Frequently Asked Questions

Q: How are dental services commissioned in Bristol, North Somerset and South Gloucestershire?

A: From April 2023 dental care is commissioned by the integrated care board (ICB) and provided by urgent, community and domiciliary dental care services, general dental practices, hospital-based dental specialties, and university dental schools. Oral health improvement is commissioned by the local authority Public Health team and provided by a range of providers alongside community dental services, NHS teams and university dental schools. Local authorities are statutorily required to provide or commission oral health improvement programmes appropriate to their areas together with oral health surveys. A broad range of other services have a role in oral health, for example homeless service providers, adult social care settings, prison health, early years settings and schools, drugs and alcohol services, and foster carers.

Q. What are dental practices' contractual obligations?

A: A dental practice has an NHS contractual obligation during an open course of treatment for example crowns, bridges, and dentures. If something goes wrong, requiring repair or retreatment, within 12 months of the original treatment, then your dentist should do the necessary without any additional charges. Outside of this, a dental practice does not have any obligation to continue to offer NHS care to a person. The practice may choose to treat regular patients via recalls, but there is no obligation for them to maintain the relationship.

Q. How does dental contracting work?

A: Funding for NHS dental care comes from a combination of government funding and patient contributions. Patients are charged for their dental treatments based on a tiered system known as NHS dental treatment bands, which vary depending on the complexity of the treatment. Certain groups, including children, pregnant women, and individuals on specific benefits are eligible for free dental care. The conditions of dental service delivery are determined by a national contract.

Unlike General Practice, where contracts are based on a patient list, dental practices are reimbursed for their NHS work based on a system known as Units of Dental Activity (UDAs). UDAs are a measure of the amount of work done during dental treatment. More complex dental treatments count for more UDAs than simpler ones. Dental practices are paid a set fee for each UDA completed rather than for numbers of patients.

Dentists have continually raised concerns nationally regarding the current contract introduced in 2006 and contract reform is not expected prior to the next general election. NHS England have highlighted some of the flexibilities which exist within

the current national dental contractual framework to enable ICBs to tailor services to meet specific population needs, and to take steps to support practices with changes to UDA values, where this presents clear value for money. The aim of this guidance is to provide ICBs with an outline of the legal requirements of the national dental contractual framework and to highlight the key considerations associated with procuring Additional and Further Services, previously termed 'flexible commissioning'.

Q: How does dental registration and access currently work?

A: Dental practices are independent businesses, often providing a combination of NHS and private dentistry.

Patients are not registered with a dentist in the same way they are with a General Practitioner (doctor) where there is a catchment area, and individuals can access services at a dental practice located in any area if the practice is accepting new patients.

Dental practices can choose whether they provide NHS treatment to patients or limit the amount of services depending on whether they have capacity under the terms of their contract.

To check on NHS dental registration availability, patients should visit www.nhs.uk. Practices providing NHS treatments are listed here – each practice updates their information.

Q: What are you doing to improve access to NHS dentistry?

A: We await further information about additional funding to attract new dentists and improve access following the national announcement on the Dental Recovery Plan. This includes top-up and new patient payments for dentists to improve access for those who have not seen a dentist in two years or more and the funding for underserved areas.

NHS Bristol, North Somerset and South Gloucestershire ICB together with colleagues from across the South West, has already implemented the £28 UDA uplift mandated within the national recovery plan and are considering whether it is affordable to increase further and lead to increased access.

We have been focusing on putting arrangements in place to ensure that anyone who does not have a dentist can access an urgent dental appointment.

There are now urgent care appointments available each week at clinics across the county, including weeknight and weekend clinics. Patients can access these appointments by contacting NHS 111.

Last year, we invited dental practices to provide additional appointments for those not registered with a dental practice to help them avoid the need for frequent urgent support by stabilising their dental issues. Ten practices signed up to the service in 2023 and the majority will be continuing into 2024/25.

Recently we advertised for additional services to ensure children in care can access an NHS dentist and applications are being considered. The development is the start of focusing on the areas of the population who particularly experience poor outcomes as an impact of poor oral health.

We have worked closely with the Local Dental Committee to identify additional funding which encourages primary care dentists to stay with the NHS. The start of this is additional funding for the time to complete mandatory training during 2024/25.

For further details on the work completed during 2023/24 please refer to the "Progress report for the first year of delegated commissioning for dental services, April 2023 – 2024".

Q: How long are current waiting lists?

A: The way that NHS dental contracts are regulated and managed means that providers are not mandated to hold a patient register and they are able to move patients from a practice list; this is not the same as when you are registered with a GP Practice. An early priority has been to improve access to urgent appointments and to provide care to patients who are not registered with a dental practice. We also know how important opening up additional NHS dental places at local practices is to our residents.

Q: Will Bristol, North Somerset and South Gloucestershire receive a Dental Van?

A: NHS Bristol, North Somerset and South Gloucestershire were not identified as one of the areas who would receive a dental van, but we are focusing on other plans which increase access for areas of the population who are particularly struggling with access.