About this factsheet

This factsheet explains how to find an NHS dentist, the charges that apply for NHS treatment, and how benefits or the NHS low income scheme may help you pay for NHS treatment.

It also looks at what you can expect if you receive NHS dental treatment and what you can do if you are dissatisfied with the care you receive. This factsheet also looks briefly at private dental treatment.

The information in this factsheet is correct for the period April 2016 – March 2017. Benefit rates are reviewed annually and take effect in April but rules and figures can sometimes change during the year.

The information in this factsheet is applicable in England. Please contact Age Cymru, Age Scotland or Age NI for their version of this factsheet. Contact details can be found at the back of this factsheet.
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1 Recent developments

- Charges for NHS treatment are reviewed annually. This factsheet lists charges that apply from 1 April 2016.

- In England from 1 April 2016, NHS Band 1 treatment costs £19.70, Band 2 is £53.90 and Band 3 is £233.70. See section 5.

2 Finding a dentist who offers NHS treatment

You can look for a dentist in your neighbourhood or further afield. Dental practices do not have catchment areas restricting where patients must live, so look for a practice that is convenient for you. For a list of practices that offer NHS treatment, you can:

- Visit the NHS Choices website and use a postcode or town search. This gives a list of practices and indicates those currently accepting new patients for NHS treatment.

- Contact NHS England by telephone. You can also ask them how to contact your Local Area Team. Speak to them if no local dentist willing to treat you as an NHS patient.

- Contact your local Healthwatch.

Contact the practice to find out when you could have an appointment. If you receive NHS treatment, the practice may add you to their list of regular patients but it does not have to keep a register.

3 Check-up and treatment plans

A check-up allows the dentist to review your oral health – your mouth, teeth, and gums – and discuss how you can reduce your risk of dental decay, gum disease and mouth cancer.

Regular check-ups are important even when you wear full dentures. The dentist can check your mouth and the fit of your dentures. Dentures usually need replacing at least every five years because the shape of your mouth changes over time.

Gum disease and mouth cancer

Gum disease is a significant threat to teeth. It damages the tissues that hold your teeth in your jaw; teeth then become loose and can ultimately fall out. If your gums regularly bleed when you brush your teeth, it could be a sign of gum disease. This should prompt a visit to a dentist for a check-up. Smokers are at greater risk of gum disease than non-smokers.

Most cases of mouth cancer are linked to tobacco and alcohol consumption. You are at greater risk if you regularly consume them together. The tradition in some communities of chewing paan or tobacco is particularly dangerous. For more information about gum disease and mouth cancer, see the NHS Choices website.
NHS and private treatment

Most dentists offer NHS and private treatment, so make sure the dentist knows if you want NHS treatment. If a treatment is available on the NHS, the dentist should not imply that it is not and offer private treatment instead. The dentist should offer the full range of NHS treatment and tell you if private treatment for a particular problem is the only option.

Note
NHS treatment aims to ‘secure and maintain oral health’. It does not include treatment for purely cosmetic reasons such as tooth whitening, veneers, large white fillings or white crowns on back teeth. You can only have ‘clinically necessary’ treatment as NHS treatment.

The practice should display their price list including NHS charges (section 5) and private charges (section 11) or be able to show you a copy.

If the dentist says you need treatment, ask the dentist to explain:

- your dental and/or gum problems
- what treatment options there are for each problem
- the pros and cons of each option
- whether there are NHS and private options and how they differ
- if the treatment is complex, how many times have they carried it out
- what would happen if you do nothing
- what course of treatment you need and how many visits are required
- how much the treatment will cost
- if it is NHS treatment, which of the three NHS charge bands the treatment falls into and when you need to pay
- the estimated cost of private treatment, if necessary for part or all of the treatment
- what the dentist can do and what you can do, to prevent further problems.

Note
You should be given a written treatment plan describing the Band 2 or Band 3 course of NHS treatment or describing a mix of NHS and private treatment, if that is what you need. The plan should include the cost of all the treatment to be provided.
If you are having what is called a ‘dental appliance’ fitted (e.g. a crown, bridge or denture), you can ask to see or for a statement of manufacture. This shows details of the device, who it was made and prescribed by, confirmation that it was made just for you and that it meets legal standards.

If you are unsure or unhappy about proposed NHS treatment, you can seek a second opinion. If the second opinion is different, it is important to remember dentists have the right to disagree and prefer different options. See section 5 if you have a second opinion, as charges will apply.

The British Dental Health Foundation can provide information about dental care and types of treatment.

4 Frequency of check-ups

Guidance from the National Institute for Health and Care Excellence (NICE) helps dentists to decide how often you should have a check-up. For adults this could be between 3 and 24 months. If you have good teeth and gums, it is likely to be between 12 and 24 months.

Based on your oral health and the risk of future disease, you and your dentist should agree a date for your next check-up. The dentist should record this in your notes at the end of a course of treatment.

5 NHS charging system

NHS treatment falls into one of three charging bands. The most expensive part of your course of treatment decides the amount you pay. The number of visits needed to complete the course does not affect the charge. Charges from 1 April 2016 are:

- **Band 1 – £19.70**
  This charge covers an examination, diagnosis including x-rays, advice on how to prevent further problems, preventive care such as application of fluoride and a scale and polish by the dentist.

- **Band 2 – £53.90**
  This charge covers everything under Band 1 plus fillings, root canal work and any extractions. The charge is not affected by the number of fillings or extractions in your agreed course of treatment.

- **Band 3 – £233.70**
  This charge covers everything under Bands 1 and 2 plus crowns, bridges or dentures. New dentures can be fitted with a metal identification tab on manufacture. This can reduce the risk of losing your dentures, should you need to go into hospital or live in a care home.
There is no charge – for taking out stitches, stopping bleeding or writing an NHS prescription. Usual NHS charges apply to dispense the prescription.

There is no charge – for simple denture repairs. You are not usually charged if dentures require adjusting in the first few weeks after fitting.

There is no charge – if you need more treatment at the same charge level (for example another filling) within two months of seeing your dentist.

Missed appointments – dentists cannot charge for missed appointments. However, if you continually miss appointments, they may not agree to treat you in future.

Urgent or out-of-hours treatment – this is charged at Band 1.

The replacement of lost or accidentally damaged dentures – this is charged at 30% of Band 3. In 2016 / 17, this is £70.11.

Second opinions – if you are unhappy with your treatment plan, you have a right to get a second opinion from another dentist. However, you must pay the first dentist a Band 1 charge for the consultation and pay the second dentist a Band 1 charge for their consultation. You must pay for any subsequent treatment.

5.1 Help with NHS charges

Entitlement to free NHS dental treatment or help towards the cost of treatment is based on your income and savings.

Automatic entitlement for help with NHS dental charges

You, and your partner if you have one, are automatically entitled to free NHS dental treatment if you receive Pension Credit Guarantee Credit.

You are also entitled to free treatment if you are included in an award of Income Support, income-based Jobseeker’s Allowance, income-related Employment and Support Allowance and in some cases Universal Credit. You must show your award letter to the dental receptionist as proof of entitlement.

NHS Low Income Scheme

If you are not automatically entitled to help but have a low income and savings of less than £16,000 (£23,250 if you live permanently in a care home) you may be entitled to full or partial help through the NHS Low Income Scheme (LIS).

You apply by completing the application form HC1. There is a short form for permanent care home residents receiving financial help from the local authority to pay their fees. The dental receptionist may have a copy of the HC1 form. You can request either form or ask questions about the LIS by calling the NHS Business Service Authority Customer Contact Team.
Entitlement to help with other NHS costs

You are entitled to help with other NHS costs if you receive:

- Pension Credit Guarantee Credit, or
- other benefits mentioned above, or
- help through the NHS LIS.

These include the cost of NHS prescriptions (if you are not already exempt from paying for them), buying new glasses and, in some circumstances, the cost of travel to receive NHS treatment. The Department of Health leaflet: HC11Help with health costs tells you about the help you can get. The NHS low income scheme is described in factsheet 61, Help with health costs.

Note
Checks are made on free and reduced cost treatment claims. If you say you have the right to free or reduced cost treatment when you do not, you may incur a penalty charge.

Note
You can only receive help with the cost of NHS treatment through the NHS LIS or if you receive any of the benefits mentioned above. There is no support to help with the cost of private dental treatment.

6 Urgent and out-of-hours treatment

You should seek urgent treatment if you experience severe pain, for example due to an abscess or acute infection and it is not eased by over-the-counter painkillers. Band 1 charges apply for treatment you need to deal with the immediate problem. You have to pay your usual prescription charge if the dentist issues a prescription.

Your regular dentist may offer urgent treatment during normal working hours. Outside normal working hours, call the surgery on the usual number. The message should tell you how to access urgent care.

If you do not have a regular dentist and need urgent treatment, call NHS 111. They can advise you and provide information about local out-of-hours dental services.
7 Community dental services

Most dentists can treat people with special needs on their premises. If you cannot get there because of a disability or a physical or mental health condition, ask your dentist to refer you to a specialised dental service. This is usually provided by the community dental service in either their own premises or through mobile units that visit you at home or visit care homes.

To find out about the community dental service in your area, contact NHS England for details of your Local Area Team, as this team will know what is available in your area. Alternatively, contact your local Healthwatch.

8 Dental care for care home residents

If you live in a care home, you should be able to make the same choices about your dental health as when living in your own home. Ask the care home manager how residents can access a dentist offering NHS treatment for regular or emergency care.

If you wear full dentures, you still need regular checks to review the health of your mouth and fit of your dentures. Dentures are likely to need replacing at least every five years, as your gums and jaw bone will eventually shrink and affect the fit of your dentures.

Lost dentures can be a problem if you are unable to clean your own dentures or during a hospital stay. Ask your dentist about denture marking, as dentures can be marked for easy identification. Many dental laboratories offer denture marking for a small charge.

9 Registration of dentists and other dental professionals

To practice in the UK, dentists and all dental care professionals - dental nurses, dental hygienists, dental technicians, clinical dental technicians, dental therapists and orthodontic therapists - must register with the General Dental Council (GDC). You can check the GDC register if you want to check the registration details of your dental professional.

The GDC produces a leaflet, Smile explaining the standards of care you can expect from dental professionals, what to expect from a visit to a dental professional and your options if you are unhappy with the experience.

Dental hygienists have a role in promoting good oral health and usually work alongside the dentist. Their services include thorough scaling and polishing, managing gum disease and applying treatments such as topical fluoride and fissure sealants. They may have had training that allows them to offer tooth whitening under the supervision of a dentist.
Dental technicians make dentures, bridges, crowns and braces to a dentist’s prescription.

Clinical dental technicians make the dental appliances mentioned above. If a patient has no teeth (the technical term is ‘edentulous’) and no implants, a clinical dental technician can accept a patient directly for the provision or maintenance of full dentures. In all other situations, they must work to a dentist’s prescription.

‘Fitness to practise’ complaints

The GDC can investigate complaints against dental professionals working privately or for the NHS. They can investigate if a complaint calls into question whether they should be able to remain on the register and continue to practise. This could include providing very poor quality treatment, inappropriate behaviour, being under the influence of drink or drugs, safety issues related to poor hygiene practice and fraud.

For most complaints, you should follow procedures explained in sections 10 or 11.1. However, if you are unsure whether your complaint is one the GDC can investigate, look on the GDC website or contact the GDC Customer Advice and Information Team.

9.1 Registration with and inspection by the Care Quality Commission

Dental practices, dentists and other dental professionals who set up their own practice must register with the Care Quality Commission (CQC). The CQC inspects each practice to ensure it meets quality and safety standards and publishes the inspection report on its website.

The CQC bases its dental practice inspections and reports on the same five key questions it asks when inspecting hospitals, other NHS and social care services: are they safe, effective, caring, responsive and well-led?

The CQC cannot investigate individual complaints but is interested to hear about your experience of care. This informs the regulation and future inspection of dental services. You can complete a ‘share your experience form’ on their website or call a dedicated number. They do not normally reply individually to feedback but in some cases may contact you for further information.

9.2 ‘Direct access’ to members of the dental team

You can book an appointment to see a dental care professional listed in section 9, even if you have not been seen or referred by a dentist.

Not all dental care professionals offer a ‘direct access’ service. If they do, they must only work to the scope of their practice and offer what they are confident they have the skills and competencies to provide.
Dental hygienists and other dental care professionals are legally only able to offer ‘direct access’ treatment on a private basis. If employed by a dental practice, it will depend on their employer’s preference and whether they want to and/or feel competent to work this way. A dental practice offering a ‘direct access’ service should make sure it’s publicity is clear about:

- the roles of different practitioners working in the practice
- what treatments are available through ‘direct access’
- how to book appointments, and
- what will happen to ensure a patient is referred on appropriately if a practitioner decides they cannot provide the treatment needed.

A dental hygienist can set up in business without employing a dentist but if they do, they must have appropriate indemnity insurance and seek your informed consent before starting treatment. They should have explicit processes in place for referring you to a dentist for further advice or treatment. There are treatments, such as tooth whitening, that they can only offer through a dentist’s prescription, with a dentist providing or being present on the premises when the first treatment is carried out. Dental therapists and clinical dental technicians can be trained in tooth whitening as an additional skill but the same conditions apply.

As they may not have a dentist’s prescription to work from, you should tell them about any medical or dental problems you have and they should keep a record of your treatment.

For further information about how direct access works go to www.gdc-uk.org/Dentalprofessionals/Standards/Pages/directaccessqas.aspx

10 Compliments and complaints about NHS treatment

You may want to let your dental practice know if you are pleased with the service they provide. Many practices actively seek your feedback so they can improve the service they offer.

Friends and Family Test

Dental practices must offer patients receiving NHS treatment a chance to provide anonymous feedback on their experience by answering the Friends and Family Test question:

“How likely are you to recommend our dental practice to friends and family if they needed similar care or treatment?”

Response options are: Extremely likely; Likely; Neither likely nor unlikely; Unlikely; Extremely unlikely; or Don’t know.

They may add a follow-up question such as ‘what would have made your visit here better?’ This allows you to explain your answer more fully.
Dental practices should make sure they offer a range of written and/or electronic ways for patients to give their views. This ensures all their patients have the opportunity to participate. Practices must submit data to NHS England and publish or display their own results locally. NHS England and NHS Choices publish the results of all practices on their websites.

**Concerns and complaints**

You can often resolve concerns about your treatment by speaking to your dentist. If this does not resolve the problem, the practice must follow the NHS complaints procedure. The practice will have a member of the team who is responsible for managing concerns and complaints. They should explain the process, investigate and respond to your complaint.

If you decide to make a formal complaint, the dental practice should tell you how to contact the free, independent NHS Complaints Advocacy Service. This service is arranged by your local authority and can help you make your complaint. You can contact your local Healthwatch for details of your local advocacy provider.

The practice should inform you in writing of their findings. If you are unhappy with their response, you can ask the Parliamentary & Health Service Ombudsman to investigate it further.

If your complaint relates to a dentist's fitness to practice, see section 9.

For more information, see factsheet 66, *Resolving problems and making complaints about NHS services*.

**11 Private dental treatment**

Some dentists only accept private patients, whilst others offer both NHS and private treatment.

There are no official guidelines for the cost of private treatment. Fees are set by each practice, so you may want to 'shop around' to get a general idea of fees charged by several local practices. They may have a price list for relatively simple treatments but this won’t give an indication of the quality of work or cost of more complex work.

Some dentists offer different ways to pay for treatment. You may pay at the end of a course of treatment or take out an insurance policy to cover the cost of treatment up to an agreed limit.

A ‘capitation scheme’ involves the dentist first assessing your dental health, then asking you to make a fixed monthly payment, based on your expected level of treatment. Your dental needs and hence monthly payments are usually reviewed annually.
Note
It is advisable to discuss your treatment options, ask for an estimated cost of the proposed treatment and agree the fee with the dentist. If expensive treatment is proposed, you may want to think about it further before agreeing to it or seek a second opinion.

11.1 Compliments and complaints about private treatment

Feedback, both positive and negative, helps practices understand patients’ needs, review their service and maintain high standards. If you have concerns about your treatment, you can often resolve them by speaking to your dentist without the need to make a formal complaint.

The NHS complaints procedure does not cover private treatment, even if the dentist also offers NHS treatment. Practices offering private treatment have their own complaints procedure. Ask about this when making your decision to join a practice.

If you are unable to resolve your concerns or complaint with the practice, you can approach the Dental Complaints Service (DCS) which is funded by, but independent of, the General Dental Council. The DCS looks at less serious complaints and can be contacted by phone or in writing.

If your complaint relates to a dentist’s fitness to practice, see section 9.
Useful organisations

**British Dental Health Foundation**
www.dentalhealth.org
Telephone helpline 01788 539780

Independent charity dedicated to improving oral health. They run the National Dental Helpline and produce a range of leaflets on dental health and dental treatments.

**Care Quality Commission**
www.cqc.org.uk
Telephone 03000 616 161 (free call)

Independent regulator of adult health and social care services in England, covering NHS, local authorities, private companies or voluntary organisations and people detained under the Mental Health Act.

**Dental Complaints Service**
www.dentalcomplaints.org.uk
Telephone complaints helpline 020 8253 0800

The Dental Complaints Service assists dental patients and dental professionals to resolve complaints about private dental services. It is funded by, but independent of, the GDC.

**General Dental Council**
www.gdc-uk.org
Telephone customer advice and information team 020 7167 6000

The General Dental Council (GDC) is responsible for registering all dentists and dental care professionals who practise in the UK. You can access a register its website. If you cannot access the internet, call their Customer Advice & Information Team.

**Local Healthwatch and Healthwatch England**
www.healthwatch.co.uk
Telephone 03000 683 000

Every local authority has a local Healthwatch that either provides free advocacy for those wanting to make a complaint about NHS services or can signpost you to your local NHS Complaints Advocacy Service. Search the Healthwatch England website or call for details of your local Healthwatch.

**NHS Business Services Authority (Low income scheme)**
Telephone customer contact team 0300 330 1341 or 0191 279 0563

This NHS Business Services Authority manages the NHS Low Income Scheme.
NHS Choices
www.nhs.uk
NHS Choices is a comprehensive web information service. Visit this website to find your nearest dentist. It can also help you find and use other NHS services, make choices about your health and learn more about the prevention and treatment of many health conditions.

NHS England
Telephone: 0300 311 22 33
NHS England can give details of dentists in an area. They can also provide contact details for your Local Area Team.

NHS 111
Telephone 111
NHS 111 is the 24 hour helpline in England for advice on urgent but non-life-threatening symptoms, including dental related problems.

Parliamentary and Health Service Ombudsman
www.ombudsman.org.uk
Telephone helpline 0345 015 4033
The Parliamentary and Health Service Ombudsman investigates complaints about NHS care in England. You must usually raise your complaint with the provider of the service before the Ombudsman will agree to be involved.
Age UK

Age UK provides advice and information for people in later life through our Age UK Advice line, publications and online. Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

Age UK Advice
www.ageuk.org.uk
0800 169 65 65
Lines are open seven days a week from 8.00am to 7.00pm

In Wales contact
Age Cymru
www.agecymru.org.uk
0800 022 3444

In Northern Ireland, contact
Age NI
www.ageni.org
0808 808 7575

In Scotland, contact Age Scotland by calling
Silver Line Scotland
www.agescotland.org.uk
0800 470 8090
(This is a partnership between The Silver Line and Age Scotland)

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