Factsheet 5
Dental care: NHS and private treatment
May 2019

About this factsheet
This factsheet explains treatment offered by the NHS, including how to find an NHS dentist, charges for NHS treatment, how receiving certain benefits or the NHS low income scheme can help with NHS treatment costs and what you can do if dissatisfied with the care you receive.

The factsheet also looks briefly at private dental treatment.

The information in this factsheet is correct for the period May 2019 to April 2020. 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. You can find their contact details at the back of the factsheet.

Contact details for any of the organisations mentioned in this factsheet can be found in the Useful organisations section.
1 **Recent developments**

Charges for NHS treatment are reviewed annually, usually in April. In England, treatment band costs from 1 April 2019 are:

- Band 1 - £22.70
- Band 2 - £62.10
- Band 3 - £269.30.

See section 3 for information on treatment included within each band.

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, so you can choose a practice convenient for you. To find practices offering NHS treatment, you can:

- visit www.nhs.uk ‘Find local services’ and enter a postcode. This identifies practices in the area and may indicate if they are accepting new adult patients. Follow the link to a practice’s website for further information.
- contact your local Healthwatch.
- contact NHS England by telephone.

Contact suitable practices and ask how soon they can offer appointments for new patients. They may not be able to offer one immediately.

If you cannot find a practice to treat you as an NHS patient, contact NHS England. They have details of your Local Area Team, who can explain local options.

2.1 **Urgent and out-of-hours treatment**

Call NHS 111 if you do not have a regular dentist and need urgent treatment. They can offer advice and information on local urgent and out-of-hours services.

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

Your regular dentist may offer urgent treatment during normal working hours. If you need urgent treatment outside this time, call the surgery and listen to the message explaining how to access care urgently.
**3 NHS charging system**

NHS treatment falls into one of three charging bands. The most expensive part of the course of treatment decides the band. The number of visits per course of treatment does not affect the charge.

Charges from 1 April 2019 are:

**Band 1 – £22.70**

This covers an examination, diagnosis including x-rays, advice on how to prevent further problems, preventive care such as application of fluoride and a simple scale and polish.

**Band 2 – £62.10**

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

**Band 3 – £269.30**

This covers everything under Bands 1 and 2 plus crowns, bridges and dentures. New dentures can be fitted with a permanent identification tab. This reduces the risk of losing them if you spend time in hospital, or live in a care home and carers are responsible for cleaning your dentures.

There is no charge for taking out stitches, stopping bleeding or writing an NHS prescription. Your usual NHS prescription charges apply.

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 for treatment needed in the same charge band (for example another filling), within two months of seeing your dentist.

Scale and polish. If your dentist says scaling is *clinically necessary*, it is available on the NHS and can be provided by a hygienist or dental therapist. A simple scale is included in a Band 1 course of treatment; if you have more complex gum related problems, it may be charged within a band 2 course of treatment. If you choose to have a scale and polish you must pay privately.

Missed appointments cannot be charged for but if you continually miss appointments, the dentist may not agree to treat you in future.

Urgent or out-of-hours assessment and specified urgent treatments needed to deal with the immediate problem, such as pain relief, a temporary filling or dental appliance repair incurs a Band 1 charge.

Replacement of lost or accidentally damaged dentures is charged at 30 per cent of Band 3. In 2019/20, this is £80.79.

Second opinions. You pay the initial dentist and second dentist a Band 1 charge for their consultations. Any treatment you subsequently agree to, is charged at the Band it falls into.

NHS website offers information about treatment available on the NHS.
4 Frequency of check-ups

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

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

5 Check-up and treatment plans

A check-up allows the dentist to review your oral health – your mouth, teeth, and gums; ask if you have had any problems; discuss your diet and teeth cleaning technique and ways to reduce your risk of dental decay, gum disease and mouth cancer.

Regular check-ups are important when you wear dentures. The dentist can check your mouth and how well the denture fits. Dentures usually last several years if you take good care of them. Eventually they fit less well because the shape of your jaw and gums changes over time.

NHS and private treatment

Most dentists offer NHS and private treatment, so make sure the dentist knows you want NHS treatment. A dentist should offer the full range of NHS treatment and tell you if private treatment is your only option for a particular problem. They should tell you the costs for NHS and any private treatment before you agree to it.

Practices contracted to provide NHS treatment should clearly display an up-to-date NHS price list and the surgery’s complaints procedure.

Note

The NHS provides ‘clinically necessary’ treatment to keep your mouth, teeth and gums healthy and free from pain. This does not include treatment for purely cosmetic reasons such as large white fillings or white crowns on back teeth, veneers or tooth whitening.

You need to pay for these privately.

Implants are usually only available privately. It is only in exceptional circumstances that they are available on the NHS.
Discussing your treatment needs and options

Before agreeing to proposed treatment, ask the dentist to explain:

- treatment options for each problem, pros and cons of each, what each involves, its likely success and reasons for their preferred option
- whether there are NHS and private options and how they differ?
- if the treatment is complex, how many times they have carried it out and if the work is guaranteed for any length of time?
- what would happen if you do nothing or delay treatment?
- how many visits you need to complete the course of treatment and how much it will cost?
- if it is NHS treatment, which of the three NHS bands, described in section 3, the treatment falls into and when you need to pay?
- estimated cost of private treatment for part or all of the treatment.

Note

The dentist should give you a written NHS treatment plan, describing Band 2 or Band 3 treatment, or if you need it, a mix of NHS and private treatment. You should have details of private treatment and associated costs in writing before you agree to it.

Before starting treatment, the dentist should obtain your consent. If you are unsure or unhappy about proposed treatment, you can seek a second opinion. If the second opinion is different, it is important to remember dentists have the right to prefer different options. Charges if you have a second opinion are described in section 3.

If having a 'dental appliance' fitted, for example a crown, bridge or denture, the person who prescribes it, usually a dentist, must offer you a statement of manufacture. This gives details of the appliance, who prescribed it, who made it, confirms it meets legal standards and was made just for you.

Gum disease and mouth cancer

Gum disease is a significant threat to teeth. It damages tissue that supports and holds your teeth in your jaw. If not managed, teeth can become loose and ultimately fall out. If your gums regularly bleed when you brush your teeth, it could be a sign of gum disease and you should book a check-up. You are at greater risk if you are diabetic or a smoker.

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 tobacco or paan is particularly dangerous. NHS website offers information about gum disease and mouth cancer.
6 Community dental services

Many dentists can treat people with special needs. If you cannot use their premises because of a disability or physical or mental health condition, your dentist can refer you to a specialised dental service. This is usually provided by the community dental service at their own premises, a specialist health centre, or in a mobile unit that visits you.

To find out about community dental services, contact NHS England, who have details of your Local Area Team. They can explain local arrangements. Your local Healthwatch may be able to advise you.

7 Dental care for care home residents

Care homes must identify your personal care needs, agree with you how to meet them and record this in your care plan. This includes oral health needs and whether you need support to maintain daily mouth care. If you need help or cannot clean your teeth, a local dentist or hygienist may be able to provide guidance so that care staff know how to assist you.

Ask the care home manager to explain how residents access a dentist offering NHS treatment for regular or emergency care. If you wear full dentures, you still need a regular check up to review your mouth health and fit of your dentures.

Lost dentures can be a problem if staff clean your dentures or you go into hospital. New dentures can be permanently marked for easy identification, so ask your dentist about denture marking. The Alzheimer’s Society has useful information describing some of the problems people with dementia may face at different stages of their illness and includes a DIY method of temporarily marking dentures.

NICE (National Institute for Health and Care Excellence) produces guidance on Oral health in care homes and a quick guide for care home managers, which is also useful for family members.

8 Providing feedback about NHS treatment

Many practices actively seek your feedback to help them improve the quality of care they provide.

Friends and Family Test

Dental practices must offer patients receiving NHS treatment a chance to provide anonymous feedback 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?’

Practices should offer a range of written and/or electronic ways for you to give your views. They submit data and each month NHS England publishes overall results for dental practices on its website.
8.1 Compliments, concerns and complaints

You can often resolve concerns about treatment by speaking to your dentist. If you remain dissatisfied and want to make a formal complaint, the practice must follow the NHS complaints procedure.

A member of staff must be responsible for managing concerns and complaints. This includes explaining the process, and investigating and responding to your complaint in writing. They should tell you how to contact the free, independent NHS Complaints Advocacy Service. This optional service can help you think through and make your complaint.

If unhappy with their response, you can ask the Parliamentary & Health Service Ombudsman to investigate it further. The practice letter explaining the outcome of its investigation, should explain how to do this.

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

If your complaint relates to fitness to practice, see section 12.

9 Help with cost of NHS dental treatment

Entitlement to free NHS dental treatment or help towards the cost, 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 treatment if you receive Pension Credit Guarantee Credit.

You are entitled to free treatment if you are included in an award of Income Support, income-based Jobseeker’s Allowance or income-related Employment and Support Allowance. You may be entitled to free treatment if you receive Universal Credit and meet eligibility criteria. Go to the NHS website for information.

You must show your award letter to the dental receptionist as proof of entitlement.

NHS Low Income Scheme

If not automatically entitled to help but on a low income with savings of less than £16,000 (£23,250 if you live permanently in a care home), you may be entitled to help through the NHS Low Income Scheme (LIS). Whether this is full or partial help depends on your financial circumstances. If entitled to full help, you receive an HC2 certificate; if entitled to partial help, you receive an HC3 certificate.

To apply, download and complete application form HC1. If you live permanently in a care home and receive financial help from the local authority to pay your fees, complete short form HC1 (SC). To request copies of either form, if you have questions about the LIS or need help completing the form, call 0300 303 1343.
Note
You can only receive help with the cost of NHS treatment through entitlement to benefits mentioned above or the NHS LIS. There is no support towards private dental treatment costs.

Entitlement to help with other NHS costs
If you get help with dental costs because you receive certain benefits or have an HC2 or HC3 certificate, you are entitled to help with other NHS charged-for services.

You can get help with NHS prescriptions and sight tests (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.

For information see factsheet 61, Help with health costs.

Private dental treatment
Some dentists offer NHS and private treatment, while others accept private patients only.

There are no official guidelines for the cost of private treatment. Practices set their own fees, so you may want to shop around to get a general idea of fees charged locally. They may have a price list for relatively straightforward treatments but this does not give an indication of or reflect the quality of work.

It is advisable to ask how frequently the dentist carries out the proposed treatment and for a written estimate. Agree fees before treatment starts and ask if there would be additional charges, if there are complications and you need more treatment. If the dentist proposes expensive treatment, you may want to think about it or seek a second opinion.

Ways to pay
Dentists offer different ways to pay. You may be asked to join a dental plan or able to choose to pay at the end of each course of treatment. You may be covered through current private medical insurance or if opting for private treatment in the long term, decide to take out an insurance policy.

Dental plans can involve the dentist assessing your oral health, then setting a fixed monthly payment, based on the outcome. Maintenance plans offer this type of preventative care and typically offer a set number of visits to the dentist and hygienist per year and emergency cover. You may need to have your dental needs and hence monthly payments reviewed annually. Other types of plan offer unlimited cover.

Always read the terms and conditions of any plan or policy before signing up, so you know what is and is not included.
10.1 Compliments, concerns and complaints

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

Practices have their own formal complaints procedure for private treatment. Ask about this when making your decision to join a practice or before starting private treatment. The NHS complaints procedure does not cover private treatment, even if your course of treatment has NHS and private elements to it.

If 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 12.

11 The role of the Care Quality Commission

All dental practices, dentists and dental professionals who set up their own practice must register with the Care Quality Commission (CQC).

Each year it inspects 10% of dental practices to ensure they meet quality and safety standards. They look at whether the practice is safe, effective, caring, responsive and well-led. They publish inspection reports on their website but do not give practices a rating. Its overall findings on dental practices feature in the Primary Medical Services section of its annual report: The State of Health and Social Care in England.

The CQC cannot investigate individual complaints but is interested to hear about patient’s experience of care. This informs the regulation and future inspection of dental services. You can complete a 'share your experience form' on their website.

The CQC does not normally reply individually to feedback but in some cases may contact you for further information.
Dentists and other dental professionals

The role of the General Dental Council
To practice in the UK, dentists and 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 view the GDC register online and search for registration details of practicing dental professionals.

Registered professionals must abide by the GDC ‘Standards for the dental team’.

Dental nurses - work closely with and support the dentist during and following patient treatment.

Dental hygienists - have a role in promoting oral health and usually work alongside the dentist. Their services include thorough scaling and polishing, managing gum disease and applying topical fluoride and fissure sealants. They may have training that allows them to offer tooth whitening under supervision of a dentist.

Dental technicians – make appliances including dentures, bridges, crowns and braces to a dentist’s prescription.

Clinical dental technicians – like dental technicians, make dental appliances. If you have no teeth (the technical term is ‘edentulous’) and no implants, a clinical dental technician can accept you directly for provision or maintenance of full dentures. Otherwise they must work to a dentist’s prescription.

Orthodontic therapists - work alongside orthodontists (specialist dental practitioners) and can carry out a limited range of treatments and procedures to straighten and improve the alignment of teeth.

The GDC produces a leaflet Smiles, available in several languages, explaining standards of care to expect from dental professionals, what to expect when you visit and options if unhappy with the experience.

Safety concerns and ‘Fitness to practise’ complaints
The GDC can investigate a complaint against a dental professional working for the NHS or privately, where there are reasons to question whether they should be able to remain on the register and practice. This might arise due to provision of very poor quality treatment, safety issues related to poor hygiene practice, inappropriate behaviour, fraud or being under the influence of drink or drugs.

If unsure whether your complaint is one the GDC can investigate, look on its website for information about what they can and cannot look into. If it is something they can investigate, follow online instructions.

For general complaints about NHS or private treatment, see section 8.1 or 10.1.
12.1 ‘Direct access’ to members of the dental team

It is possible to book an appointment to see a dental care professional listed in section 11, if you have not been seen or referred by a dentist. This is known as ‘direct access’. Not all dental care professionals offer this service and if they do, must only work to the scope of their practice and offer what they are confident they have competencies to provide.

Legally, hygienists and other dental professionals can only offer ‘direct access’ treatment on a private basis. If employed by a dental practice, it depends on their employer’s preference and whether they want and feel competent to work this way.

A dental practice offering a ‘direct access’ service should make sure its publicity is clear about:

- roles of different practitioners at the practice
- what treatments are available through ‘direct access’
- how to book appointments, and
- what happens 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. If they do, they must have appropriate indemnity insurance and seek your informed consent before starting treatment. They should have explicit processes for referring you to a dentist for further advice or treatment.

Hygienists can only offer treatments, such as tooth whitening, through a dentist’s prescription, with a dentist providing or being present on the premises for the first treatment. Dental therapists and clinical dental technicians have training in tooth whitening as an additional skill but the same conditions apply when offering a direct access service.

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

For further information about how ‘direct access’ works, see www.gdc-uk.org/professionals/standards/direct-access.
Useful organisations

Alzheimer’s Society
www.alzheimers.org.uk
Telephone 0300 222 1122
Offers information and support to people living with dementia, their families and carers through its helpline and local branches.

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
https://dcs.gdc-uk.org/
Telephone complaints helpline 020 8253 0800
Assists 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
Responsible for registering all dentists and dental care professionals who practise in the UK and publishes the register on its website. You can search the register to see if a practitioner is registered.

Healthwatch England and Local Healthwatch
www.healthwatch.co.uk
Telephone 03000 68 3000
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 contact details of your local Healthwatch.

NHS Business Services Authority (Low income scheme)
Telephone customer contact team 0300 330 1343 or 0191 232 5371
Manages the NHS Low Income Scheme.
NHS England
www.england.nhs.uk
Telephone 0300 311 22 33
Oversees the budget, planning, delivery and operation of the NHS in England. It can give contact details of local dentists and of your Local Area Team if you cannot find a dentist to accept you for NHS treatment.

NHS website
www.nhs.uk
Comprehensive web only health information service. Visit this website to find your nearest dentist and other NHS services, and learn more about the prevention and treatment of many health conditions.

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

Oral Health Foundation
www.dentalhealth.org
Telephone helpline 01788 539 780
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.

Parliamentary and Health Service Ombudsman
www.ombudsman.org.uk
Telephone helpline 0345 015 4033
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 Advice
www.agecymru.org.uk
0800 022 3444

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

In Scotland contact
Age Scotland
www.agescotland.org.uk
0800 124 4222

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The evidence sources used to create this factsheet are available on request. Contact resources@ageuk.org.uk