a complaint or raise a concern, more than half said they would know. Those that were not sure made statements such as, "*I'd ask the dentist*" or "*I'd find out if needed*".

All patients said they were very satisfied with the service they received. In addition to the questions asked, some patients made positive comments and suggestions about their experiences which include:

*"I feel happy that I can ring up for advice or an appointment and this practice will go out of their way to accommodate me. The children feel safe and enjoy coming to see the dentist."*

*"Excellent service. Have always made me and my children feel welcomed and always explain, child friendly detailed procedures. A great team. Thank you."*

*"Very pleased with the treatment I receive. Only once I had reason to complain when my usual dentist was away."*

*"The dentists and receptionists are very friendly I always feel welcomed – very professional team. 5 star service and coming into this venue with staff smiling makes me feel very comfortable and improves my day. Thank you so much"*

*"Very nervous about dentist but always put at ease."*

*"...appreciate the reminder for check up's."*

We checked the practice website prior to the inspection and found that it should be reviewed to ensure it is in line with the General Dental Council (GDC) 'Principles of Ethical Advertising' (March 2012).

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<sup>2</sup> Putting things Right is the integrated processes for the raising, investigation of and learning from concerns (complaints). Concerns are issues identified from patient safety incidents, complaints and, in respect of Welsh NHS bodies, claims about services provided by a Responsible Body in Wales

***Improvement needed***

***The practice should ensure the website complies with GDC 'Principles of Ethical Advertising' guidelines, including the correct address for patients to refer to for an NHS and private concern.***

## *Delivery of Standards for Health Services in Wales*

**We found some issues with clinical documentation, lack of audits, out of date stock and an empty oxygen cylinder, therefore we were not assured that care and treatment was always planned and consistently delivered in a way that was intended to ensure people's safety and welfare. However we found good standards of on-going treatment recording, history taking and adherence to national guidelines.**

### **Patient records**

Records were kept at the practice on a computer database, with some information being held in paper records. We looked at a sample of nine dental records (i.e. three patient records for each dentist working at the practice) and although the general on-going treatment records were of a good standard, we found that treatment plans, options for treatment or patient preference were not always being recorded in the patient's notes. Patient medical histories had been updated on each new treatment. With the exception of one patient all others were recalled within the National Institute for Health and Care Excellence (NICE)<sup>3</sup> guidelines.

### ***Improvement needed***

***The practice needs to ensure that treatment plans, options, and consent to treatment are recorded in patients' records.***

Where patients had received radiographs (x-rays), we saw evidence that although dentists were recording clinical evaluation of grading the x-ray to ensure that the quality of the image was adequate, not all were recording the justification for or the findings of the x-ray's.

### ***Improvement needed***

***Practitioners need to record the justification for and the findings of all x-rays taken.***

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<sup>3</sup> The NICE dental recall clinical guideline helps clinicians assign recall intervals between oral health reviews that are appropriate to the needs of individual patients.

***We would advise all clinicians to read the Clinical Examination & Record Keeping, Good Practice Guidelines produced by the Faculty of General Dental Practice to ensure all areas of record keeping including for periodontal disease is being followed to monitor improvements or a reduction in oral health.***

We saw good use of the hygienist with referrals made for both NHS and private patients. We were shown the referrals with prescriptions / treatment plans which were held in patients' paper records.

We discussed the quality of general recording with the dentists and found, overall, that there were good systems in place. We saw that dentists were writing their clinical reports rather than relying on templates, which individualises the notes and captures information specific to each patient. Further discussion with the dentists revealed that there were no regular clinical audits and reviews to help ensure the quality of the service provided.

***Improvement needed***

***The practice needs to develop a system of internal audit to ensure the quality of the service they provide.***

**Drug storage and emergency equipment**

Exploration of how emergency drugs were kept at the practice revealed that they were securely stored. We found that there was a dedicated first aider and that there were suitable arrangements in place to ensure that expired drugs were promptly replaced. We also saw that individual emergency drugs and the accompanying guidance was easily available. We did bring to the attention of the principal dentist that the oxygen cylinder was empty and there were some face masks missing and others out of the best use by date. This confirms that although the drugs were being checked, all the emergency equipment was not being checked thoroughly and regularly. We considered sending an immediate assurance letter about this because it is essential that emergency equipment is operational. However, the practice took appropriate action to resolve this as a matter of urgency.

***Improvement needed***

***The practice needs to ensure a safe and regular system for checking emergency equipment.***

## **Decontamination**

We looked at procedures in place concerning decontamination of instruments and found that there were appropriate measures in place, including a dedicated decontamination room. There were clear processes in place and we saw appropriate clean and unclean zones. However it would be beneficial if these zones were clearly demarcated. We found evidence of suitable record keeping and maintenance for the cleaning equipment used. We discussed the moving of the magnifying light (used to check instruments after cleaning) so that instruments were not carried back into the unclean zone and the use of heavy duty gloves to safeguard staff against injury when cleaning sharp instruments. Staff were responsive to these observations and were trying to find solutions during the feedback session.

### ***Improvement needed***

***The magnifying light needs to be moved to prevent the possible cross contamination of instruments and staff need to use heavy duty gloves for their own protection.***

We saw and staff confirmed that there were routine, quarterly audits (checks) in relation to infection control requirements which were in accordance with the Welsh Health Technical Memorandum (WHTM 01-05)<sup>4</sup>.

## **Radiographic equipment**

There were no concerns regarding the radiation protection documentation we looked at. There was a named radiation protection adviser; identification and demarcation of controlled areas; a record of dose investigation levels and a quality assurance system regarding the image quality. We also saw the radiation equipment check certification.

## **Dental equipment and instruments**

We saw that all drawers and contents within the individual surgeries were clean with sufficient numbers of instruments to meet the needs of each surgery within

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<sup>4</sup> <http://wales.gov.uk/topics/health/cmo/professionals/dental/publication/cdo-letters/decontamination2/?lang=en>. The WHTM 01-5 document provides professionals with guidance on decontamination in primary care practices and community dental practices.

the practice. However we saw that there were items which were out of date in one surgery.

***Improvement needed***

***The practice needs to develop a monthly system for checking expiry dates of all dental materials in individual surgeries.***

## ***Management and Leadership***

**On the day of the inspection, we were assured that the practice was being appropriately managed with some systems in place to ensure patients safety.**

The practice provided mainly NHS dental care and treatment with some private patients. At the time of our inspection, the practice manager was responsible for the day-to-day running of the practice with the policies, procedures and staff human resource activity being undertaken by the hygienist.

We found that the practice was well run with the service underpinned by relevant written policies and procedures to ensure patient care and treatment was delivered safely. Staff were able to access these policies within the practice to check their understanding and ensure they were taking correct action. Not all policies had review dates to ensure that the information was current. We identified that there was no policy on patient dignity and privacy or adult protection and this was discussed on the day.

### ***Improvement needed***

***The practice needs to ensure all policies are dated to ensure the current version is available.***

***The practice needs to develop a policy on patient dignity and privacy and also a policy and procedure for adult protection.***

We saw that there was a well established staff team; some having worked at the practice for many years. This meant that patients received care from staff who were familiar to them.

Staff told us they felt well supported in their roles by the principal dentist, the hygienist and the practice manager and would be comfortable raising any work related concerns they may have with any of the three. There was evidence of cohesive and effective team working.

New staff were offered an induction programme to ensure there was adequate support in the initial commencement of their employment.

We looked at a sample of staff training records. These confirmed staff had access to a range of training opportunities relevant to their role. We did notice that staff had not received training in the protection of vulnerable adults.

### ***Improvement needed***

***Staff need to receive training in the protection of vulnerable adults.***



At the time of our inspection, all staff had valid Disclosure and Barring Service certificates, required by the regulations for private dentistry<sup>5</sup> and proof of satisfactory immunisations. We discussed occupational health support for staff with the principal dentist, who stated that there was a contract with Cardiff and Vale University Health Board.

The practice manager told us that all staff attended regular monthly staff meetings and this was confirmed by staff meeting minutes. This was an opportunity to raise any issues of concern about the services being provided; convey new/relevant information to the dental team, and discuss outcomes from patient questionnaires and audits. We were also told that every staff member took it in turns to be the chair person, this was evidence of a progressive practice which promoted an inclusive work environment.

We looked at a variety of maintenance certificates held at the practice which showed there were suitable systems and management process in place to ensure that all equipment was inspected in a timely way and in accordance with mandatory requirements.

We saw that the indemnity insurance and the dentists' HIW certificates for private dentistry were visible to patients. The HIW certificates needed updating due to administrative changes in HIW and this had already been instigated by the principal dentist.

Given the number of recommendations identified during this inspection, consideration should be given to ensuring that there are more effective and proactive arrangements in place at the practice to monitor compliance with relevant regulations and standards. Whilst no specific recommendation has been made in this regard, the expectation is that there will be evidence of a notable improvement in this respect at the time of the next inspection.

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<sup>5</sup> The Private Dentistry (Wales) Regulations 2008 came into force on 1 January 2009. Amendments were made that came into force on 1 January 2012. These set out the legal requirements in relation to dentists providing private dentistry services.

## ***Quality of Environment***

**Patients using the practice and staff can be assured that the building is safe, is very well maintained, and provides a comfortable environment for patients to receive treatment.**

Canton Dental Care is an established practice situated in Canton on the outskirts of Cardiff city centre. There is no dedicated car parking, but there are some parking spaces along the side roads near to where the practice is situated. There are public car parks within walking distance.

Although there is a small step outside, patients with mobility difficulties are able to access the practice building because there is a portable ramp available. In addition, staff ensure that patients with mobility difficulties are seen in the first surgery on the ground floor. Access to other parts of the building is limited due to the width of the corridors and step down into the reception area.

A tour of the building confirmed the practice was well maintained internally and externally. There was a public and staff toilet facility available, but neither was accessible for wheelchair users. Fire extinguishers were placed in strategic places and had been serviced regularly.

The waiting areas, surgeries and circulation areas were clean, tidy and satisfactorily lit and ventilated.

Appropriate arrangements were seen to be in place for the safe storage and security of paper and electronic records with a satisfactory back-up system for electronic records. Security precautions were also in place to prevent unauthorised access to areas of the building not used by patients.

Only the name and qualification of the principal dentist was displayed on the wall outside the practice, although there was a list of all dentists inside the porch area. We did note that the font size on the list could be bigger so that it is easier to read. We did not see a staff identification board available for patients to recognise the staff who were delivering the treatment.

### ***Improvement needed***

***There must be a list of all dentist, their qualifications and registration numbers visible externally.***

***The practice must visibly display a list of staff working at the practice, their designation and registration numbers where applicable.***

We saw a list of NHS prices displayed on the wall but there was no price list for private treatment.

***Improvement needed***

***The practice should display a price list for both NHS and private treatment.***

There were contracts in place for the removal of clinical and non-hazardous waste and the bags and bins were stored securely. This ensures a safe environment for patients to access and for staff to work.

## 6. Next Steps

This inspection has resulted in the need for the dental practice to complete an improvement plan in respect of all four areas. The details of this can be seen within Appendix A of this report.

The improvement plan should clearly state when and how the findings identified at the Canton Dental Care will be addressed, including timescales.

The improvement plan, once agreed, will be published on HIW's website and will be evaluated as part of the ongoing dental inspection process.

*Appendix A*

**General Dental Practice: Improvement Plan**

**Practice: Canton Dental Care**

**Date of Inspection: 17 March 2015**

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
<b>Patient Experience</b>				
Page 7	The practice needs to ensure that the practice leaflet is in line with the General Dental Council Guidance on Advertising. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (18b,d); General Dental Council Standard (1.3.3)</b>	The practice leaflet is in the process of being updated to comply with guidance.	N Stockford	By April 30 <sup>th</sup>
Page 7	The practice needs to explore ways of regularly assessing patients' views and act upon them. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007(5b)</b>	The practice will place a suggestion box in the reception area, which will be emptied monthly, The results will be correlated and reported at the following practice meeting.  Patient questionnaires will be distributed annually and results audited.	P Stockford	By 1 <sup>st</sup> May

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Page 9	The practice should ensure the website complies with GDC 'Principles of Ethical Advertising' guidelines, <b><i>including the correct address for patients to refer to for an NHS and private concern Standards for Health Services in Wales – Doing Well, Doing Better 2007 (18b,d); General Dental Council 'Principles of Ethical Advertising' guidelines.</i></b>	The practice will contact Yell regarding alterations to our website. The practice has access to change details but the method is not known to the practice staff. The computer software to achieve this needs to be run on a windows operating system, so this will need to be carried out at the practice or alterations sent to Yell for them to update website for us.	P Stockford	By May 1 <sup>st</sup>
<b>Delivery of Standards for Health Services in Wales</b>				
Page 10	The practice needs to ensure that treatment plans, options, and consent to treatment are recorded in patients' records. <b>Health Services in Wales – Doing Well, Doing Better 2007 (9a,b,d).</b>	<p>NHS FP17 DC forms and treatment plans are recorded in the patient's paper record cards for every NHS patient.</p> <p>Private treatment plans are printed and signed and kept in the patient's paper record card.</p> <p>I do not think the inspecting dentist looked in the paper record cards and therefore missed these plans.</p> <p>Consent form for private treatment to be established and then completed and kept in patient's records and attached to the treatment plan.</p>	P Stockford	May 1st

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
Page 10	Practitioners need to record the justification for and the findings of all x-rays taken. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (7a); General Dental Council (4.1.1).</b>	One part time clinician has been advised to ensure that their justification is recorded in the patient's records. This will be reviewed at record card audits.	P Stockford	1st meeting & audit done  Review 4 monthly
Page 10	We would advise all clinicians to read the Clinical Examination & Record Keeping, Good Practice Guidelines produced by the Faculty of General Dental Practice to ensure all areas of record keeping including for periodontal disease is being followed to monitor improvements or a reduction in oral health.	Copy of FGDP guidelines now placed in practice library for staff to read.  Our periodontal record keeping is in line with British Periodontal society and Faculty of General Dental Practitioners guidelines.  The inspecting dentist stated that full pocket depth charting was required for teeth with less than 3mm of pocketing. This is not advised in the national guidelines.	P Stockford	Completed
Page 11	The practice needs to develop a system of internal audit to ensure the quality of the service they provide. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (6a,c,d,e).</b>	Audits currently done in record keeping, radiographic, hand washing, cross infection, hygienist referral forms.  We will reassess to establish which areas of our practice require an audit.	P Stockford	End May 2015
Page 11	The practice needs to ensure a safe and	Oxygen cylinder was loaned the next morning	P Stockford	Completed

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
	regular system for checking emergency equipment. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (15a).</b>	<p>after inspection as ours was found to be empty.</p> <p>A new cylinder with locking mechanism to prevent accidental opening has been received with a system of loan automatically arranged if a top up of oxygen is required.</p> <p>An annual service contract has been signed to maintain this cylinder and provide refills.</p> <p>A weekly check on the oxygen cylinder and an emergency drugs check has been established. This will be carried out and signed record kept.</p>		
Page 12	The magnifying light needs to be moved to prevent the possible cross contamination of instruments and staff need to use heavy duty gloves for their own protection. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (13a).</b>	<p>Heavy-duty gloves rather than medium thickness gloves have been purchased and staff advised to use them.</p> <p>The magnifying light is to be moved. A shelf will need to be placed to support the magnifying light.</p>	N Stockford	<p>Gloves completed</p> <p>Light 1<sup>st</sup> May 2015</p>
Page 13	The practice needs to develop a monthly system for checking expiry dates of all dental materials in individual surgeries. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (15a).</b>	<p>Monthly review of all materials in each surgery and stock cupboard to be carried out.</p> <p>Stock check of all materials carried out of those held in storage and in the surgeries in April 2015. To be re assessed monthly, out of date materials to be disposed of.</p>	P Stockford	End April 2015



Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
<b>Management and Leadership</b>				
Page 14	The practice needs to ensure all policies are dated to ensure the current version is available. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (22b).</b>	Practice to re assess to ensure all current policies are dated and update date written on them.	R Oestreich	May 1st
Page 14	The practice needs to develop a policy on patient dignity and privacy and also a policy and procedure for adult protection. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (10,11); General Dental Council (6.6.9).</b>	Practice is in the process of putting together a dignity and privacy policy.	N Stockford	May 1st
Page 14	Staff need to receive training in the protection of vulnerable adults. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (11c).</b>	All staff from the practice are booked on next available course provided by dental postgraduate department 23rd September 2015.	P Stockford	September 2015
<b>Quality of Environment</b>				
Page 16	There must be a list of all dentist, their qualifications and registration numbers visible externally. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007</b>	Our list in the open practice porch had been given a larger font and GDC numbers added.	N Stockford	Completed

Page Number	Improvement Needed	Practice Action	Responsible Officer	Timescale
	<b>(18d,25a); General Dental Council (6.1.5).</b>			
Page 16	The practice must visibly display a list of staff working at the practice, their designation and registration numbers where applicable. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (18d,25a); General Dental Council (6.1.5).</b>	The list of staff members has been updated and their GDC numbers added to the existing list and the font made bigger	N Stockford	Completed
Page 17	The practice should display a price list for both NHS and private treatment. <b>Standards for Health Services in Wales – Doing Well, Doing Better 2007 (18d); General Dental Council (2.4.1).</b>	Private price list placed in each waiting room wall. Printed list of items available at reception.	N Stockford	Completed

### Practice Representative:

**Name (print): Paul C Stockford**

**Title: Practice owner -Dentist**

**Date: 17<sup>th</sup> April 2015**