

Factsheet 5 Dental care: NHS and private treatment

May 2025

About this factsheet

This factsheet explains dental 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 paying for NHS treatment costs, and what you can do if dissatisfied with the care you receive.

The factsheet also looks at private dental treatment. Currently, you might not be able to access an NHS dentist and private treatment might be an alternative option.

The information in this factsheet is correct for May 2025 to April 2026. Benefit rates are usually 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. If you are in Wales, Scotland or Northern Ireland, please contact Age Cymru, Age Scotland or Age NI for advice on the rules in these countries. You can find their contact details at the back of the factsheet.

Contact details for any organisation mentioned in this factsheet can be found in the *Useful organisations* section.

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1 Finding a dentist who offers NHS treatment

You can look for a dentist in your neighbourhood or further afield. Unlike GP practices, dental practices do not have catchment areas, so you can choose a practice convenient for you. You may be asked to fill in a registration form at your first visit, but this does not mean that access to an NHS dental appointment in the future is assured. To find practices offering NHS treatment, you can:

- go to www.nhs.uk/service-search/find-a-dentist and enter a postcode. This flags local practices and should indicate if they are accepting new adult patients. Follow the link to a practice's website for more information
- go to www.cqc.org.uk/what-we-do/services-weregulate/find-dentist (from the Care Quality Commission) and enter your post code. They have details of services provided and the quality of care you can expect
- contact your local Healthwatch, who may be able to provide information about local services.

Contact suitable practices directly and ask when they can offer appointments for new patients, as they may not be able to offer one immediately.

If you cannot find a practice to treat you as an NHS patient, contact your local Integrated Care Board (ICB) who are responsible for the commissioning of NHS dental services in England. You can find contact details at www.nhs.uk/nhs-services/find-your-localintegrated-care-board/

1.1 Urgent and out-of-hours treatment

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-thecounter painkillers.

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. 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.

Attending Accident and Emergency (A&E)

You should visit A&E if you have a serious problem, such as an injury to the face, mouth or teeth, or severe or increasing swelling of the mouth, throat or neck making it difficult to breathe, swallow or talk.

If you are unsure whether you should go to A&E, contact NHS 111 online.

2 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 2025 are:

Band 1 – £27.40

This covers an examination, diagnosis including xrays, advice on how to prevent further problems, a scale and polish if clinically needed.

Band 1 charges apply to urgent and out of hours care for any NHS treatment you need to deal with the immediate problem, which can usually be dealt with in one visit. If the dentist issues an NHS prescription, you must pay your usual charge.

Band 2 – £75.30

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 – £326.70

This covers everything under Bands 1 and 2 plus crowns, bridges, and dentures.

There is no charge for:

- taking out stitches, stopping bleeding, or writing an NHS prescription. Your usual NHS prescription charges apply.
- simple denture repairs. You are not usually charged if dentures require adjusting in the first few weeks after fitting.

 treatment needed in the same band or a lower band, within two calendar months of completing a course of treatment.

Scale and polish. If your dentist says scaling is *clinically necessary*', it is available on the NHS. 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 and can usually make an appointment directly with the hygienist.

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

Replacement of lost or accidentally damaged dentures, bridge or dental appliance is charged at 30 per cent of Band 3. This is £98.00.

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.

The NHS website offers information about treatment available in each treatment band.

3 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 three 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 should record this in your notes. If you do not attend regular check-ups or miss appointments, you may be removed from your dentist's NHS patient list and may need to access NHS dental care from a different dentist who is accepting new NHS patients.

4 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 about 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 have they carried it out, and is the work 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 will it cost?
- if it is NHS treatment, which of the three NHS bands in section 2 does the treatment fall into, and when do you need to pay?
- estimated cost of private treatment for part, or all, of the treatment.

Note

The dentist should give you a written personal 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 2.

If having a '*dental appliance*' fitted, for example a crown, bridge, or denture, the person prescribing it must offer a statement of manufacture with 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, betel nuts or paan are particularly high risk. NHS website offers information about gum disease and mouth cancer.

5 Community dental services

Many dentists can treat people with special needs. If you cannot use their premises because of a disability or medical 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, mobile clinics, or home visits.

To find out about community dental services, contact your local ICB. They can explain local arrangements. Your local Healthwatch may be able to advise you.

6 Hospital dental services

Your dentist may refer you to the hospital dental service for further treatment, such as complex oral surgery, orthodontic treatment, and oral cancer referrals. Dental charges do not apply to NHS secondary hospital dental care, but you may have to pay for any dentures or bridges.

7 Dental care for care home residents

Care homes should 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 provide guidance, so 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 should be permanently marked during manufacture, 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 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

Friends and Family Test

Dental practices must offer patients receiving NHS treatment a chance to provide anonymous feedback by answering the following question: 'Overall, how was your experience of our service?'

Practices should offer a range of written and/or electronic ways for you to give your views.

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 more information on complaints, see factsheet 66, *Resolving problems and making complaints about NHS services.* If your complaint relates to fitness to practise, see section 12 of this factsheet.

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 you are 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 from NHS website. 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 330 1343.

Note

You can only receive help with the cost of NHS treatment through entitlement to benefits mentioned on previous page 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*.

10 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, their 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.** Ask if there will 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 be 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 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 plans might 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 practise, 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).

The CQC gathers information from various sources, including people who use the services and relevant health organisations. This informs the timings of their inspections, during which they look at whether the practice is safe, effective, caring, responsive and wellled. Inspection reports are published on the CQC website, but they do not give practices a rating.

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

12 Dentists and other dental professionals

The role of the General Dental Council

To practise 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. They can participate in preventative programmes without you having to see a dentist first.

Dental hygienists – can provide 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 therapists - can provide the same treatments as hygienists but may also perform other treatments such as fillings.

Dental technicians – make and repair 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, they 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 has information on its website about the standard of care you should expect from your dental professional, tooth whitening, dental charges and going abroad for dental treatment.

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 their work falls seriously short of acceptable standards.

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 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 sometimes possible to book an appointment to see a dental hygienist or dental therapist for private treatment, even if you have not been seen or referred by a dentist.

Clinical dental technicians can see patients who have none of their own natural teeth without a prescription from a dentist.

This is known as '*direct access*'. Not all practices and dental care professionals offer this service. Those who do must only work to the scope of their practice and offer what they are confident they have competencies to provide.

Direct access may be offered within both private and NHS dental care. 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.

As these dental professionals may be working without a dentist's prescription, tell them about any medical or dental problems and they should keep a record of your treatment.

Hygienist

If you see a hygienist through direct access, 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.

Tooth whitening

Dental hygienists and dental therapist can carry out their full scope of practice without a dentist's prescription and without the patient having to see a dentist first.

The only exception to this is tooth whitening. This must be carried out through a dentist's prescription. The first use of each whitening cycle must be carried out under the direct supervision of a dentist, with a dentist on the premises.

Clinical dental technicians can also have training in tooth whitening. The GDC has information on its website 'what you need to know about tooth whitening before committing to it'.

For further information about 'direct access', see:

www.gdc-uk.org/information-standardsguidance/standards-and-guidance/direct-access

Useful organisations

Alzheimer's Society

www.alzheimers.org.uk Telephone 0333 150 3456

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 616161

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.dcs.gdc-uk.org Customer Service Team 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 Customer advice and information team 020 7167 6000

Responsible for registering all dentists and dental care professionals who practise in the UK. You can search the online register to see if a practitioner is registered.

Healthwatch England and Local Healthwatch

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 contact details of your local Healthwatch.

NHS Business Services Authority (Low income scheme)

www.nhśbsa.nhs.uk/nhs-low-income-scheme Telephone customer contact team 0300 330 1343

Manages the NHS Low Income Scheme.

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

111.nhs.uk 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 01788 546 365

Independent charity dedicated to improving oral health. Their website provides information and advice about 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.wales 0300 303 44 98

In Northern Ireland contact

Age NI www.ageni.org 0808 808 75 75

In Scotland contact

Age Scotland www.agescotland.org.uk 0800 124 42 22

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The evidence sources used to create this factsheet are available on request.

Contact resources@ageuk.org.uk

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