



Dear Colleague

4 February 2026

DECLARATION OF COMPLIANCE OF TERMS OF SERVICE – EARLY NOTIFICATION TO DENTISTS AND DENTAL BODIES CORPORATE

Summary

1. To notify dentists and dental bodies corporate providing NHS dental services that it is the intention of the Scottish Ministers to introduce a Declaration of Compliance of Terms of Service.

Background

2. By joining a dental list, to provide NHS services on behalf of the NHS Board, dentists and dental bodies corporate agree to comply with the terms set out by the National Health Service (General Dental Services) (Scotland) Regulations 2010 (“the regulations”). That includes the terms of service set out in schedule 1 of the regulations. Contractors are also required to ensure that any dentist employed or engaged by them to provide, or assist in the provision of, general dental services complies with those terms of service.
3. It is now the intention of Scottish Ministers to develop a process around compliance whereby new applicants to the dental list and existing entrants will require to complete a Declaration of Compliance every three years.

Addresses

For action
Chief Executives, NHS Boards

Directors of Dentistry

For information
Chief Executive,
NHS National Services Scotland

Chief Executive,
NHS Education for Scotland

Director, Practitioner Services

Dentists/Dental Bodies Corporate

Policy Enquiries to:

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4. The new arrangements are intended for introduction during 2026/27, further details will be forthcoming in due course. Officials will be working closely with BDA Scotland throughout the development of these new arrangements.

Terms of Service

5. We have had representations made to us that the regulations can be complex to understand. Therefore, as a first step to ensuring dentists and dental bodies corporate are best placed to meet the Declaration of Compliance requirements, this PCA highlights some obligations which we feel are key in supporting patient care and access to NHS dental services.
6. You should be aware that the information in this PCA does not constitute legal advice, nor is it an exhaustive list of the terms of service, which include the wider requirements of the regulations and other legislation. Dentists and dental bodies corporate should still read, and familiarise themselves with, the full terms of service as set out in the regulations, particularly Schedule 1 (Terms of Service for Dentists), and seek independent legal advice on any issues they may have. In addition, all dental professionals working within NHS Scotland are also expected to comply with the General Dental Council (GDC) obligations and expectations as set out in the [Standards for the Dental Team](#).
7. A copy of the regulations is available online at:
<https://www.legislation.gov.uk/ssi/2010/208/contents>.
8. Please note for the purposes of this document the term dentist has been used to mean both dentist and dental body corporate.

Key Obligations for Dentists and Dental Bodies Corporate providing NHS Dental Services

Capitation Arrangement

9. The capitation arrangement applies equally to child and adult patients, there is no distinction on age. When a dentist accepts a person into a capitation arrangement they are agreeing to provide the patient with the appropriate care and treatment, including emergency care, to manage their oral health.

Entering into a Capitation Arrangement

10. At the point of acceptance the dentist must examine the patient and chart the patient's decayed, missing or filled teeth (dmft / DMFT) on the patient record. However, if a patient is under 3 years of age a dental nurse or therapist can accept the patient on the dentist's behalf. If this happens, the dentist must chart the patient's dmft / DMFT the first time they see them for an examination.
11. The dentist must provide the patient with a treatment plan which sets out if any treatment is required, how it will be provided, an estimate of the NHS charge, the recommended recall period for the next exam; and any proposals for private treatment including the cost.

12. A dentist cannot ask a patient to pay a fee/deposit to enter into a capitation arrangement for NHS services. In addition, as a matter of policy, we do not expect the NHS registration of a child to be made dependent on an adult parent (or guardian) registering as a private patient.
13. A dentist cannot ask a patient to pay a deposit in order to arrange an appointment for a dental exam. If, after a dental exam, further appointments are required for a course of treatment, the dentist can ask a patient to pay a deposit towards the cost of their treatment when the appointment is arranged. The deposit should be reasonable and cannot be for more than the expected cost of the treatment.
14. Where a patient is exempt from paying a patient charge for their NHS care and treatment, or the charge is remitted, then a deposit cannot be taken for the expected cost of the treatment.
15. A patient who has entered into a capitation arrangement can be charged for failing to attend a scheduled appointment.

Treatment Planning as part of the Capitation Arrangement

16. The capitation arrangement supports the full range of NHS care and treatment being provided, where appropriate, to all patients. Throughout a capitation arrangement the dentist (or their deputy) must:
 - provide relevant oral health education and advice to the patient, or where appropriate their representative, or arrange for it to be provided by a relevant team member (i.e. for children this could be a Childsmile nurse);
 - discuss any treatment required with the patient or their representative;
 - provide the patient with a treatment plan which tells them: what treatment is required, how it will be provided, an estimate of the NHS charge, the recommended recall period for the next exam; and any proposals for private treatment including the cost;
 - ensure care and treatment, in discussion with the patient, is provided in a clinically appropriate timescale;
 - provide a revised treatment plan if the plan changes or the patient asks for it.

Repair (or Replacement) of Restorations

17. Under a capitation arrangement the dentist is required to repair or replace a permanent filling; root filling; inlay; onlay; or crown, within 12 months of the date on which it was provided. This must be done free of charge to the patient, unless:
 - the repair or replacement was needed due to trauma;
 - another dentist has provided treatment on that tooth within the 12 month period (excluding emergency treatment such as a temporary filling);
 - the patient insisted on the treatment even though the dentist advised that another option would be more clinically appropriate;
 - the condition of the tooth means the restoration cannot be repaired or replaced and a different treatment is now required.

Standards of care

18. When providing NHS treatment, dentists, including those employed by bodies corporate, must:
 - use the proper degree of skill and attention;
 - give all treatment personally, except where treatment is being provided:
 - on referral by another dentist, dental service, or a dental student,
 - by a deputy, assistant¹, or DCP, or
 - under sedation, where another person, suitably qualified and experienced, must also remain with the patient throughout the treatment.
 - use materials that are suitable for the purpose;
 - provide care and treatment required to manage the oral health of the patient at appropriate intervals.
19. Dentists must not provide, or assist in providing, treatment that is not reasonably necessary to manage the oral health of the patient.
20. A dentist must keep complete, accurate and up to date patient records which:
 - detail the care and treatment given to each patient under a capitation arrangement and any referrals for treatment;
 - any treatment on referral;
 - any private care and treatment provided along with NHS treatment.
21. Records, forms, radiographs, photographs, and study models must be retained for a period of two years after completion of the course of care and treatment to which they relate. However, you should be aware records may need to be retained for longer for other purposes, such as indemnity requirements.

Referral Arrangements

22. Where a dentist cannot provide the particular care and treatment that a patient requires, either through not having the necessary facilities (for example, a dental chair suitable for bariatric patients), experience or expertise, the dentist can, if the patient agrees, refer them to another dentist under NHS dental services or to a hospital or other NHS service.
23. If, in the opinion of the dentist who accepts the patient, the care and treatment originally prescribed needs to be varied, the patient should be issued with a revised treatment plan. Until the treatment on referral has been completed, the contractor who accepts the patient should provide any emergency cover required solely in relation to that particular care and treatment² (the referring dentist remains responsible for all remaining care and treatment).

¹ An assistant is either i) a dentist employed by a contractor, as an assistant under a contract of service, or ii) a dentist undertaking vocational training who is employed under a contract of service with NHS NES and is supervised by a contractor or salaried dentist.

² Ordinarily if the referral is to the PDS or secondary care service, the referring dentist would generally continue to provide ongoing care and management of dental pain.

24. Under the referral, the dentist must also repair or replace any restoration provided by them within 12 months of the date on which it was provided, in accordance with the requirements referenced at paragraph 18.

Emergency Cover

25. Dentists are required to provide emergency or urgent care for their registered patients. During in-hours (i.e. 8am-6pm, Mon-Fri) dentists can triage patients but must see a patient promptly if the dentist thinks their oral health will significantly deteriorate if they are not seen or if the patient has severe dental pain.

26. Emergency/urgent care can be provided by the dentist themselves or an appropriately qualified deputy, but patients should not be advised to wait and call the out of hours service or NHS 24.

27. During out of hours (i.e. after 6pm on weekdays and at the weekend) arrangements may vary depending by NHS Board area. Some Board areas have a specific system in place for urgent and emergency care out of hours. Where no Board-wide system is in place, the dentist themselves, or an appropriately qualified deputy, remains responsible for providing urgent and emergency care out of hours for their registered patients.

Premises and Equipment

A dentist must provide proper, sufficient, and safe premises, equipment, instruments, and procedures, appropriate to the location and type of services they are providing.

28. Health Boards have powers to inspect practice premises. The aim of any inspection is to allow the Health Board to be satisfied that the practice premises meet the required standards summarised above. Typically, a practice inspection will be for a new practice location or as part of the three-year programme of existing practice locations.

29. Notice will ordinarily be given in advance of a practice inspection. However, in certain circumstances the Health Board can also make an unannounced inspection, such as where concerns were raised about patient safety during a previous routine inspection, or where separate information comes to light that necessitates investigation by them.

Private Dental Care

30. Dentists, including those employed by bodies corporate, must not:

- tell patients that treatments that are available on the NHS are only available privately;
- seek to mislead patients about the quality of care and treatment available under NHS arrangement.

31. As long as the patient consents, the dentist can provide patients with a mix of NHS and private care and treatment, including on the same tooth, e.g. an NHS root canal but a private crown, (except for courses of orthodontic treatment which must be provided either fully NHS or fully private).

Continuity of Care

32. The dentist remains responsible for those patients under a capitation arrangement even if the dentist is not in the practice location. A dentist may arrange for care and treatment to be provided by a deputy or assistant:

- If a dentist intends to be absent from the practice premises for more than 28 consecutive days the contractor must notify the Health Board of the intended absence; and the name and address, if different to the practice premises, of the deputy or assistant (if any) responsible for providing or assisting with the provision of NHS dental services during the dentist's absence.
- If a dentist intends to be, or is, absent from the practice premises for more than two months they must notify the Health Board in writing; and must not employ an assistant for any period of absence in excess of two months without the consent of the Health Board.
- A deputy may provide NHS dental services at places or at times other than those arranged by the contractor for whom they are acting, but consideration should be given to the convenience of patients.

Terminating a Capitation Arrangement

33. A dentist may terminate a capitation arrangement so long as the reason does not relate to the patient's race, gender, social class, age, religion, sexual orientation, appearance, disability, or medical condition.

34. Ordinarily the dentist must give a patient at least 3 months' notice in writing of the termination of the arrangement, and make every effort to satisfactorily complete, or secure the satisfactory completion of, any treatment agreed and underway, or further treatment that may be necessary to manage the oral health of the patient, before the termination of the arrangement.

35. At the same time as notifying the patient the dentist must advise the Health Board in writing that notice has been given (by submitting a GP200 form to the Health Board), and give details to the Health Board of any care and treatment which it has been agreed the patient will receive and which is outstanding at the date of the notice including any arrangements made for completion of that care and treatment.

36. Where a dentist wishes a capitation arrangement to be terminated on less than three months' notice they must apply in writing to the Health Board and ask for consent to do so. It should be noted that an early termination is at the discretion of the Health Board.

37. Please note that the notice period referenced in this section does not apply to termination of a capitation arrangement where the patient is in a care home and the dentist is a domiciliary care dentist. Separate conditions set out in the regulations apply for these patients.

Immediate Termination of a Capitation Arrangement

38. A dentist can notify the Health Board that they want a capitation arrangement to be terminated with immediate effect where:

- a patient has committed an act of violence against any dentist, dental care professional or any other person employed or engaged by the dentist; or
- a patient has behaved in such a way that such a person has feared for his or her safety; and
- the incident has been reported to the police.

39. As per paragraph 37, this does not apply to a domiciliary care dentist in relation to a capitation arrangement with a care home resident.

Quality Improvement Activities

40. Dentists must continue to develop their professional knowledge and skills and are required to undertake quality improvement activities, approved by NHS Education for Scotland or the Health Board, on a three-yearly cycle.

41. Dentists on sub-part A of the first part of a dental list, or on the second part of a list, have to do at least 15 hours of quality improvement activities over a three-year QI cycle. Dentists who join the list after the first day of the QI cycle, have to undertake a proportionate amount of QI hours in each of the remaining years of the cycle.

Action

Dentists and Dental Bodies Corporate

42. We would ask that all dentists and dental bodies corporate consider the key obligations outlined in this PCA, and that appropriate actions are taken to ensure the terms of service are being met. We would suggest this could be done as part of regular practice meetings.

43. Bodies corporate have a specific function in ensuring that their dentists, employees, or associates, are suitably supported and that they comply with terms of service.

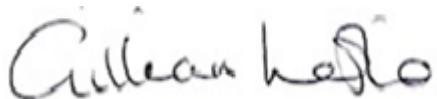
Orthodontists

44. Specialist orthodontists will also be included in the new arrangements. Whilst this PCA necessarily focuses on general dentistry, we advise that specialist orthodontic practices also review the relevant terms of service.

NHS Boards

45. NHS Boards are asked to issue this PCA to all dentists and dental bodies corporate on their dental list.

Yours sincerely,



Gillian Leslie
Chief Dental Officer