The Secretary of State, in exercise of the powers conferred on him by sections 4(1), (1A), (1B) and (2), 25(1), (2), (2B) and (3), 28(1), 70(1A), 71(1), 71A, 73, 75, 105(7) and 108(1) of, and paragraphs 2(6) and 3(3) and (5) of Schedule 11 to, the National Health Service (Scotland) Act 1978(1) and of all other powers enabling him in that behalf and after consultation with the Council of Tribunals and its Scottish Committee in accordance with section 10 of the Tribunals and Inquiries Act 1971(2) and with such organisations as appear to him to be representative of persons providing general dental services and of the dental profession in accordance with sections 4(1B) and 25(3) of the said Act of 1978, hereby makes the following Regulations:

The National Health Service (General Dental Services) (Miscellaneous Amendments) (Scotland) Regulations 1990

Made - - - - 28th August 1990
Laid before Parliament 10th September 1990
Coming into force except for the purposes of regulation 4(2) 1st October 1990
for the purposes of regulation 4(2) 1st April 1991

(1) 1978 c. 29; section 4(1) was amended by the Health and Medicines Act 1988 (c. 49) ("the 1988 Act"), Schedule 3; subsections (1A) and (1B) of section 4 were inserted by the 1988 Act, section 12(3); section 25(2) was amended by S.I. 1981/432, article 4(3), by the 1988 Act, Schedule 2, paragraph 11 and by the National Health Service and Community Care Act 1990 (c. 19) ("the 1990 Act"), section 40(2) and Schedule 9, paragraph 196(6) and was extended by section 17 of the 1988 Act; section 25(2B) was inserted by the 1990 Act, section 40(3); section 25(3) was amended by the Health Services Act 1980 (c. 53) ("the 1980 Act"), Schedule 6, paragraph 4 and Schedule 7 and by the Health and Social Services and Social Security Adjudications Act 1983 (c. 41) ("the 1983 Act"), Schedule 9, paragraph 24, contains provisions relevant to the making of Regulations; section 108(1) contains a definition of "regulations" relevant to the exercise of the statutory powers under which these Regulations are made; paragraph 2 of Schedule 11 was amended by the 1980 Act, Schedule 5, paragraph 7(2); paragraph 3(5) of Schedule 11 was amended by the 1990 Act, Schedule 5, paragraph 7(3).

(2) 1971 c. 62; see paragraph 41 of Part II of Schedule 1 to that Act, as amended by the National Health Service (Scotland) Act 1972 (c. 58), Schedule 6, paragraph 152 and the National Health Service (Scotland) Act 1978 (c. 29), Schedule 16, paragraph 35.
Citation, commencement and interpretation

1.—(1) These Regulations may be cited as the National Health Service (General Dental Services) (Miscellaneous Amendments) (Scotland) Regulations 1990 and shall come into force—
   (a) except for the purposes of regulation 4(2), on 1st October 1990; and
   (b) for the purposes of regulation 4(2), on 1st April 1991.

(2) In these Regulations, the “principal Regulations” means the National Health Service (General Dental Services) (Scotland) Regulations 1974.(3).

Amendment of regulation 2 of the principal Regulations

2.—(1) In regulation 2(1) of the principal Regulations (interpretation)—
   (a) for the definition of “capitation arrangements” there is substituted the following definition:

   ““capitation arrangement” means an arrangement between the dentist and the patient whereby the dentist provides care and treatment in accordance with paragraph 5 of Schedule 1;”;

   (b) the definitions of “dental estimate form”, “dental fitness”, “dental health” and “emergency treatment” are omitted;

   (c) for the definition of “estimate” there is substituted the following definition:

   ““estimate” means a form supplied by the Health Board, or a form to like effect, completed by the dentist and submitted to the Board in accordance with paragraph 24 of Schedule 1 for the purpose of obtaining prior approval under that paragraph;”;

   (d) the definition of “preventive treatment” is omitted;

   (e) for the definition of “salaried dentist” there is substituted the following definition:

   ““salaried dentist” means a dentist employed by a Health Board who undertakes to provide general dental services at a health centre;”;

   (f) the definition of “Special form” is omitted;

   (g) for the definition of “treatment” there is substituted the following definition:

   ““treatment” means all proper and necessary dental treatment which a dentist usually undertakes for a patient and which the patient is willing to undergo, including examination, diagnosis, preventive treatment, periodontal treatment, conservative treatment, surgical treatment, the supply and repair of dental appliances, orthodontic treatment and the taking of radiographs and the administration of anaesthesia and sedation in connection with such treatment and the supply of drugs and the issue of prescriptions in accordance with paragraphs 20 and 21 of Schedule 1;”;

   (h) the following definitions are inserted in the appropriate places in the alphabetical order:

   ““(i) “care and treatment” means—
   (a) all proper and necessary care which a dentist usually undertakes for a patient and which the patient is willing to undergo, including advice, planning of treatment, preventive care; and
   (b) treatment;”;

“(ii) “continuing care arrangement” means an arrangement between the dentist and the patient whereby the dentist provides care and treatment in accordance with paragraph 4 of Schedule 1;”;
“(iii) “dental surgery” means any part of the practice premises where care and treatment is provided;”;
“(iv) “an emergency” means the circumstances set out in paragraph 6(2) of Schedule 1 in which a patient requires prompt care and treatment;”;
“(v) “mobile surgery” means any vehicle in which care and treatment is provided;”;
“(vi) “NHS charge” means the charge, authorised under the National Health Service (Dental Charges) (Scotland) Regulations 1989(4), to the patient within the meaning of those Regulations;”;
“(vii) “occasional treatment” means such treatment as is mentioned in paragraph 16 of Schedule 1;”;
“(viii) “oral health” means such a standard of health of the teeth, their supporting structures and other tissues of the mouth, and of dental efficiency, as in the case of any patient is reasonable having regard to the need to safeguard his general health;”;
“(ix) “patient record” means the form supplied by the Health Board for the purpose of maintaining a record of treatment or a form to like effect;”;
“(x) “practice premises” means, in relation to any dentist, any premises at which he provides general dental services, or any mobile surgery of his;”;
“(xi) “prior approval treatment” means any item of treatment referred to in Part I of Schedule 1C or any care and treatment specified in paragraph 1 or 2 in Part II of that Schedule;”;
“(xii) “private”, in the context of care and treatment, means otherwise than under general dental services or Part III of the National Health Service (Scotland) Act 1978(5) and “privately” shall be construed accordingly;”;
“(xiii) “trauma” means damage to teeth, gingival tissues, or alveoli caused by a force arising outside the mouth resulting in mobility, luxation, subluxation or fracture of the hard tissues or injury to the soft tissues;”;
“(xiv) “treatment on referral” means any care and treatment provided by a dentist under paragraph 13 of Schedule 1;”.

(2) In regulation 2(4) of the principal Regulations (interpretation) there are inserted after the word “regulation” where it last appears the words “and any reference in a regulation to a numbered Schedule is a reference to the Schedule bearing that number in these Regulations”.

Amendment of regulation 3 of the principal Regulations

3. In regulation 3(1) of the principal Regulations (terms of service), for sub-paragraphs (a) and (b) there are substituted the following sub-paragraphs:—

“(a) in the case of a dentist undertaking to provide general dental services otherwise than as a salaried dentist, the terms of service contained in Parts I, II, III, IV and V of Schedule 1; and
(b) in the case of a dentist undertaking to provide general dental services as a salaried dentist, the terms of service contained in Parts I, II, III, IV, and VI of Schedule 1;”.

(4) S.I. 1989/363
(5) 1978 c. 29
Amendment of regulation 4 of the principal Regulations

4.—(1) Regulation 4 of the principal Regulations (dental list) is amended in accordance with the following paragraphs of this regulation.

(2) There are substituted for paragraph (1) the following paragraphs:—

“(1) The Health Board shall prepare a list, to be called the dental list, of dentists who, pursuant to the provisions of paragraph (2), have undertaken to provide general dental services in its area and who are not disentitled by virtue of the provisions of—

(a) sections 25(2A) or 30(1) of the National Health Service Act 1978(6);  
(b) section 8(2) of the Health and Medicines Act 1988(7).

(1A) The dental list shall, in addition to the name of a dentist,—

(a) contain—

(i) the addresses of all the practice premises and, where he provides general dental services at a mobile surgery only, the address at which correspondence in connection with such provision may be sent to him;
(ii) particulars of the days and hours when he is or will be usually in attendance at the practice premises for the provision of general dental services and, in the case of any mobile surgery, particulars of the places regularly visited by him and the times of those visits;
(iii) the name of any other dentist in association with whom he provides general dental services at the practice premises;
(iv) the date of his registration as a dental practitioner in the register kept under section 14 of the Dentists Act 1984(8), particulars of the dental qualification held by the dentist which entitled him to be so registered, including the date on which the qualification was awarded, and particulars of any other dental qualification held by him which is registerable pursuant to section 19(1)(c) of the Dentists Act 1984; and

(b) indicate—

(i) whether the dentist provides only orthodontic treatment; and
(ii) whether there is access to the dental surgery without the use of stairs.

(1B) The dental list may, provided that the dentist consents to its inclusion, also give particulars of any languages, other than English, spoken by the dentist.

(1C) The dental list may, if the Health Board thinks fit, be so arranged as to show the part of its area in which each dentist has undertaken to provide general dental services.”.

(3) There are substituted for paragraph (2) the following paragraphs:—

“(2) A dentist who wishes to have his name included in the dental list shall make an application to the Health Board in writing which—

(a) shall include the information and undertaking specified in Part I of Schedule 1A; and

(b) may include the information specified in Part II of that Schedule.

(2A) A dentist whose name is included in the dental list of any Health Board, who is requested in writing by the Health Board to supply any information mentioned in

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(6) 1978 c. 29; section 25(2A) was inserted by S.I. 1981/432, article 4(3).
(7) 1988 c. 49
(8) 1984 c. 24
paragraph (2B), shall supply that information to the Health Board within 28 days of the date of the Health Board’s request.

(2B) The information referred to in paragraph (2A) is—

(a) if the dentist provides general dental services at a mobile surgery, particulars of the places regularly visited by him and the times of those visits;

(b) if he provides general dental services at a mobile surgery only, the address at which correspondence in connection with such provision may be sent to him;

(c) the name of any other dentist in association with whom the dentist provides general dental services at the practice premises;

(d) the date of the dentist’s registration as a dental practitioner in the register kept under section 14 of the Dentists Act 1984, particulars of the dental qualification held by the dentist which entitled him to be so registered, including the date on which the qualification was awarded, and particulars of any other dental qualification held by him which is registerable pursuant to section 19(1)(c) of the Dentists Act 1984;

(e) whether he provides only orthodontic treatment;

(f) whether there is access to the dental surgery without the use of stairs; and

(g) where the dentist consents to the inclusion of such information in the dental list, particulars of any languages, other than English, spoken by him.”.

(4) There are inserted after paragraph (4) the following paragraphs:—

“(5) The Health Board may prepare, and thereafter maintain, in addition to a dental list, any other list which may contain, in respect of each dentist whose name is included in its dental list—

(a) any information included in the dental list in respect of the dentist; and

(b) any other information related to the provision of general dental services which the Health Board has agreed with the area dental committee to be appropriate.

(6) Where the Health Board has agreed with the area dental committee that certain information is appropriate for inclusion in the list referred to in paragraph (5), it may request in writing any dentist whose name is included in its dental list to furnish the Health Board with such information as it relates to him, and the dentist shall furnish that information to the Health Board within 28 days of the date of the Health Board’s request.”.

Substitution of regulation 8 of the principal Regulations

5. For regulation 8 of the principal Regulations (arrangements to complete treatment) there is substituted the following regulation:—

“Arrangements to complete care and treatment

8.—(1) Subject to sub-paragraph (2), where a dentist who is providing care and treatment for patients under continuing care arrangements or capitation arrangements ceases to have his name included in the dental list, the Health Board may, after consultation with the area dental committee and with the agreement of the patients concerned, make arrangements with one or more dentists (whose names are included in the dental list) for the continuing care arrangements or capitation arrangements to be transferred to that or those dentists.

(2) Where a dentist has died and his name remains on the dental list in accordance with the proviso to regulation 6(1), the Health Board shall, subject to the agreement of the patients concerned, make arrangements with the dentist appointed by the personal representatives of
the deceased dentist for the care and treatment under any continuing care arrangements or capitation arrangements entered into by the deceased dentist to be provided by that dentist.”.

**Amendment of regulation 9 of the principal Regulations**

6. In regulation 9(1) of the principal Regulations (constitution) the words

**Substitution of regulation 12 of the principal Regulations**

7. For regulation 12 of the principal Regulations (functions), there is substituted the following regulation:

“Functions

12.—(1) The Common Services Agency shall provide the services of office accommodation and other facilities to enable the Board to carry out its functions.

(2) The Board shall, for the purpose of carrying out the duties imposed on it by these Regulations, consider all claims for remuneration submitted for approval for payment and all estimates and may give or withhold approval as it thinks fit; and for the purpose of determining whether or not to give approval may require a patient to submit himself for examination by a dental officer and may require the dentist to produce such records including radiographs and further particulars as it thinks fit.”.

**Insertion of regulation 12A into the principal Regulations**

8. After regulation 12 of the principal Regulations (functions) there is inserted the following regulation:

“Prior approval—patterns of treatment

12A.—(1) Where it appears to the Board that a dentist’s pattern of treatment in respect of all or any specified description of treatment, provided as part of general dental services in the area of any Health Board, differs so substantially from the local or national pattern of treatment of other dentists as to warrant, in the opinion of the Board, further investigation, the Board may write to the dentist—

(a) giving details of his pattern of treatment in respect of all or any particular description of treatment and stating the extent to which it differs from the local or national pattern of treatment of other dentists;

(b) inviting him to submit to the Board in writing the reasons why his pattern of treatment differs to the extent identified by the Board under sub-paragraph (a) of this paragraph, from that local or national pattern; and

(c) giving notice to him that if—

(i) he fails to reply within 28 days; or

(ii) his reply discloses no reasonable grounds, in the opinion of the Board, for his pattern of treatment to differ, to the extent identified by the Board under sub-paragraph (a) of this paragraph, from that local or national pattern of treatment,

the Board may give a direction as mentioned in paragraph (2).

(2) Where the dentist fails—

(a) to reply within 28 days; or
(b) to disclose the reasonable grounds as mentioned in paragraph (1)(c)(ii),

the Board may direct the dentist that he may not, for a period of not less than 3 months
nor more than 9 months specified in the direction, carry out treatment, or a description of


treatment specified in the direction, without first obtaining approval of an estimate from the

Board, but nothing in any such direction shall prevent the dentist, without such approval,
from giving treatment following trauma or in an emergency, any private treatment or, in the
course of any single consultation, treatment of a patient consisting of one examination and
the taking of no more than two radiographs, each of a size not exceeding 16 centimetres
square.

(3) Where the Board gives a direction under paragraph (2), the direction shall inform
the dentist of his right of appeal under regulation 19 of the National Health Service (Service
Committees and Tribunal) (Scotland) Regulations 1974(9) and shall have no effect until the
expiry of the period allowed by that regulation for the bringing of an appeal and, if such an
appeal is brought, until the determination of the appeal.

(4) The Board shall not give a direction to a dentist under paragraph (2) in consequence
of having written to him under paragraph (1) more than 12 months previously.

(5) Where the Board gives a direction to a dentist under paragraph (2) and—

(a) the dentist does not appeal;

(b) he does appeal and his appeal is unsuccessful; or

(c) he appeals successfully,

the Board shall not give a further direction under paragraph (2) in relation to that dentist in
respect of any treatment specified in the earlier direction for a period of 9 months beginning
with the expiry of the period specified in the earlier direction or, as the case may be, the
date on which the appeal is allowed.

(6) Paragraphs (1) and (2) shall not apply to any treatment for which a dentist is
remunerated in accordance with Section X (treatment under capitation) of Determination I
of the Statement of Dental Remuneration dated 28th August 1990 and for which he receives
no remuneration other than a capitation payment.

(7) In this regulation—

(a) “pattern of treatment” means—

(i) the number of instances in which an item or items of treatment are provided
by or on behalf of a dentist; or

(ii) the ratio which the number of instances relating to one such item bears to
the number of instances relating to another such item;

(b) “local”, in relation to pattern of treatment, means throughout the area of a Health
Board; and

(c) “national”, in relation to pattern of treatment, means throughout Scotland.”.

Amendment of regulation 15 of the principal Regulations

9. In regulation 15 of the principal Regulations (standing orders) there is inserted in paragraph (b),
after the word “estimate” in both places where it occurs, the words “, claim for remuneration”.

(9) S.I. 1974/504; the relevant amending instrument is S.I. 1988/878
Substitution of regulation 19 of the principal Regulations

10. For regulation 19 of the principal Regulations (application for services) there is substituted the following regulation:—

“Application for services

19.—(1) A person aged 18 or over may apply to any dentist whose name appears in any dental list for general dental services by way of—

(a) care and treatment under a continuing care arrangement; or

(b) occasional treatment.

(2) Subject to paragraph (3), a person under the age of 18 may apply to any dentist whose name appears in any dental list for general dental services by way of—

(a) care and treatment under a capitation arrangement; or

(b) occasional treatment.

(3) A dentist may not enter into a capitation arrangement with a person during the month before he attains the age of 18.

(4) A person under the age of 18 may apply to a dentist for general dental services by way of care and treatment under a continuing care arrangement at any time during the month before he attains the age of 18 provided that he is not immediately before that date receiving care and treatment under a capitation arrangement with that dentist.

(5) A person who is receiving care and treatment under a capitation arrangement with a dentist may at any time after he attains the age of 17 apply for general dental services by way of care and treatment under a continuing care arrangement with that dentist from the date that he attains the age of 18.

(6) Application under this regulation shall be made in person at the practice premises unless a person is unable to attend those premises owing to illness or any other reasonable cause.”.

Amendment of regulation 20 of the principal Regulations

11. In regulation 20 of the principal Regulations (exercise of choice of dentists in certain cases) the words from “or a signature” to “purpose of regulation 23” are omitted.

Amendment of regulation 26 of the principal Regulations

12. In regulation 26(1) of the principal Regulations (statement of dental remuneration) for all the words after the words “the Statement of Dental Remuneration”, there is substituted the following:—

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<td>I</td>
<td>A Scale of Fees which shall prescribe the remuneration to be paid to a dentist, other than a salaried dentist, for care and treatment under a continuing care arrangement or a capitation arrangement, treatment on referral and occasional treatment and the conditions of payment of remuneration;</td>
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<tr>
<td>II</td>
<td>Rates of remuneration for a salaried dentist;</td>
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<table>
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<td>Postgraduate education allowances.</td>
</tr>
</tbody>
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Amendment of regulation 27 of the principal Regulations

13. In regulation 27 of the principal Regulations (approval of payments) there are substituted for paragraph (1) the following paragraphs:—

“(1) The Board shall, where it receives notification that—

(a) a patient has been accepted by a dentist, other than a salaried dentist, under a continuing care arrangement or a capitation arrangement or for treatment on referral, authorise the payments which, in accordance with the Scale of Fees, fall to be made by the Health Board to the dentist in respect of such an arrangement or referral; or

(b) a continuing care arrangement or a capitation arrangement has terminated or treatment on referral has been completed, authorise the Health Board to cease such payments to the dentist.

(1A) The Board shall, where it approves a claim for remuneration made by a dentist, other than a salaried dentist, in respect of—

(a) care and treatment under a continuing care arrangement or a capitation arrangement;

(b) treatment on referral; or

(c) occasional treatment,

completed by the dentist, authorise in accordance with the Scale of Fees, the remuneration to be paid by the Health Board to the dentist in respect of such care and treatment, treatment on referral, or occasional treatment.

(1B) In any case falling within paragraph 14(1) or 16(4) of Schedule 1 (inability of dentist to complete treatment), the Board shall authorise in accordance with the Scale of Fees, and without prejudice to the provisions of the National Health Service (Dental Charges) (Scotland) Regulations 1989(10), the remuneration to be paid by the Health Board to a dentist, other than a salaried dentist, in respect of the care and treatment or occasional treatment provided by him.

(1C) A Health Board shall pay to a dentist, other than a salaried dentist, the remuneration—

(a) authorised by the Board under paragraphs (1)(a), (1A) and (1B); and

(b) in accordance with Determinations III, IV, V, VI and VII of the Statement of Dental Remuneration.

(1D) A Health Board shall pay to a salaried dentist remuneration in accordance with Determination II of the Statement of Dental Remuneration dated 28th August 1990.”.

(10) S.I. 1989/363
Amendment of regulation 28 of the principal Regulations

14. In regulation 28 of the principal Regulations (drugs) there are substituted for the words “in pursuance of Schedule 1 Part 1 paragraph 11(1)” the words “under paragraph 20(1) of Schedule 1”.

Amendment of regulation 29A of the principal Regulations

15. In regulation 29A of the principal Regulations (emergency dental treatment) for the words “emergency treatment” there are substituted the words “treatment in an emergency”.

Substitution of Schedule 1 to the principal Regulations

16. For Schedule 1 to the principal Regulations there are substituted the Schedules set out in Schedule 1 to these Regulations.

Amendment of the National Health Service (Dental Charges) (Scotland) Regulations 1989

17.—(1) The National Health Service (Dental Charges) (Scotland) Regulations 1989(12) shall be amended in accordance with the following paragraphs of this regulation.

(2) In regulation 1(2) (citation, commencement and interpretation)—

(a) the definition of “dental estimate form” is omitted; and

(b) the following definitions are inserted in the appropriate places in the alphabetical order:—

“(i) “capitation arrangement” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”;

“(ii) “continuing care arrangement” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”;

“(iii) “emergency” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”;

“(iv) “estimate” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”;

“(v) “treatment” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”;

“(vi) “treatment on referral” has the same meaning as in the National Health Service (General Dental Services) (Scotland) Regulations 1974;”.

(3) In regulation 3 (charges for other general dental services)—

(a) in paragraph (2)(c) and (d) there are substituted for the words “emergency treatment” wherever they occur the words “treatment in an emergency”;

(b) in paragraph (2) the word “or” where it appears at the end of sub-paragraph (c) is omitted and there is substituted for the full-stop at the end of sub-paragraph (d) the word “; or”;

(c) in paragraph (2) after sub-paragraph (d) there is inserted the following paragraph:—

“(e) treatment provided pursuant to paragraph 7 or 13(2) (repair or replacement of restorations) of Schedule 1 (terms of service) to the National Health Service (General Dental Services) (Scotland) Regulations 1974.”.

(4) In regulation 4 (calculation of charges) in paragraph (2)(b) there are inserted after the word “arrangement” where it last occurs the words “, but where a patient has been accepted by the dental practitioner under a continuing care arrangement or a capitation arrangement or for treatment on

(11) Inserted by S.I. 1981/900
(12) S.I. 1989/363
referral, does not include the payments which, in accordance with that Statement, fall to be made to
the dentist in respect of such an arrangement or referral”.

(5) In regulation 5 (conditions for exemption under the Act) in paragraph (2)(a) there are
substituted for the words “dental estimate form” the words “claim for remuneration or estimate”.

(6) In regulation 6 (making and recovery of charges) in paragraph 2(b) there are substituted for the
words “dental estimate form, and before that form” the words “claim for remuneration or estimate,
and before that claim or estimate”.

(7) In regulation 8 (charges for more expensive supplies and repairs) paragraphs (2), (3) and (4)
are omitted.

(8) In regulation 11 (reduction of remuneration and accounting for charges—general dental
services) in paragraphs (2) and (3) for “VI” there is substituted “II”.

(9) In regulation 12 (revocations, amendment, savings and application of Regulations)
paragraph (2) is omitted.

(10) Schedule 3 (charges for more expensive supplies and repairs -general dental services) is
omitted.

Amendment of the National Health Service (Service Committees and Tribunal) (Scotland)
Regulations 1974

18.—(1) The National Health Service (Service Committees and Tribunal) (Scotland) Regulations
1974(13) are amended in accordance with the following paragraphs of this regulation.

(2) In regulation 2(1) (interpretation)—

(a) the definition of “estimate” is omitted;

(b) in the definition of “the terms of service” the words “Parts I, II and III of” are omitted;

(c) in the definition of “treatment” for the words “has the same meaning as in the General
Dental Regulations” there are substituted the following words:—

“means—

(a) except in the context mentioned in sub-paragraph (b) of this definition—

(i) where at the material time the dentist is providing occasional treatment
under the General Dental Regulations, treatment within the meaning
of those Regulations;

(ii) in any other case, care and treatment within the meaning of those
Regulations;

(b) in the context of the description of treatment specified under regulation 9(1)
e, treatment within the meaning of the General Dental Regulations other
than—

(i) one examination in the course of any single consultation;

(ii) treatment in an emergency within the meaning of those Regulations;

(iii) two radiographs, each of a size not exceeding 16 centimetres square,
in the course of any single consultation; and

(iv) treatment for which a dentist is remunerated in accordance with
Section X (treatment under capitation) of Determination I of the
Statement of Dental Remuneration dated 28th August 1990 and for
which he receives no remuneration other than a capitation payment;”.

(13) S.I. 1974/504, amended by S.I. 1974/1031 and 1988/878
(3) In regulation 9 (action by the Board), in paragraph (1)(e) for the words from “, in respect of any” to the end of the sub-paragraph there are substituted the words “to submit to the Scottish Dental Practice Board for prior approval estimates in respect of any description of treatment specified by the Board.”.

(4) In regulation 13 (procedure on withholding money), in paragraph (4) for the words from “failure to complete” to “skill” there are substituted the words “failure to employ a proper degree of skill and attention”.

(5) In regulation 19 (appeal from Scottish Dental Practice Board)—

(a) after paragraph (1) there is inserted the following paragraph:—

“(1A) Any dental practitioner who is aggrieved by a decision of the Board under regulation 12A of the General Dental Regulations (prior approval—patterns of treatment) may, in accordance with paragraphs (2) and (3), appeal against the decision—

(a) where the name of the dental practitioner is included in the dental list of only one Health Board, to that Health Board;

(b) where the name of the dentist is included in the dental list of more than one Health Board, to any such Health Board.”;

(b) in paragraph (5)—

(i) in sub-paragraph (b) for the words from “on the ground” to “the estimate” there are substituted the words “or a claim for remuneration on the ground that the services to which the estimate or claim”;

(ii) in sub-paragraph (d) for the words from “appoint” to “the appeal” there are substituted the following words:—

“appoint—

(i) where the appeal is made under paragraph (1A), three dentists;

(ii) in any other case, two dentists, as referees to determine the appeal”.

(6) Regulation 20 (investigation of excessive dental treatment) is hereby revoked.

Transitional provisions

19.—(1) Where—

(a) a dentist has begun treatment of a patient before 1st October 1990 with a view to securing dental fitness in accordance with paragraph 2(1)(b) of Schedule 1 to the principal Regulations as in force before that date; and

(b) that treatment is not completed by 1st October 1990,

the principal Regulations shall continue to have effect as respects completion of that treatment as if these Regulations had not been made, unless and until that dentist accepts the patient for care and treatment under a continuing care arrangement or a capitation arrangement under the principal Regulations as amended by these Regulations.

(2) A dentist shall not accept for care and treatment under a continuing care arrangement or a capitation arrangement a patient who is receiving treatment pursuant to paragraph (1), other than orthodontic treatment, and remains willing to undergo that treatment (whether or not pursuant to that paragraph).

(3) A patient who, before 1st October 1990, is receiving care and treatment from a dentist under a capitation arrangement under Part IV of Schedule 1 to the principal Regulations as in force before that date shall be treated as having applied to, and been accepted on that date by, that dentist for care
and treatment under a capitation arrangement under the principal Regulations as amended by these Regulations; and in relation to such a patient paragraph 5 of Schedule 1 to the principal Regulations shall have effect as if the references in paragraph 5(1)(a) to the time at which the dentist accepts the patient were to the time of his consultation with the patient after 1st October 1990 and in paragraph 5(1)(b) and (c) to the time of the dentist’s first examination of the patient were to the time of the first such examination taking place on or after 1st October 1990.

(4) The amendments made by these Regulations to the National Health Service (Dental Charges) (Scotland) Regulations 1989(14) shall apply in relation to general dental services only where the contract or arrangement leading to the provision of the services is made on or after 1st October 1990.

(5) Where on or after 1st October 1990 a matter falls to be investigated, referred or determined (whether by a service committee, a Health Board, the Secretary of State or otherwise) under Part II of the National Health Service (Service Committees and Tribunal) (Scotland) Regulations 1974(15) following a complaint which relates to treatment, as part of general dental services, begun before 1st October 1990, those Regulations shall apply to the investigation, referral or determination of that matter as if these Regulations had not been made.

Revocations

20. The Regulations specified in column (1) of Schedule 2 to these Regulations are revoked to the extent specified in column (3) of that Schedule.

St Andrew’s House,  
Edinburgh  
28th August 1990  

Sanderson of Bowden  
Minister of State, Scottish Office

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(14) S.I. 1989/363  
(15) S.I. 1974/504, amended by S.I. 1974/1031 and 1988/878
SCHEDULE 1

TERMS OF SERVICE FOR DENTISTS

PART I

GENERAL

Interpretation

1. In these terms of service, unless the context otherwise requires—
   (a) “the Regulations” means the National Health Service (General Dental Services) (Scotland) Regulations 1974 (16);
   (b) any reference to a numbered regulation is a reference to the regulation bearing that number in the Regulations;
   (c) any reference to a numbered paragraph is a reference to the paragraph bearing that number in these terms of service, and any reference in a paragraph to a numbered sub-paragraph is a reference to the sub-paragraph bearing that number in that paragraph;
   (d) any reference to a numbered Schedule is a reference to the Schedule to the Regulations bearing that number, and any reference in a Schedule to a numbered paragraph is a reference to the paragraph bearing that number in that Schedule.

Incorporation of provisions of Regulations

2. Any provisions of the following affecting the rights and obligations of dentists shall be deemed to form part of the terms of service:—
   (a) the Regulations;
   (b) so much of Part II of the National Health Service (Service Committees and Tribunal) (Scotland) Regulations 1974 (17) as relates to—
      (i) the investigation of questions arising between dentists and their patients, and other investigations to be made by the dental service committee, the joint services committee and the action which may be taken by the Health Board as a result of such investigations;
      (ii) any decision of the Secretary of State (whether on appeal or otherwise) in connection with any investigation referred to in head (i) of this sub-paragraph or with any decision of the Board; and
      (iii) the investigation of record keeping; and
   (c) regulations 4(4) and 6(2) of the National Health Service (Dental Charges) (Scotland) Regulations 1989 (18).

(17) S.I. 1974/504, amended by S.I. 1974/1031 and 1988/878
(18) S.I. 1989/363
General dental services

3. In providing general dental services for any person under the Regulations, a dentist shall provide—

(a) for a person aged 18 or over with whom he has entered into a continuing care arrangement, care and treatment under that arrangement; or

(b) for a person under the age of 18 with whom he has entered into a capitation arrangement, care and treatment under that arrangement; or

(c) for a person who is receiving care and treatment under a continuing care arrangement or a capitation arrangement with another dentist, treatment on referral; or

(d) for any person—

(i) who is receiving care and treatment with another dentist under an arrangement mentioned in sub-paragraph (a) or (b); or

(ii) who does not wish to enter into an arrangement mentioned in sub-paragraph (a) or (b); or

(iii) with whom the dentist is not prepared to enter into an arrangement mentioned in sub-paragraph (a) or (b), occasional treatment.

PART II

CONTINUING CARE ARRANGEMENT, CAPITATION ARRANGEMENT AND TREATMENT ON REFERRAL

A continuing care arrangement

4.—(1) A dentist who accepts a person for care and treatment under a continuing care arrangement shall—

(a) at the time at which he accepts the patient, provide him with the information about care and treatment under general dental services which is set out in Schedule 1B and with a form of acceptance supplied by the Health Board, or a form to like effect, which shall specify—

(i) the name of the patient;
(ii) the name of the dentist;
(iii) particulars of the places where the patient will receive care and treatment; and
(iv) the telephone number at which the dentist or a deputy may be contacted during normal surgery hours, or at other times in an emergency if different;

(b) at the time of the first examination of the patient, provide the patient with a plan for treatment on a form supplied by the Health Board, or a form to like effect, which shall specify—

(i) details of the care and treatment (if any) which in the opinion of the dentist, at the date of that examination, is necessary to secure and maintain the oral health of the patient;
(ii) the approximate period following which a further examination is recommended by the dentist;
(iii) his estimate of the NHS charge, if any, in respect of that care and treatment; and
(iv) any proposals he may have for private care and treatment as an alternative to the care and treatment proposed under general dental services, including particulars of the cost to the patient;

(c) where, in the opinion of the dentist, the care and treatment included in the plan for treatment provided under head (b) of this sub-paragraph needs to be varied, or a new plan for treatment is needed, provide the patient with a revised or, as the case may be, a new plan for treatment in accordance (except as to the time of its provision) with head (b) of this sub-paragraph.

(d) complete the care and treatment (if any) which is referred to in head (b)(i) of this sub-paragraph;

(e) provide the patient with emergency cover in accordance with paragraph 6; and

(f) repair or replace a restoration in accordance with paragraph 7.

(2) Where a dentist accepts the transfer of a continuing care arrangement in accordance with regulation 8, he shall provide the patient with the information specified in sub-paragraph (1)(a)(ii) to (iv) and assume the obligations set out in sub-paragraph (1)(c) to (f).

(3) Where the dentist is informed that the dentist to whom a patient has been referred under paragraph 12 has died and is aware that the particular care and treatment for which the patient was referred has not been completed, he shall inform the patient and refer him to another dentist in accordance with paragraph 12 for completion of that care and treatment.

(4) Where a dentist accepts a person who is in prison for care and treatment under a continuing care arrangement, he shall at the time at which he accepts the patient examine him.

A capitation arrangement

5.—(1) A dentist who accepts a person for care and treatment under a capitation arrangement shall—

(a) at the time at which he accepts the patient, examine him and chart the patient’s decayed, missing or filled teeth on the form supplied by the Health Board, or a form to like effect;

(b) at the time of his first examination of the patient, provide the patient with the information about care and treatment under general dental services which is set out in Schedule 1B and with a form of acceptance supplied by the Health Board, or a form to like effect which shall specify—

(i) the name of the patient;

(ii) the name of the dentist;

(iii) particulars of the places where the patient will receive care and treatment; and

(iv) the telephone number at which the dentist or a deputy may be contacted during normal surgery hours, or at other times in an emergency if different;

(c) at the time of his first examination of the patient, provide the patient with a plan for treatment on a form supplied by the Health Board, or a form to like effect, which shall specify—

(i) details of the care and treatment (if any) which in the opinion of the dentist, at the date of that examination, is necessary to secure and maintain the oral health of the patient;

(ii) the approximate period following which a further examination is recommended by the dentist; and
(iii) any proposals he may have for private care and treatment as an alternative to the
care and treatment proposed under general dental services, including particulars of
the cost to the patient;

(d) where, in the opinion of the dentist, the care and treatment included in the plan for
treatment provided under head (c) of this sub-paragraph needs to be varied, or a new plan
for treatment is needed, provide the patient with a revised or, as the case may be, a new
plan for treatment in accordance (except as to the time of its provision) with head (c) of
this sub-paragraph;

(e) complete the care and treatment (if any) which is referred to in head (c)(i) of this sub-
paragraph; and

(f) provide the patient with emergency cover in accordance with paragraph 6.

(2) Where a dentist accepts the transfer of a capitation arrangement in accordance with
regulation 8, he shall provide the patient with the information specified in sub-paragraph (1)(b)(ii)
to (iv) and assume the obligations set out in sub-paragraph (1)(d) to (f).

(3) Where the dentist is informed that the dentist to whom a patient has been referred under
paragraph 12 has died and is aware that the particular care and treatment for which the patient was
referred has not been completed, he shall inform the patient and refer him to another dentist in
accordance with paragraph 12 for completion of that care and treatment.

Emergency cover

6.—(1) In providing emergency cover under a continuing care arrangement or a capitation arrange-
ment, a dentist shall make reasonable arrangements to secure that a patient requiring prompt care
and treatment will receive such care and treatment as soon as appropriate either from himself or
from another dentist.

(2) For the purposes of sub-paragraph (1) a patient requires prompt care and treatment where,
in the opinion of a dentist—

(a) the patient’s oral health is likely to deteriorate significantly without such care and
treatment; or

(b) the patient is in severe pain by reason of his oral condition,
but the provision of emergency cover does not include any obligation to repair or replace dentures.

(3) The obligation to provide emergency cover begins on the date on which the patient and the
dentist enter into the continuing care arrangement or the capitation arrangement and ceases when
that arrangement lapses or is terminated.

Repair or replacement of restorations

7.—(1) Subject to sub-paragraph (3), in repairing or replacing a restoration in the course of
a continuing care arrangement, a dentist shall repair or replace at no charge to the patient any
restoration specified in sub-paragraph (2) which he or another dentist, acting on his behalf or from
whom the continuing care arrangement was transferred under regulation 8, has provided under
general dental services—

(a) under that continuing care arrangement; or

(b) under a capitation arrangement with or transferred to the dentist, where on termination of
that arrangement the patient has immediately entered into the continuing care arrangement.

(2) The restorations referred to in sub-paragraph (1) are any filling, root filling, inlay, pinlay or
crown which, within 12 months of the date on which it was provided, has to be repaired or replaced
to secure oral health.
(3) A dentist shall not be under an obligation to repair or replace any restoration under sub-paragraph
(1) where—
(a) within 12 months of the date on which the restoration was provided —
   (i) a dentist has provided private treatment; or
   (ii) another dentist has provided occasional treatment otherwise than of a temporary
       nature, on the tooth in respect of which the restoration was provided;
(b) the dentist advised the patient at the time of the restoration and indicated on the plan for
    treatment provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or
    (d) and on the patient record that the restoration was intended to be temporary in nature;
(c) the dentist advised the patient at the time of the restoration and indicated on the plan for
    treatment provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or
    (d) and on the patient record that, in his opinion, a different form of restoration was more
    appropriate to secure oral health but, notwithstanding that advice, the patient insisted on
    the restoration which was provided;
(d) in the opinion of the dentist, the condition of the tooth in respect of which the restoration
    was provided is such that the restoration cannot satisfactorily be repaired or replaced and
    different treatment is now required; or
(e) the repair or replacement is required as a result of trauma.
(4) The obligation to repair or replace any restoration under sub-paragraph (1) begins on the date
on which the patient and the dentist enter into the continuing care arrangement and ceases when that
arrangement lapses or is terminated.

Duration and extension of a continuing care arrangement

8.—(1) Unless extended under sub-paragraph (3), a continuing care arrangement shall lapse after
a period of 2 years beginning on—
(a) the date on which the patient is first accepted by the dentist under the continuing care
    arrangement; or
(b) where the arrangement is extended in accordance with sub-paragraph (3), the date on
    which it is so extended, or is last so extended.
(2) A continuing care arrangement—
(a) may be terminated by the dentist or the Health Board in accordance with paragraph 11;
(b) shall terminate where—
   (i) the patient enters into a continuing care arrangement with another dentist; or
   (ii) the patient enters into an arrangement with the dentist or another dentist whereby
       the whole of the care and treatment which would otherwise be provided under the
       continuing care arrangement is to be provided privately.
(3) A continuing care arrangement may be extended, with the agreement of the patient and the
dentist, at any time when the dentist is providing care and treatment during the currency of the
continuing care arrangement.
(4) Where a continuing care arrangement is extended, the dentist shall assume the obligations
set out in paragraph 4(1)(c) to (f).
Duration and extension of a capitation arrangement

9.—(1) Unless extended under sub-paragraph (3), a capitation arrangement shall lapse at the end of 31st December in the year following that in which—

(a) the patient is first accepted by the dentist under the capitation arrangement; or  
(b) the arrangement is extended in accordance with sub-paragraph (3), or is last so extended.

(2) A capitation arrangement—

(a) may be terminated by the dentist or the Health Board in accordance with paragraph 11;  
(b) shall terminate where—  
   (i) the patient enters into a capitation arrangement with another dentist; or  
   (ii) the patient enters into an arrangement with the dentist or another dentist whereby the whole of the care and treatment which would otherwise be provided under the capitation arrangement is to be provided privately; or  
   (iii) the patient attains the age of 18.

(3) A capitation arrangement may be extended, with the agreement of the patient and the dentist, at any time during the currency of the capitation arrangement before the patient attains the age of 18, but the arrangement may not be extended more than once in the same calendar year.

(4) Where a capitation arrangement is extended, the dentist—

(a) shall at the time examine the patient and assume the obligations set out in paragraph 5(1) (d) to (f); and  
(b) shall—  
   (i) provide details of the care and treatment provided to the patient under the capitation arrangement; and  
   (ii) chart the patient’s decayed, missing or filled teeth,  
on a form supplied by the Health Board, or a form to like effect, and send it to the Board.

Lapse of continuing care or capitation arrangement

10. Where a dentist does not agree to the extension of a continuing care arrangement or a capitation arrangement (under paragraph 8 or 9), he shall—

(a) give notice in writing to the patient not later than 3 months, or such shorter period as may be reasonable in the circumstances, before the date on which the arrangement is due to lapse; and  
(b) use his best endeavours to complete satisfactorily before that date any care and treatment outstanding under the plan for treatment last provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or (d) and any further treatment that may be necessary to secure and maintain his oral health.

Termination of a continuing care or a capitation arrangement

11.—(1) Subject to sub-paragraph (4), a dentist who wishes to terminate a continuing care arrangement or a capitation arrangement shall give to the patient 3 months' notice in writing of the termination of the arrangement.

(2) Where a dentist gives notice under sub-paragraph (1), he shall use his best endeavours to complete satisfactorily before the termination of the arrangement any care and treatment outstanding under the plan for treatment last provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or (d) and any further treatment that may be necessary to secure and maintain his oral health.
(3) Where a dentist gives notice under sub-paragraph (1), he shall notify the Health Board accordingly and give details to the Health Board of any care and treatment outstanding under the plan for treatment last provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or (d) including any arrangements made for completion of that care and treatment.

(4) Where a dentist wishes a continuing care arrangement or a capitation arrangement to be terminated on less than 3 months’ notice, he shall apply in writing to the Health Board—

(a) asking that it terminate the arrangement;

(b) setting out the reasons why he wishes the arrangement to be terminated; and

(c) giving details of any care and treatment outstanding under the plan for treatment last provided to the patient in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or (d) including any arrangements made for completion of that care and treatment.

(5) Where a dentist applies to the Health Board under sub-paragraph (4), the Health Board may, after considering any representations made by the patient, terminate the arrangement on such date and on such terms as to completion of any outstanding care and treatment mentioned in sub-paragraph (4)(c) as it thinks fit, save that, where an arrangement is terminated because the patient has refused to pay the NHS charge, the dentist shall not be obliged to complete that care and treatment.

(6) A Health Board which terminates an arrangement under sub-paragraph (5) shall so inform the patient, the dentist and the Board in writing.

**Referral to another dentist or to a hospital or other service**

12.—(1) Where a patient requires particular care and treatment under a continuing care arrangement or a capitation arrangement and the dentist with whom the patient has made the arrangement does not have the necessary facilities, experience or expertise to provide that care and treatment, he shall, if the patient agrees, refer him in accordance with sub-paragraph (2) for the provision of that care and treatment by another dentist under general dental services or by a hospital or other service provided under Part III of the National Health Service (Scotland) Act 1978(19).

(2) In referring a patient under sub-paragraph (1) to another dentist or to a hospital or other service for that care and treatment, the dentist shall—

(a) give details of—

(i) the oral condition of the patient and the reason for the referral; and

(ii) if relevant to the referral, details of the care and treatment he has provided or intends to provide in order to secure and maintain the patient’s oral health, to that other dentist or, as the case may be, that hospital or other service, either at the time of referral or as soon as practicable afterwards;

(b) include with those details a statement of the amount paid to him by the patient under the National Health Service (Dental Charges) (Scotland) Regulations 1989(20) in respect of any care and treatment already provided in the course of the care and treatment during which the referral is made; and

(c) indicate in his claim for remuneration in respect of that course of care and treatment that the patient has been referred for the required care and treatment.

**Treatment on referral**

13.—(1) Subject to sub-paragraph (5), a dentist who accepts a patient referred to him under paragraph 12(1) for particular care and treatment shall—

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(19) 1978 c. 29
(20) S.I. 1989/363
(a) at the time at which he accepts the patient, provide him with a form of acceptance supplied by the Health Board, or a form to like effect, which shall specify—

(i) the name of the patient;
(ii) the name of the dentist;
(iii) particulars of the places where the patient will receive care and treatment; and
(iv) the telephone number at which the dentist or a deputy may be contacted during normal surgery hours, or at other times in an emergency if different;

(b) at the time of his first examination of the patient, provide the patient with a plan for treatment on a form supplied by the Health Board, or a form to like effect, which shall specify—

(i) details of the care and treatment which, in the opinion of the dentist, at the date of that examination, is necessary for him to provide having regard to the reason for the referral;
(ii) his estimate of the NHS charge, if any, in respect of that care and treatment;
(iii) any proposals he may have for private care and treatment as an alternative to the care and treatment proposed under general dental services, including particulars of the cost to the patient;

(c) where, in the opinion of the dentist, the care and treatment included in the plan for treatment provided under head (b) of this sub-paragraph needs to be varied, provide the patient with a revised plan for treatment in accordance (except as to the time of its provision) with head (b) of this sub-paragraph;

(d) complete the care and treatment, which is referred to in head (b)(i) of this sub-paragraph;

(e) until such time as the treatment on referral has been completed, provide the patient with emergency cover in accordance with paragraph 6(1) and (2), but only to the extent that the patient requires prompt care and treatment in relation to the particular care and treatment for which he has been referred; and

(f) repair or replace a restoration in accordance with sub-paragraph (2).

(2) Subject to sub-paragraphs (3) and (4), in repairing or replacing a restoration in the course of treatment on referral, a dentist shall repair or replace at no charge to the patient any of the following restorations, namely, filling, root filling, inlay, pinlay or crown which has to be repaired or replaced and which was provided by him in the course of the treatment on referral.

(3) A dentist shall not be under an obligation to repair or replace any restoration under sub-paragraph (2) where—

(a) within 12 months of the date on which the restoration was provided —

(i) a dentist has provided private treatment; or
(ii) another dentist has provided occasional treatment otherwise than of a temporary nature, on the tooth in respect of which the restoration was provided;

(b) the dentist advised the patient at the time of the restoration and indicated on the plan for treatment provided to the patient in accordance with sub-paragraph (1)(b) or (c) and on the patient record that the restoration was intended to be temporary in nature;

(c) the dentist advised the patient at the time of the restoration and indicated on the plan for treatment provided to the patient in accordance with sub-paragraph 1(b) or (c) and on the patient record that, in his opinion, a different form of restoration was more appropriate but, notwithstanding that advice, the patient insisted on the restoration which was provided;
(d) in the opinion of the dentist, the condition of the tooth in respect of which the restoration was provided is such that the restoration cannot satisfactorily be repaired or replaced and different treatment is now required; or
(e) the repair or replacement is required as a result of trauma.

(4) The obligation to repair or replace any restoration under sub-paragraph (2) shall cease 12 months after the date on which the restoration was provided or when the treatment on referral has been completed, whichever is the sooner.

(5) Sub-paragraph (1) shall not apply where the dentist refers a patient for examination and advice only.

Inability of dentist to complete care and treatment under a continuing care arrangement or a capitation arrangement or treatment on referral

14.—(1) If, owing to any cause beyond his control, the dentist is unable to complete any care and treatment which has been commenced under a continuing care arrangement or a capitation arrangement or treatment on referral, he shall forthwith notify the Board in writing of the extent of the care and treatment or treatment on referral provided and of the reason for his inability to complete the remainder.

(2) The Health Board may, on the application of a dentist, authorise him on such terms as it thinks fit to discontinue a course of care and treatment under a continuing care arrangement or a capitation arrangement or treatment on referral which he has commenced, but before doing so it shall consider any representations which the patient may wish to make with respect to the application, and if it grants the application it shall so inform the patient, the dentist and the Board.

Care and treatment summaries

15. Where a patient who has been receiving care and treatment under a continuing care arrangement or a capitation arrangement requests the dentist to provide him with a summary of the care and treatment he has received from the dentist under that arrangement because he intends to enter into such an arrangement with another dentist, the dentist shall provide such a summary as he considers appropriate, (including details of any care and treatment which could not be easily observed on a visual examination), to the patient on a form supplied by the Health Board, or a form to like effect, within 28 days of the request.

PART III
OCCASIONAL TREATMENT

Occasional treatment

16.—(1) A dentist may provide as occasional treatment any of the items of treatment mentioned in sub-paragraph (2).

(2) The items of treatment referred to in sub-paragraph (1) are—

(a) not more than 2 extractions of permanent teeth;
(b) not more than 4 extractions of deciduous teeth, save that, where a general anaesthetic is used, there shall be no limit to the number of deciduous teeth that may be extracted;
(c) dressing of deciduous or permanent teeth including any preparatory treatment;
(d) necising an abscess;
(e) opening one or more root canals for drainage;
(f) pulp extirpation and dressing to seal the cavity;
(g) arrest of haemorrhage;
(h) treatment of infected sockets;
(i) removal of plugs or sutures;
(j) provision of a temporary crown as an immediately necessary palliative or in an emergency;
(k) refixing or cementing a crown, inlay or bridge;
(l) repair of dentures or other appliances not requiring the prior approval of the Board;
(m) treatment for acute conditions of the gingivae or oral mucosa (including treatment for pericoronitis or for ulcers and herpetic lesions) and any necessary oral hygiene instruction in connection with such treatment;
(n) general anaesthesia in connection with the items of treatment specified in heads (a) to (f);
(o) sedation in connection with the items of treatment specified in heads (a) to (f), (j) and (k);
(p) radiographs in connection with the items of treatment specified in heads (a) to (k);
(q) issuing a prescription in connection with the items of treatment specified in heads (a) to (j) and (m).

(3) Where a patient has entered into a continuing care arrangement or a capitation arrangement with a dentist, another dentist who is not acting on behalf of that dentist may provide (in addition to the items of treatment specified in sub-paragraph (2)) as occasional treatment to that patient the following items of treatment:—

(a) not more than 2 permanent fillings to retained deciduous teeth or permanent teeth;
(b) root fillings to not more than 2 permanent teeth;
(c) replacement of a denture or temporary bridge where the original is lost or damaged beyond repair, or provision of a new denture where it is needed because of trauma or extraction;
(d) where the patient is under the age of 18, conservation of not more than 2 deciduous teeth; and
(e) sedation and radiographs in connection with the items of treatment specified in heads (a), (b) and (d).

(4) If, owing to any cause beyond his control, the dentist is unable to complete any occasional treatment which has been commenced, he shall forthwith notify the Board in writing of the extent of the occasional treatment provided and of the reason for his inability to complete the remainder.

PART IV
ADDITIONAL TERMS OF SERVICE FOR ALL DENTISTS

Remuneration

17. Except as otherwise provided in the Regulations or the National Health Service (Dental Charges) (Scotland) Regulations 1989(21), a dentist shall not claim or accept the payment of any fee or other remuneration—

(a) in respect of any treatment—

(i) which he has provided under general dental services; or

(21) S.I. 1989/363
(ii) which has not been provided or for which another claim has already been submitted to the Board; or

(b) if he is a salaried dentist.

Standards of care

18.—(1) In providing general dental services, a dentist shall—

(a) employ a proper degree of skill and attention;

(b) save as is provided in paragraphs 12, 19, 28 and 37, give all treatment personally;

(c) use only materials which are suitable for the purpose for which they are used;

(d) except in the case of occasional treatment and treatment on referral, provide, subject to sub-paragraph (2), care and treatment to such extent, and at such intervals, as may be necessary to secure and maintain the oral health of the patient.

(2) When providing general dental services a dentist shall not provide care and treatment in excess of that which is necessary to secure and maintain oral health.

General anaesthesia

19. Where a dentist undertakes, in the course of providing general dental services, any procedure for which general anaesthesia of the patient is necessary, he shall arrange for a doctor or another dentist experienced in the administration of general anaesthesia to administer the general anaesthetic and to remain with the patient throughout the procedure, including the recovery phase.

Supply of drugs

20.—(1) A dentist may supply to a patient such listed drugs as are required for immediate use before a supply can otherwise be obtained under paragraph 21.

(2) A dentist may personally administer to a patient any drug required for the care and treatment of that patient.

Issue of prescription forms

21.—(1) A dentist shall order such listed drugs (other than those supplied under paragraph 20) as are needed for the care and treatment of any patient for whom he is providing general dental services by issuing to the patient a prescription form.

(2) The prescription form—

(a) shall be signed by the dentist;

(b) shall not refer to any previous prescription;

(c) shall not be issued to persons other than patients,

and a separate prescription form shall be issued for each patient.

Domiciliary visits

22. A dentist shall visit and treat a patient whose condition so requires at any place at which the patient normally resides or is temporarily resident provided that such place is not more than five miles from his practice premises or, in the case of a dentist who provides general dental services at a mobile surgery only, from the place where the mobile surgery is normally based.
Records

23.—(1) A dentist shall keep a record in respect of—
   (a) the care and treatment given to each patient under a continuing care arrangement or a
       capitation arrangement and the fact of referral under such an arrangement under paragraph
       12;
   (b) treatment on referral;
   (c) occasional treatment,
   in the patient record and shall include with that record details of any private care and treatment (to
   the extent that it is provided with care and treatment under general dental services for the purpose
   of securing and maintaining oral health) and all films and dental models (being models in respect of
   orthodontic treatment) taken or obtained by him as part of the care and treatment under a continuing
   care arrangement or a capitation arrangement or treatment on referral or occasional treatment.

   (2) The records, films and dental models referred to in sub-paragraph (1) shall be retained for a
   period of 12 months after completion of any course of care and treatment under a continuing care
   arrangement or a capitation arrangement or treatment on referral or occasional treatment to which
   they relate.

   (3) The dentist shall, during the period in which he holds any records, films and dental models
   referred to in sub-paragraph (1), produce them to the Board, the Health Board or the dental officer
   within 14 days of being required to do so by the Board, the Health Board or the dental officer.

   (4) Nothing in sub-paragraph (1) shall be taken as removing any rights of property which the
   dentist may have in relation to the records, films and models referred to in that sub-paragraph.

Prior approval of treatment

24.—(1) Subject to sub-paragraphs (6), (7) and (10), where care and treatment is or includes
     prior approval treatment, the dentist—
     (a) shall submit, without unreasonable delay, to the Board for approval an estimate of the
         whole of the care and treatment, including details of any part of that care and treatment
         to be provided privately; and
     (b) other than in an emergency, shall not, until he receives approval from the Board, proceed—
         (i) where prior approval is required by virtue of Part I of Schedule 1C, with any item
             of treatment referred to in that Part; or
         (ii) where prior approval is required by virtue of Part II of Schedule 1C, with any care
             and treatment mentioned in the estimate.

   (2) Subject to sub-paragraphs (6), (7) and (10), where in the course of providing any care and
   treatment to which, at its outset, sub-paragraph (1) does not apply, a dentist is of the opinion that
   a variation of or addition to such care and treatment is necessary, and by reason of the variation or
   addition the care and treatment includes or becomes prior approval treatment, the dentist—
   (a) shall submit, without unreasonable delay, to the Board for approval an estimate of the
       whole of the care and treatment (including that which the dentist has commenced) together
       with details of any part of that care and treatment provided or to be provided privately; and
   (b) other than in an emergency, shall not, until he receives approval from the Board, proceed—
       (i) where prior approval is required by virtue of Part I of Schedule 1C, with any item
           of treatment referred to in that Part; or
       (ii) where prior approval is required by virtue of Part II of Schedule 1C, with any care
           and treatment mentioned in the estimate.
(3) Subject to sub-paragraphs (6), (7) and (10), where a dentist has obtained the approval from the Board required by sub-paragraph (1) because the care and treatment is or includes an item of treatment referred to in Part I of Schedule 1C, and in the opinion of the dentist a variation of or addition to such care and treatment is necessary, which variation or addition—

(a) is or includes an item of treatment referred to in Part I of Schedule 1C; or

(b) has the effect that the care and treatment then falls within Part II of Schedule 1C,

the dentist shall re-submit, without unreasonable delay, the estimate to the Board for approval, including details of any part of that care and treatment provided or to be provided privately.

(4) Subject to sub-paragraphs (6), (7) and (10), where a dentist has obtained approval from the Board in accordance with sub-paragraph (1) because prior approval is required by virtue of Part II of Schedule 1C and in the opinion of the dentist a variation of or addition to such care and treatment is necessary, the dentist shall re-submit, without unreasonable delay, the estimate to the Board for approval together with details of any part of that care and treatment provided or to be provided privately.

(5) Where the Board receives an estimate under sub-paragraph (3) or (4) it may withdraw or vary its original approval in so far as the care and treatment has not yet been carried out in accordance with such approval, or add to its original approval, and, other than in an emergency, the dentist shall not, until he receives approval from the Board, proceed—

(a) in any case falling within sub-paragraph (3)(a), with any item of treatment referred to in Part I of Schedule 1C; or

(b) in any other case, with any of the care and treatment mentioned in the estimate.

(6) Sub-paragraphs (1), (2), (3) and (4) shall not apply where the care and treatment to be provided under a capitation arrangement is care and treatment for which the dentist is remunerated in accordance with Section X (treatment under capitation) of Determination I of the Statement of Dental Remuneration dated 28th August 1990 and for which he receives no remuneration other than a capitation payment.

(7) The dentist may proceed immediately with the care and treatment of merchant seamen, deep sea fishermen, or oil rig workers, about to go to sea for a period in excess of four weeks, or persons about to go abroad for a period in excess of four weeks, and in such event shall send an estimate to the Board for approval immediately after providing the patient with a plan for treatment in accordance with paragraph 4(1)(b) or (c) or 5(1)(c) or (d) or 13(1)(b) or (c).

(8) Where, in consequence of any proceedings under the National Health Service (Service Committees and Tribunal) (Scotland) Regulations 1974 (22) in respect of general dental services provided in the area of any Health Board, a dentist is required for any period to submit all estimates to the Board for approval, in respect of all treatment or any specified description of treatment the dentist—

(a) shall submit, without unreasonable delay, all such estimates (whether relating to treatment to be provided in that or any other area), to the Board for approval; and

(b) shall not proceed with such treatment (other than in the course of any single consultation, treatment consisting of one examination and the taking of two small radiographs, each of a size not exceeding 16 centimetres square, or treatment in an emergency) until he receives approval from the Board.

(9) Where in consequence of a direction given by the Board under regulation 12A(2) a dentist is directed, for any period, to submit all estimates to the Board for approval in respect of treatment or a description of treatment specified in the direction the dentist—

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(22) S.I. 1974/504, amended by S.I. 1974/1031 and 1988/878
(a) shall submit, without unreasonable delay, all such estimates (relating to treatment in the area of any Health Board) to the Board for approval; and

(b) shall not proceed with such treatment (other than in the course of any single consultation, treatment consisting of one examination and the taking of two small radiographs, each of a size not exceeding 16 centimetres square, or treatment following trauma or in an emergency) until he receives approval from the Board.

(10) Nothing in this paragraph shall prevent a dentist carrying out any care and treatment privately.

Completion of an estimate

25. When submitting an estimate to the Board for approval in accordance with paragraph 24(1), (2), (3), (4), (8) or (9), a dentist shall in all cases, in addition to the information specified in those sub-paragraphs, provide to the Board the following information:—

(a) his name and address and the number by which his arrangement with the Health Board is identified;

(b) the patient’s name and address and date of birth; and

(c) details of the care and treatment proposed and the reasons why the dentist considers such care and treatment is necessary.

Completion of care and treatment under a continuing care arrangement or a capitation arrangement or treatment on referral

26.—(1) Subject to sub-paragraph (3), the dentist shall complete with reasonable expedition any course of care and treatment under a continuing care arrangement or a capitation arrangement or treatment on referral, save that—

(a) in the case of treatment including extractions and the consequent provision of dentures, the dentist shall complete the treatment within 12 months; and

(b) in the case of orthodontic care and treatment the dentist shall complete the care and treatment within such period as may be allowed by the Board.

(2) In so far as any treatment relates to the provision of dentures, it shall not be regarded as completed unless the dentures have been delivered to, and remain in the possession of, the patient.

(3) A dentist shall not be regarded as having failed to comply with paragraph (1) by reason of any delay in completing treatment where the Board is satisfied that the delay is due to the failure of the patient to attend for treatment or that there is some other sufficient reason for the delay.

(4) Where a dentist—

(a) has been notified that a patient has been requested to submit himself for examination by a dental officer; and

(b) has not been notified that the examination has been carried out or cancelled,

he shall not, otherwise than in an emergency, provide any care and treatment to that patient and shall take all reasonable steps to facilitate the examination.

(5) Where a dentist—

(a) has been notified that a dental service committee will investigate a complaint or reference relating to the provision of general dental services by him to a patient; and

(b) has not been notified—

(i) that the investigation has been completed; or

(ii) that such committee has no objection,
he shall not, other than in an emergency, provide any care and treatment to that patient and shall take all reasonable steps to facilitate the investigation.

(6) Nothing in this paragraph shall prevent a dentist carrying out any care and treatment privately.

Signatures

27. Any signature by a dentist required by the Regulations or terms of service shall be handwritten in ink with his initials, or forenames, and surname in his own handwriting, and not by means of a stamp.

Dental auxiliaries

28. A dentist may in the provision of general dental services arrange for care and treatment to be given in accordance with the provisions of Regulations having effect under section 45 of the Dentists Act 1984(23) by a dental auxiliary to whom those Regulations apply, and shall ensure that such treatment is properly completed.

Patient information leaflets

29.—(1) A dentist whose name is included in the dental list shall compile and from 1st October 1991 make available, to the Health Board (if it requires one) and to any person who may reasonably require one, a document about the provision of general dental services at his practice premises (in this paragraph called “a patient information leaflet”) which shall include the information specified in Schedule 1D.

(2) A dentist shall make any amendments to his patient information leaflet which he considers to be necessary to maintain its accuracy.

(3) A dentist who practises in partnership or under an associateship agreement with other dentists whose names are included in the dental list shall satisfy the requirements of this paragraph if he makes available a patient information leaflet, compiled and, where appropriate, revised in accordance with sub-paragraphs (1) and (2), which relates to the partnership or associateship as a whole.

Postgraduate education

30. A dentist shall in the provision of general dental services take reasonable steps to develop professional knowledge and skills through activities undertaken with a view to maintaining an up-to-date knowledge of dental science and practice.

Notices

31. A dentist shall display in a prominent position at the practice premises a notice, in a form supplied or approved by the Health Board, indicating NHS charges which are payable under general dental services and entitlement to exemption from and remission of NHS charges.

(23) 1984 c. 24. See S.I. 1986/887
PART V
ADDITIONAL TERMS OF SERVICE FOR DENTISTS OTHER THAN SALARIED DENTISTS

Mixing of general dental services and private care and treatment

32.—(1) Subject to sub-paragraph (3), a dentist may, with the consent of the patient, provide privately any part of the care and treatment—
   (a) necessary under a continuing care arrangement or a capitation arrangement to secure and maintain the oral health of a patient; or
   (b) to be provided as part of treatment on referral.
(2) A dentist shall not, with a view to obtaining the agreement of a patient to undergo care and treatment privately—
   (a) advise a patient that the care and treatment which is necessary in his case—
      (i) under the continuing care agreement or capitation arrangement to secure and maintain oral health; or
      (ii) having regard to the reason given for referral, is not available from that dentist under general dental services; or
   (b) seek to mislead the patient about the quality of care and treatment available under general dental services.
(3) Sub-paragraph (1) shall not apply—
   (a) where the treatment necessary to secure oral health relates to a single tooth, in which case the treatment shall be provided wholly under general dental services or wholly privately; and
   (b) in respect of orthodontic care and treatment in which case—
      (i) the assessment, diagnosis and planning of treatment in connection with the orthodontic care and treatment shall be provided wholly under general dental services or wholly privately; and
      (ii) the orthodontic treatment shall be provided wholly under general dental services or wholly privately.

Premises etc.

33.—(1) Unless he provides general dental services from a mobile surgery only, a dentist shall provide proper and sufficient dental surgery and waiting-room accommodation for his patients.
(2) A dentist who provides general dental services at a mobile surgery shall provide proper and sufficient mobile surgery and waiting room accommodation.
(3) A dental surgery and a mobile surgery shall be furnished with suitable equipment and a dentist shall provide treatment with suitable instruments.
(4) A dentist, on receipt of reasonable notice in writing, shall at all reasonable times admit a dental officer for the purpose of inspecting any dental surgery, mobile surgery or waiting-room under the dentist’s control.
Remuneration

34. The provisions of paragraph 17 shall not have effect in relation to any claim made by a dentist in respect of loss of remuneration resulting from the failure of a patient to keep an appointment for general dental services.

Deputies and assistants

35. A deputy or assistant who signs a claim for remuneration or an estimate or part thereof on behalf of the dentist for whom he is acting shall do so in his own name and, except where the person who signs is a partner whose name is included in the dental list, shall also insert the name of the dentist for whom he is acting.

36. A deputy or assistant who issues a prescription form for listed drugs under paragraph 21 shall, in addition to signing his own name on such prescription form, insert thereon the name of the dentist for whom he is acting.

37.—(1) Where a dentist is prevented from providing care and treatment by reason of temporary absence through illness or other reasonable cause, such care and treatment may be given by a deputy or assistant.

(2) In the case of two or more dentists practising in partnership or as a principal and assistant, care and treatment may at any time be given by a partner or an assistant of the dentist who is responsible for the patient’s treatment, if reasonable steps are taken to secure continuity of care and treatment.

(3) A dentist shall not employ more than two assistants at any one time for the provision of general dental services without the consent of the Health Board or Health Boards in whose area he is providing such services or, on appeal, the Secretary of State.

(4) Before giving any consent under sub-paragraph (3) a Health Board shall consult the area dental committee for its area, and any consent given under that sub-paragraph shall be reviewed by the Health Board in consultation with the area dental committee at least once a year.

(5) A dentist shall—

(a) notify the Health Board of the employment of an assistant within 7 days of the first day of such employment;

(b) forward to the Health Board such particulars concerning the assistant as the Health Board may reasonably require; and

(c) on ceasing to employ an assistant, notify the Health Board within 7 days of the cessation of that employment.

(6) If a dentist intends to absent himself from his practice premises for more than 28 consecutive days he shall notify the Health Board of—

(a) his intended absence; and

(b) the name and address, if different to the practice premises, of the deputy or assistant (if any) responsible for providing general dental services during his absence.

(7) A dentist who intends to be or is absent from his practice premises for more than two months—

(a) shall notify the Health Board in writing; and

(b) shall not employ an assistant for any period of absence in excess of two months without the consent of the Health Board.

(8) A dentist shall not employ as an assistant any dentist who has the same address in the dental list as any of his own practice premises.

(9) Where a dentist employs an assistant who to the dentist’s knowledge is subject to a requirement mentioned in paragraph 24(8) or (9) to submit estimates to the Board for prior approval
in respect of treatment, he shall not allow the assistant to carry out the treatment unless the prior approval of the Board has first been obtained.

(10) A dentist shall not, without the consent of the Secretary of State, employ as a deputy or assistant for the purpose of the provision of general dental services any dentist who is disqualified for inclusion in the dental list of any Health Board under the provisions of sections 25(2A) or 30(1) of the National Health Service (Scotland) Act 1978(24) or section 8(2) of the Health and Medicines Act 1988(25).

(11) Except as provided in sub-paragraph (12), a dentist shall be responsible for all acts and omissions of any dentist acting as his deputy or assistant.

(12) A dentist whose name is included in the dental list, when acting as a deputy to another dentist whose name is also included in that list, shall be responsible for his own acts and omissions in relation to the obligations under these terms of service of the dentist for whom he acts as deputy and for the acts and omissions of any person employed by him or acting on his behalf.

(13) A deputy shall be entitled to provide general dental services at places or at times other than those arranged by the dentist for whom he is acting, due regard being had to the convenience of patients.

PART VI
ADDITIONAL TERMS OF SERVICE FOR SALARIED DENTISTS

Attendance

38.—(1) A dentist shall attend at such premises on such days and at such hours as he may agree with the Health Board.

(2) The dentist shall not, without the permission of the Health Board, be entitled to provide at such premises any care and treatment which is not part of general dental services.

General anaesthetics

39. Where required to do so by the Health Board, or on behalf of that Health Board, the dentist shall pay to a doctor or another dentist, for the provision of general anaesthetic by virtue of arrangements made under paragraph 19, a fee not exceeding the fee in the Scale of Fees appropriate to the item of treatment provided.

Records

40.—(1) The records, films and models referred to in paragraph 23(1) shall be the property of the Health Board.

(2) The dentist shall supply to the Board or the dental officer such information with regard to the care and treatment of patients as they may request.

Drugs

41. Any drugs supplied under paragraph 20 shall be obtained by the dentist in such manner as the Health Board may require.

(24) 1978 c. 29; section 25(2A) was inserted by S.I. 1981/432, article 4(3).
(25) 1988 c. 49
Termination of services

42.—(1) Subject to sub-paragraph (2), any arrangement between the Health Board and a salaried dentist for the provision of general dental services may be terminated by either party giving to the other three months' notice in writing.

(2) If a dentist fails to comply with any of the terms of service that apply to a salaried dentist the Health Board may terminate the agreement by giving him one month’s notice in writing.

(3) The Health Board may at any time suspend a salaried dentist from the discharge of his duties but such suspension shall not affect the right of the salaried dentist to receive remuneration during the period of suspension.

SCHEDULE 1A

PART I

INFORMATION AND UNDERTAKING TO BE INCLUDED IN AN APPLICATION FOR INCLUSION IN THE DENTAL LIST

1. Full name.
2. Sex.
3. Date of birth.
4. Private address.
5. Date of registration as a dental practitioner in the register kept under section 14 of the Dentists Act 1984(26) and registration number, dental qualifications registerable under that Act and when obtained.
6. Address of proposed practice premises and, in the case of any mobile surgery, the address to which correspondence may be sent.
7. Proposed days and hours of attendance and whether patients will be seen by appointment only and, in the case of any mobile surgery, particulars of places to be regularly visited by the dentist and the times of those visits.
8. Undertaking to provide general dental services in the area of the Health Board.
9. Whether intending to practise—
   (a) as a single-handed practitioner; or
   (b) as a partner and if so the name and address of each intended partner and whether or not his name is included in the Health Board’s dental list; or
   (c) as an associate and if so the name and address of each intended associate and whether or not his name is included in the Health Board’s dental list.
10. The names of any assistants he or any person referred to in paragraph 9(b) or (c) intends to employ or already employs at the proposed practice premises.
11. Present or most recent appointment and whether any previous experience in the provision of general dental services.

(26) 1984 c. 24
12. Whether the general dental services to be provided are restricted to orthodontic treatment.
13. Whether there is access to the proposed dental surgery without the use of stairs.

PART II
INFORMATION WHICH MAY BE INCLUDED IN AN APPLICATION FOR INCLUSION IN THE DENTAL LIST.
Details of any languages, other than English, spoken by the dentist.

SCHEDULE 1B
Regulation 3 Schedule 1, Paragraphs 4 and 5

INFORMATION TO BE PROVIDED ABOUT CARE AND TREATMENT UNDER GENERAL DENTAL SERVICES
1. Details of arrangements in an emergency.
2. Details of repairs and replacements free of charge.
3. Explanation of care and treatment to be provided.
4. Details of arrangements if the dentist with whom the patient has entered into a continuing care arrangement or capitation arrangement is not available.
5. Details of care and treatment available under general dental services.
6. Explanation of NHS charges for general dental services and of entitlement to exemptions from and remission of these charges.
7. Explanation of the arrangements for cancelling appointments.
8. Explanation of the importance of regular care.
9. The consequences of the termination of a continuing care arrangement or a capitation arrangement.

SCHEDULE 1C
Regulation 3 Schedule 1, Paragraph 24

PRIOR APPROVAL TREATMENT

PART I
ITEMS OF TREATMENT
Any item of treatment specified in Determination I of the Statement of Dental Remuneration dated 28th August 1990 as being items of treatment for which the prior approval of the Board is required.
PART II
CARE AND TREATMENT

1. A course of care and treatment under a continuing care arrangement or a capitation arrangement, including any treatment on referral, the cost of which exceeds or is likely to exceed £500.

2. Any orthodontic care and treatment with that dentist, the cost of which exceeds or is likely to exceed £500.

3. A reference in this Part of this Schedule, to the cost of care and treatment means the cost of such care and treatment calculated in accordance with the Scale of Fees, but does not include the cost of—
   (a) any care and treatment under a capitation arrangement for which the dentist is remunerated in accordance with Section X (treatment under capitation) in Determination I of the Statement of Dental Remuneration dated 28th August 1990 and for which he receives no remuneration other than a capitation payment;
   (b) in the case of orthodontic care and treatment, fees for diagnosis, study models and retention; and
   (c) any part of the care and treatment to be provided privately.

SCHEDULE 1D
Regulation 3 Schedule 1, paragraph 29

INFORMATION TO BE INCLUDED IN PATIENT INFORMATION LEAFLETS

Personal and professional details of the dentist
(a) Full name.
(b) Sex.
(c) (i) Date of registration as a dental practitioner in the register kept under section 14 of the Dentists Act 1984 (27);
   (ii) details of any dental qualification held by the dentist entitling him to be so registered; and
   (iii) details of any other dental qualification held by him which is registerable pursuant to section 19(1)(c) of the Dentists Act 1984.

Information about provision of general dental services at practice premises
(a) The addresses of all the practice premises and, where he provides general dental services at a mobile surgery only, the address to which correspondence may be sent.
(b) Particulars of the days and hours when the dentist is or will be usually in attendance at the practice premises and, in the case of any mobile surgery, particulars of the places regularly visited by him and the times of those visits.
(c) Whether the dentist is a single-handed practitioner, in partnership, an associate, or works part-time or on a job share basis.

(27) 1984 c. 24
(d) The names of all dentists at the practice premises including partners, associates, and assistants and details for them as specified in paragraph 1 of this Schedule.

(e) Whether a dental hygienist is employed at the practice premises.

(f) Whether there is access to the dental surgery without the use of stairs.

(g) Whether the practice premises (including the dental surgery and toilets) are accessible to wheelchairs.

(h) Whether the dentist or any person referred to in sub-paragraph (d) provides only orthodontic treatment.

(i) Provided the dentist consents to its inclusion, details of any languages, other than English spoken by the dentist.”

SCHEDULE 2

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S.I. 1988/854

The whole Regulations.

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations amend the National Health Service (General Dental Services) (Scotland) Regulations 1974 ("the principal Regulations") which regulate the terms on which general dental services are provided under the National Health Service (Scotland) Act 1978 and make consequential and associated amendments to the Regulations concerning charges for dental treatment and appliances and service committee and other disciplinary procedures. The principal changes made by these Regulations are as follows.

Health Boards are requested from 1st April 1991 to record additional information on the list ("the dental list") of dentists providing general dental services (regulation 4(2)). A dentist whose name is included in a dental list on 1st October 1990 is required to provide the Health Board with additional information if requested (regulation 4(3)) and dentists applying to have their names included must supply the information set out in Part I of the new Schedule 1A to the principal Regulations (regulation 4(3)). Health Boards are enabled to prepare and maintain, in addition to the dental list, any other list in relation to those dentists whose names are included on its dental list and to obtain related information from dentists (regulation 4(4)).

The Scottish Dental Practice Board ("the Board") is empowered to direct a dentist whose pattern of treatment differs substantially from the pattern of treatment of other dentists (locally or nationally) not to carry out all or any specified description of treatment without the approval of the Board (regulation 8 -prior approval -patterns of treatment -commonly referred to as prior approval by targeting). The dentist has a right of appeal against the direction under regulation 19 of the National Health Service (Service Committees and Tribunal) (Scotland) Regulations 1974 ("the 1974 Regulations").

The arrangements for obtaining general dental services are changed (regulation 10). A person can apply for general dental services by way of care and treatment under a continuing care arrangement (those 18 or over) or a capitation arrangement (those under 18) and (in either case) occasional treatment. There is provision for arrangements once made to be transferred to another dentist (regulation 5). Three new determinations are included in the Statement of Dental Remuneration -maternity payments, long term sickness payments and postgraduate education allowances (regulation 12). There are revised arrangements for the approval of payments (regulation 13).

A new Schedule 1 is substituted in the principal Regulations setting out new terms of service under which dentists provide general dental services to their patients. Parts I, II, III and IV apply to all dentists, Part V to dentists other than salaried dentists and Part VI to salaried dentists.
Part II of the new terms of service sets out, in particular, the obligations of the dentist under continuing care arrangements (paragraph 4) and capitation arrangements (paragraph 5). The continuing care arrangements and the capitation arrangements each require the dentist to secure and maintain oral health and to provide a treatment plan for the patient and emergency cover. Paragraphs 8 to 11 make provision for the duration, lapse and termination of a continuing care or capitation arrangement. Paragraph 12 makes provision for referral to another dentist or to a hospital or other service, and paragraph 13 provides for the obligations of a dentist who accepts a patient referred to him.

Part III of the new terms of service makes provision for occasional treatment and sets out the items of treatment which may be provided as occasional treatment. A dentist may provide these items of treatment without entering into a continuing care or capitation arrangement.

Part IV of the new terms of service makes provision for the standards of care required of dentists providing general dental services (paragraph 18(1)) and prevents a dentist, as part of general dental services, from providing care and treatment in excess of that which is necessary to secure and maintain oral health (paragraph 18(2)). There are special requirements for general anaesthesia (paragraph 19). Paragraph 24 provides procedures for approval by the Board where care and treatment is or includes prior approval treatment (referred to or defined in the new Schedule 1C to the principal Regulations). Paragraph 29 imposes an obligation on a dentist to compile and make available from 1st October 1991 a patient information leaflet about the provision of general dental services at his practice premises. The information to be provided in the leaflet is set out in the new Schedule 1D to the principal Regulations.

In Part V of the new terms of service, paragraph 32 introduces new arrangements under which a dentist may, with the consent of the patient, provide privately any part of the care and treatment which is necessary under a continuing care or capitation arrangement to secure the patient’s oral health. There are, however, some restrictions on the mixing of general dental services and private care and treatment which are set out in paragraph 32(3).

Regulations 17 and 18 of these Regulations, respectively, effect consequential amendments to the National Health Service (Dental Charges) (Scotland) Regulations 1989 and the 1974 Regulations. Regulation 19 of these Regulations makes transitional provision in relation to their application to courses of treatment begun under the principal Regulations before 1st October 1990.

Regulation 20 revokes Regulations spent as a consequence of the amendments made by these Regulations.