

## PATIENT INFORMATION LEAFLET

|                                 |  |
|---------------------------------|--|
| Name of establishment or agency | Greenacre Orthodontics   |
| Address and postcode            | 14 Wepre Drive<br>Connahs Quay<br>Deeside<br>Flintshire<br>CH5 4HA             |
| Telephone number                | 01244 818111   |
| Email address                   | <a href="mailto:manager@greenacreortho.co.uk">manager@greenacreortho.co.uk</a> |
| Fax number                      | N/A  |
| Name of Registered Manager      | Mohammad Owaise Sharif   |
| Name of Registered Provider     | Greenacre Orthodontics Limited   |

### Summary of the Statement of Purpose

*Information to include:*

- *The kinds of treatment, facilities and all other services provided;*
- *Opening hours;*
- *Arrangements for urgent or out of hours care;*
- *Dealing with patients who are violent or abusive to staff;*
- *Dealing with complaints.*

A full range of NHS and private specialist orthodontic treatment is offered at Greenacre Orthodontics. We have four fully equipped surgeries and access to the practice is compliant with the Disability and Discrimination Act (DDA). In addition, we have an x-ray room with equipment to obtain diagnostic images. We offer private dental treatments. We also offer periodontal treatment and management including direct access. Additionally, we offer tooth whitening to those over 18.

Our opening hours are:

Monday 8.30am – 17.00pm  
Tuesday 8.30am – 17.15pm  
Wednesday 8.30am – 17.15pm  
Thursday 8.30am – 17.15pm  
Friday 8.30am – 17.15pm  
Evenings and Saturdays: By appointment

The need for after hours, urgent care is rare in orthodontics. We have diary slots to accommodate emergencies. NHS direct can be contacted if after hours care is needed, the number is contained in our out of hours answerphone message.

Dealing with patients who are violent or abusive to staff:

The Practice takes it very seriously if a member of staff or other patients are treated in an abusive or violent way. The Practice supports the government's 'Zero Tolerance' campaign for Health Service Staff. This states that all staff have a right to care for others without fear of being attacked or abused. To successfully provide these services a mutual respect between all staff and patients must be in place. All staff members aim to be polite, helpful, and sensitive to the individual needs of our patients'.

We would respectfully remind patients that very often staff could be confronted with a multitude of varying and sometimes difficult tasks and situations, all at the same time. However, aggressive behavior, be it violent or abusive, will not be tolerated and may result in you being removed from the Practice list and, in some cases, the Police being contacted.

For the practice to maintain good relations with their patients the practice would like to ask all its patients to read and take note of the types of behavior that would be found unacceptable:

- Bad language or swearing at practice staff
- Physical violence towards any member of staff or other patients, such as pushing or shoving
- Verbal abuse towards the staff in any form including verbally insulting the staff
- Racial abuse and sexual harassment will
- Persistent or unrealistic demands that cause stress to staff. Requests will be met wherever possible and explanations given when they cannot
- Causing damage/stealing from the Practice's premises, staff or patients
- Obtaining drugs and/or medical services fraudulently

We ask you to always treat your Orthodontists and all of our staff courteously. The removal of patients from treatment at the practice is an exceptional and rare event and is a last resort in an impaired patient-practice relationship. When trust has irretrievably broken down, it is in the patient's interest, just as much as that of the practice, that they should find a

new practice. We support the transfer of such patients care to a new provider by providing the necessary clinical information and any appropriate documentation relating to the patient.

#### Complaints procedure:

All efforts are made to ensure patients are pleased with their experience of our service. When patients complain, we take this very seriously and aim to deal with the matter promptly. Additionally, we always strive to learn from any mistakes that may have been made.

We have a dedicated complaints manager, a complaint can be made on the telephone, in person, or in writing. We will acknowledge all complaints in writing and enclose a copy of our code of practice as soon as possible, normally within two working days. We will seek to investigate the complaint within 30 working days of the complaint being received. The outcome of the complaint will be provided to the complainant. If patients are not satisfied with the result of our procedure then they can contact:

*Public Ombudsman Wales*, 1 Ffordd Hen Gae, Pencoed, CF35 5LJ.  
Telephone: 0300 790 0203. Website: [www.ombudsman.wales](http://www.ombudsman.wales)

HIW, Welsh Government, Rhydycar Business Park, Merthyr Tydfil, CF48 1UZ. Telephone: 0300 062 8163. Email: [hiw@gov.wales](mailto:hiw@gov.wales). Website: [www.hiw.or.uk](http://www.hiw.or.uk)

For private patients: Dental Complaints Service, 37 Wimpole Street, London, W1G 8DQ. Telephone: 020 8253 0800. Website: <https://dcs.gdc-uk.org/>

## STAFF DETAILS

*Please provide the following details for all dentists and DCPs at the practice*

| Name                     | Position  | Relevant qualifications / experience   |
|--------------------------|---|--|
| Mohammad Owaise Sharif   | Principal Specialist orthodontist<br><br>HIW registered manager | PhD, BDS (Hons) - 2006, MJDF RCS Eng, MSc, MOrth RCS Ed, FDS (Ortho) RCS Eng, FHEA                     |
| Fyeza Noor Janjua Sharif | Principal Specialist orthodontist                               | DDsc (Ortho), BDS - 2005, MFDS RCS Glas, MRes, MOrth RCS Ed  |
| Alison Johnson           | Specialist Orthodontist   | BDS, MSc, MOrth  |
| Madhavi Seshu            | Specialist Orthodontist   | MDS, BDS - 1995, MFD, MOrth RCS Ed, FDS (Ortho) RCS Ed   |
| Nicholas Stanford        | Specialist Orthodontist   | BDS, BSc (Hons), MFDS RCS Ed, MSc, MOrth RCS Ed, FDS (Ortho) RCS Ed, FHEA                              |
| Keely Smith              | GDC Registered Dentist  | BDS, MFDS RCSEd, PGCTLCP   |
| Kelly Hughes             | Orthodontic Therapist   | BDA – Oral Health Education - 2015<br>Diploma in Orthodontics Therapy 2020                             |
| Stacey Morley            | Orthodontic Therapist   | Diploma in Orthodontic Therapy 2022  |
| Natalie Woodward         | Orthodontic Therapist   | Diploma in Orthodontic Therapy - 2021  |
| Deepika Rajan            | Dental Hygienist/Therapist                                      | RAJIV GANDHI UNWERSITY OF HEALTH SCIENCES KARNATAKA II<br>GDC REG 310031                               |
| Samantha Chatterton      | Senior Dental Nurse   | Level 3 Dental Nursing Diploma 2021<br>NEDBN Dental Radiography 2024<br>Level 3 Lead Dental Nurse 2024 |
| Clare Eastwood           | Dental Nurse  | NEBDN-DSA certificate 1995<br>BDA – Radiography - 2019   |
| Larni Foo                | Dental Nurse  | Dental Nursing City & Guilds 2022  |

|                         |                         |  |
|-------------------------|-------------------------|--|
|                         |                         | BDA Dental Radiography 2023<br>NEBDN Orthodontic Nursing<br>2024   |
| Mohammed Amir<br>Hamzah |                         | Level 3 National Diploma in Dental<br>Nursing – City and Guilds 2022<br>BDA Dental Radiography 2023<br>Orthodontic Nursing Certificate<br>2025 |
| Kelsey Hayter           | Dental Nurse            | Diploma in Dental Nursing Level<br>3 QCF City & Guilds 2018  |
| Kathryn Caswell         | Receptionist            | BSc (Hons) Chemistry with<br>Analytical Chemistry<br>Loughborough University of<br>Technology (1996)   |
| Dajana Gjoka            | Receptionist            | Completed training as a 'Dental<br>Assistant in Italy in 2023  |
| Kenzie Morris           | Receptionist            | Diploma in Dental Nursing, Trinity<br>College Dublin 2020  |
| Ugochi Nwanya           | Practice<br>Manager     | Bsc Degree Accounting<br>Diploma Dental Nursing (NEBDN)  |
| Faith Loren Pisani      | Trainee<br>Receptionist | 6 GCSEs A-C  |

## PATIENTS VIEWS

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

We ask patients to complete patient satisfaction surveys. These are done yearly, and the results collated. Patients are encouraged to comment on the service using this questionnaire.

Any issues are highlighted and discussed at staff meetings. Where necessary, this feedback is used to improve the service.

We have clear notices in the waiting room showing people how to comment about the quality of service or how to make a complaint.

## DEVELOPMENT AND TRAINING

*Arrangements for the appropriate development and training of employees.*

Staff training policy

All staff at Greenacre Orthodontics complete CPD in accordance with guidelines set by the GDC these include key subjects of cross infection,

CPR and IRMER or radiation protection for DCPs, these are completed in-house where available or at the nearest postgraduate department. Child protection level 2 and POVA is to be completed every 3 years; other recommended topics are law and ethics, complaints management, oral cancers, equality and diversity, fire awareness. This is monitored and recorded by individual team members.

New members of staff follow our induction programme and training is given up to a point where that team member is then fully competent in their job. When new materials and equipment are used at the practice all staff receive appropriate training to be able to use it competently.

Staff are also encouraged to complete postgraduate certificate courses in radiography, oral hygiene, orthodontic nursing, PAR scoring and impression taking. Funding is provided for this.

Otherwise training or coaching is provided as and when appropriate. The staff appraisal and personal development planning process is used to support staff members identify learning needs/aspirations and plan to meet these.

## OTHER ADDRESSES

*Provide the address and telephone number for each of the premises used for the purposes of carrying on a dental care practice by the registered provider.*

Greenacre Orthodontics  
14 Wepre Drive  
Connahs Quay  
Flintshire  
CH5 4HA

Tel: 01244 818111

## ARRANGEMENTS FOR ACCESS TO THE PRACTICE

Our practice is fully DDA compliant. There is wheelchair access via a ramp to the front door. Two surgeries are available on the ground floor, with plenty of space for wheelchair access to the chairs.

The toilet facilities are on the ground floor and are DDA compliant with handrails etc present to assist users.

All treatment plans and options are provided in writing with information leaflets and waiting room information boards to support clinical information.

Appointments needing the most time, for example, assessment and brace fitting appointments are provided during school times, this maximises the number of after-school appointments available to patients.

## PATIENT RIGHTS AND RESPONSIBILITIES

*Provide information on the rights and responsibilities of patients including keeping appointments.*

Our aims can best be achieved if:

Patients only book appointments which they are able to attend and give adequate notification if cancellation should be necessary.

Patients allow plenty of time for attendance so that administrative matters can be dealt with before the clinical appointment time.

Patients are tolerant in circumstances where things do not always go right first time & realising that sometimes many procedural steps and staff are involved creating a complex situation.

When providing feedback on any aspect of service this is done in a nonconfrontational, friendly and courteous manner. We will always try to accommodate patient's views.

Patient's attend regularly and listen to the professional advice being given while also advising of any concerns which they may have.

We require each patient to provide us with an accurate Medical History detailing past and present conditions, including medication.

## ACCESS TO PATIENT INFORMATION

*Provide names of persons who have access to patient information and the patients' right in relation to disclosure of such information.*

*Mohammad Owaise Sharif  
Fyeza Noor Janjua Sharif  
Alison Johnson  
Madhavi Seshu  
Nicky Stanford  
Keely Smith  
Kelly Hughes  
Stacey Morley  
Natalie Woodward  
Deepika Rajan  
Samantha Chatterton  
Clare Eastwood  
Larni Foo  
Mohammed Amir Hamzah  
Kelsey Hayter  
Kathryn Caswell  
Dajana Gjoka  
Kenzie Morris  
Faith Loren Pisani  
Ugochi Nwanya*

Our IG Lead is responsible for controlling and monitoring the distribution and sharing of information as well as ensuring staff fully understand their obligations in relation to IG.

All relevant staff have undergone IG training. The IG lead also has responsibility for making sure that all staff are up to date with training within the practice and have read and understood all policies and procedures.

All training is compulsory and completed as part of the staff's induction. Each training course has an assessment to assess competency and understanding. The training programme consists of:

- Data Protection
- Subject Access Request Handling
- Introduction into Information Governance
- Introduction into Document Management
- Password Tips
- PCI DSS Awareness Training
- Anti-Bribery and Corruption

Following this, all members of staff must agree to abide by these, signing a declaration/policy to this effect. The agreement is renewed yearly or sooner if there is a substantial change to process or legislation.

These policies and procedures, including the Common Law Duty of Confidentiality and the Data Protection Act 2018, are followed daily. Furthermore, all staff are expected to adhere and understand the policies in relation to Document Retention, Information Security, and Acceptable Use, all of which are accessible on file in the office. This allows our staff to deliver patient care in the most secure and responsible manner.

All paper based patient records stored at practice level are in secure, lockable filing cabinets with restricted access to only those who require access in order to complete their job role.

We have clearly defined retention periods for all records that are in line with the Records Management NHS Code of Practice. Once the relevant retention periods have expired, records are securely destroyed at our off site archive facilities and a full audit trail and report is kept within the online records management portal.

Electronic patient records are via Systems for Dentists and this is a cloud based system so all data is backed up. Our server is also backed up remotely via an encrypted service.

All personal data held on file both paper based and electronically is protected through the application of robust security measures to ensure its confidentiality, integrity and availability. Information security is managed by strict security measures that are in place at practice level. These include but are not limited to;

- Firewall management
- Encryption
- Anti-Malware and Anti-virus software

Patients are provided with a copy of the Patient Information Leaflet when they visit the practices and are made aware of the Privacy notice. These are also available online, on our website. Patients also have access to the Model Publication Scheme which complies with the Freedom of Information Act. All staff are trained in informed consent practices and information regarding their treatment is provided in writing to patients or their parent/guardian prior to them giving informed consent.

Practice meetings are held regularly and IG is included as an agenda item. Updates are communicated within this meeting to keep abreast with

standards, good practices and statutory obligations. In addition, any potential incidents or near misses, lessons learnt and any improvements to practice processes are discussed at this meeting in order to improve the service provided to patients.

The practice receives audits around IG on an annual basis. This frequency is increased if required to ensure the practice remains at the expected standard when looking after patient and information confidentiality.

The sharing or transfer of data is predominately electronic via NHS.net / FDS referrals. Where this is not possible, all data is sent through the securest means possible for the type of data shared by adhering to the secure transmission advice in the Data Protection Policy.

All information incidents are managed in line with ICO guidance on managing data breaches. Any points of interest and lessons are taken from these incidents and are implemented, reviewed and best practice shared via the staff meetings.

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| <b>Date Patient Information Leaflet written</b> | 04-03-2026             |
| <b>Author</b>                                   | Mohammad Owaise Sharif |

## **PATIENT INFORMATION LEAFLET REVIEWS**

|   |  |
|---|--|
| Date Patient Information Leaflet reviewed |  |
| Reviewed by                               |  |
| Date HIW notified of changes              |  |