

SCHEDULE 1

TERMS OF SERVICE FOR DENTISTS

PART IV

ADDITIONAL TERMS OF SERVICE FOR ALL DENTISTS

Remuneration

20.—(1) Subject to regulation 22 (statement of dental remuneration) and this Schedule, a dentist or contractor shall not—

- (a) claim a fee or accept payment of any fee from the Agency for any treatment provided otherwise than under general dental services;
- (b) claim a fee or accept payment of any fee from the patient for any treatment provided under general dental services, for which a claim has been or will be submitted to the SDPB, except such fee as may be prescribed by the National Health Service (Dental Charges) (Scotland) Regulations 2003;
- (c) claim a fee or accept payment of any fee from the Agency for any treatment provided under general dental services for which a fee has already been claimed under general dental services;
- (d) claim a fee or accept payment of any fee for any treatment which has not been provided, (except such a fee as may be prescribed by regulation 6(3)(a) of the National Health Service (Dental Charges) (Scotland) Regulations 2003;
- (e) claim, solicit or accept payment of any fee or other consideration or offer or promise any inducement as a prerequisite to providing, or agreeing to provide, or assisting or agreeing to assist with the provision of, general dental services, except such fee or other consideration as may be prescribed in the Statement of Dental Remuneration, the National Health Service (Dental Charges) (Scotland) Regulations 2003 or the National Health Service (Charges to Overseas Visitors) (Scotland) Regulations 1989(1);
- (f) claim a fee or accept payment of any fee from the Agency for any treatment provided to any person under a pilot scheme for personal dental services; or
- (g) make the provision of general dental services to any person subject to any condition other than those specified in these Regulations, permitted in the National Health Service (Dental Charges) (Scotland) Regulations 2003 or otherwise required by law.

(2) Any claim for a fee or other remuneration for the provision of general dental services shall be submitted in accordance with either paragraph (a) or (b):

- (a) the claim shall be submitted by post or by hand and shall be signed—
 - (i) if the care and treatment was provided on behalf of a contractor by a dentist who is also a contractor, by that dentist, who shall also give the name of the contractor on whose behalf the care and treatment was provided;
 - (ii) if the care and treatment was provided on the contractor's behalf by a dentist whose name is included in the second part of the dental list, by that dentist, who shall also give the name of the contractor on whose behalf the care and treatment was provided; and

(1) S.I. 1989/364 as amended by S.I. 1992/411, 1994/1770 and 1998/251 and S.S.I. 2004/369, 2005/572, 2005/445, 2006/141 and 2008/290, and 2009/177.

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- (iii) in other cases where the care and treatment was provided by a contractor who is a dentist, by the contractor; or
- (b) the claim shall be submitted by electronic communication (through a computer or similar device) and—
 - (i) if the care and treatment was provided on behalf of a contractor by a dentist who is also a contractor, the claim must contain the PIN allocated to that dentist;
 - (ii) if the care and treatment was provided on the contractor’s behalf by a dentist whose name is included in the second part of the dental list, the claim must contain the PIN allocated to that dentist; and
 - (iii) where the care and treatment was provided by a contractor who is a dentist, the claim must contain the PIN allocated to that contractor.

(3) When submitting a claim by way of electronic communication under sub-paragraph (2)(b) a person shall make use only of such computer programme as the SDPB has approved as suitable for that purpose.

(4) In this paragraph a “PIN” shall mean the personal identification number allocated to the contractor (or in the case of an assistant, the identification number allocated to the contractor for the assistants use) by the SPDB.

Surveys

21. A Health Board may conduct or commission surveys or other research relating to the provision of general dental services at no less than six monthly intervals and, when requested to do so by the Health Board, a contractor shall within a timescale specified by the Health Board, provide the Health Board with information of the provision of general dental services for the purpose of such surveys or other research.

Standards of care

22.—(1) In providing, or assisting with the provision of, care and treatment under general dental services a dentist shall—

- (a) employ a proper degree of skill and attention;
- (b) save as is provided in paragraphs 12, 13, 19, 23, 33 and 44, 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 or assist with the provision of care and treatment to such extent and at such intervals as may be necessary to secure and maintain the oral health of the patient; and
- (e) not provide or assist with the provision of care and treatment in excess of that which is reasonably necessary to secure and maintain the oral health of the patient.

(2) A body corporate, in undertaking to provide general dental services, shall ensure that any dentist employed or engaged by it to treat patients shall—

- (a) employ a proper degree of skill and attention;
- (b) save as is provided in paragraphs 12, 13, 19, 23, 33 and 44, 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 or assist with the provision of care and treatment to such extent and at such intervals as may be necessary to secure and maintain the oral health of the patient;

- (e) not provide or assist with the provision of care and treatment in excess of that which is reasonably necessary to secure and maintain the oral health of the patient; and
- (f) comply with the provisions of the terms of service.

Sedation

23.—(1) Where a dentist undertakes, in the course of providing or assisting with the provision of general dental services, any procedure for which sedation of the patient is necessary the dentist shall remain with the patient and arrange for another person with suitable training and experience also to remain with the patient throughout the procedure.

(2) In this paragraph “a person with suitable training and experience” means a person who has received such training and experience as to be capable of assisting the dentist in monitoring the clinical condition of the patient and in the event of an emergency.

Supply of drugs

24.—(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 25.

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

Issue of prescription forms

25.—(1) A dentist shall order such listed drugs (other than those supplied under paragraph 24) as are needed for the care and treatment of any patient for whom the dentist is providing or assisting with the provision of 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

26.—(1) A contractor may, where requested to do so by or on behalf of a patient who is unable to leave home unaccompanied because of physical or mental illness or disability, agree to provide general dental services at a place at which the patient normally resides.

(2) A contractor shall, where requested to do so by or on behalf of a patient who is unable to leave home unaccompanied because of physical or mental illness or disability, provide general dental services at a place at which the patient normally resides provided that such a place is not more than five miles from the contractor’s practice premises, or in the case of a contractor who provides general dental services at a mobile surgery only from any of the places regularly visited by the contractor.

Records

27.—(1) A contractor shall keep a complete, accurate and up to date 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 or 13;
- (b) treatment on referral;

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(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), any practice record form and all radiographs, photographs and study models (being models in respect of treatment) taken or obtained by or on behalf of the contractor 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, forms, radiographs, photographs and study models referred to in sub-paragraph (1) shall be retained for a period of 2 years by the contractor 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 contractor shall, during the period in which it holds any records, forms, radiographs, photographs and study models referred to in sub-paragraph (1)—

- (i) produce them on request to the dental officer, or any authorised officer of the Agency or the Health Board; or
- (ii) send them to the SDPB, the dental officer, or any authorised officer of the Agency, or the Health Board within 14 days of being required to do so by one of those persons.

(4) A contractor may keep the records (other than the practice record form) referred to in sub-paragraph (1) and the form recording recalled attendance in accordance with paragraph 31 in computerised form.

(5) Nothing in sub-paragraph (1) shall be taken as removing any rights of property which the contractor may have in relation to the records, radiographs, photographs and study models referred to in that sub-paragraph.

Prior approval of care and treatment

28.—(1) Subject to sub-paragraphs (6), (7) and (10), where care and treatment requires prior approval, from the SDPB, the dentist—

- (a) shall submit, without unreasonable delay, to the SDPB 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 the dentist receives approval from the SDPB, proceed—
 - (i) where prior approval is required by virtue of Part I of Schedule 4, with any item of treatment referred to in that Part; or
 - (ii) where prior approval is required by virtue of Part II of Schedule 4, 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 an addition to such care and treatment is necessary, and by reason of the variation or addition the care and treatment includes or becomes treatment requiring prior approval, the contractor—

- (a) shall submit, without unreasonable delay, to the SDPB 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 the dentist receives approval from the SDPB, proceed—

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- (i) where prior approval is required by virtue of Part I of Schedule 4, with any item of treatment referred to in that Part; or
- (ii) where prior approval is required by virtue of Part II of Schedule 4, 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 SDPB required by sub-paragraph (1) because the care and treatment is or includes an item of treatment referred to in Part I of Schedule 4, and in the opinion of the dentist carrying out the treatment 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 4; or
- (b) has the effect that the care and treatment then falls within Part II of Schedule 4,

the dentist shall re-submit, without unreasonable delay, the estimate to the SDPB 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 SDPB in accordance with sub-paragraph (1) because prior approval is required by virtue of Part II of Schedule 4, and in the opinion of the dentist carrying out the treatment a variation of or addition to such care and treatment is necessary, the dentist shall re-submit, without unreasonable delay, the estimate to the SDPB for approval together with details of any part of that care and treatment provided or to be provided privately.

(5) Where the SDPB receives an estimate under sub-paragraph (3) or (4) it may withdraw or vary its original approval insofar 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 SDPB, proceed—

- (a) in any case falling within sub-paragraph (3)(a), with any item of treatment referred to in Part I of Schedule 4; 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 a contractor is remunerated in accordance with Section X (treatment under capitation) of Determination I of the Statement of Dental Remuneration and for which the contractor receives no remuneration other than a capitation payment.

(7) A 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 aboard for a period in excess of four weeks, and in such event shall send an estimate to the SDPB for approval within 7 days of the commencement of the care and treatment.

(8) Where, in consequence of any proceeding under the National Health Service (Discipline Committees) (Scotland) Regulations 2006⁽²⁾ 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 SDPB for approval, in respect of all treatment or any specified description of treatment, the contractor or 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 SDPB for approval; and
- (b) shall not proceed with such treatment until the dentist receives approval from the SDPB, except that the dentist may in the course of any single consultation proceed with treatment consisting of one examination and the taking of no more than two small radiographs, each of a size not exceeding 16 square centimetres, or treatment in an emergency.

(2) S.S.I. 2006/330, amended by S.S.I. 2009/183 and 308.

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(9) Where in consequence of a direction given by the SDPB under regulation 27(2) a dentist is directed, for any period, to submit all estimates to the SDPB for approval in respect of treatment or a description of treatment specified in the direction the dentist—

- (a) shall submit, without unreasonable delay, all such estimates (relating to treatment in the area of any Health Board) to the SDPB for approval; and
- (b) shall not proceed with such treatment until the dentist receives approval from the SDPB, except that the dentist may in the course of any single consultation proceed with treatment consisting of one examination and the taking of no more than two small radiographs, each of a size not exceeding 16 square centimetres, or treatment following trauma or in an emergency.

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

Completion of estimate

29.—(1) Subject to sub-paragraphs (2) and (3), when submitting an estimate to the SDPB for approval in accordance with paragraphs 28(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 SDPB the following information—

- (a) the dentist's name and address and the number by which the dentist's 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.

(2) A dentist when submitting an estimate to the SDPB for approval as mentioned in sub paragraph (1) may, by arrangement with the SDPB, use a computer to submit that estimate to the SDPB.

(3) A dentist who, in accordance with sub paragraph (2), uses a computer to submit an estimate to the SDPB shall—

- (a) at the appropriate time secure the completion, so far as applicable, by the patient or by any person acting on behalf of the patient, of the practice record form;
- (b) use only such computer programme as the SDPB has approved as suitable for the purpose; and
- (c) include with that estimate—
 - (i) all the information specified in sub paragraph (1)(a) to (c) except the dentist's name and address; and
 - (ii) the personal identification number allocated to the dentist by the SDPB for that purpose.

Completion of claim forms

30.—(1) Subject to sub-paragraph (2), where a person declares that that person or a person for whom that person is responsible does not have to pay the charges prescribed by the National Health Service (Dental Charges) (Scotland) Regulations 2003(3) by virtue of either—

- (a) entitlement to exemption under paragraph 2(4) or 3(4) of Schedule 11 to the Act; or

(3) S.S.I. 2003/158, as amended by 2004/101, 2005/121 and 2006/131.

- (b) entitlement to remission of such charges under regulation 3 or 5 of the National Health Service (Travelling Expenses and Remission of Charges) (Scotland) (No. 2) Regulations 2003(4),

the contractor shall ask that person to produce satisfactory evidence in support of that declaration and where that person does not produce such evidence the contractor shall record that fact in the form claiming remuneration for the treatment of that person or the person for whom that person is responsible.

(2) Where, at the time of the declaration there is already available to the contractor satisfactory evidence of an entitlement to exemption from the charges on the grounds that the person in respect of whom the declaration is made is under 18 years of age, the obligations on the contractor specified in sub-paragraph (1) shall not apply.

(3) The contractor may appoint a member of the contractor's staff to undertake the task set out in sub-paragraph (1) on the contractor's behalf, and where the contractor does so the contractor shall ensure that that staff member is given sufficient instruction to perform that task.

Recalled attendance

31. Where a dentist is recalled to the practice premises at a time when the dentist does not normally provide or assist in the provision of general dental services, in order to provide treatment in an emergency, the dentist shall, on each occasion the dentist does so, at the time of that recalled attendance—

- (a) complete a form supplied by the Health Board for the purpose of supporting the dentist's claim to an allowance for that recalled attendance; and
- (b) obtain the signature on that form of the patient who the dentist has been recalled to treat, or of a person acting on behalf of that patient.

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

32.—(1) Subject to sub-paragraphs (2) and (4), the contractor shall complete within a reasonable time any course of care and treatment under a continuing care arrangement or a capitation arrangement or treatment on referral.

(2) Where the patient requires dentures, or new dentures, in consequence of treatment provided by the contractor involving the extraction of one or more teeth, the contractor shall provide such dentures within 12 months of the date of the relevant extraction or, as the case may be, the later or last such extraction.

(3) Insofar 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.

(4) A contractor shall not be regarded as having failed to comply with sub-paragraphs (1) or (2) 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.

(5) Where a contractor, or a dentist assisting in the provision of general dental services—

- (a) has been notified that a patient has been requested to submit for examination by a dental officer; and
- (b) has not been notified that the examination has been carried out or cancelled,

(4) [S.S.I. 2003/460](#), as amended by [2004/102](#).

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the contractor or dentist (as the case may be) shall not, otherwise than in an emergency, provide or assist with the provision of any care and treatment to that patient and shall take all reasonable steps to facilitate the examination.

- (6) Where a contractor, or a dentist assisting in the provision of general dental services—
- (a) has been notified that a dental discipline committee will investigate a reference relating to the provision of general dental services by the dentist or contractor (as the case may be) to a patient; and
 - (b) has not been notified—
 - (i) that the investigation has been completed; or
 - (ii) that such committee has no objection,

the contractor or dentist (as the case may be) shall not, other than in an emergency, provide or assist with the provision of any care and treatment to that patient and shall take all reasonable steps to facilitate the investigation.

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

Dental care professionals

33. A dentist may in the provision of general dental services arrange for care and treatment to be given by dental care professionals in accordance with the provisions of the Dentists Act 1984, and any regulations made under it and shall ensure that such care and treatment is properly completed.

Postgraduate education

34. A dentist shall in the provision or assistance with 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

35. A contractor shall display in a prominent position at the practice premises such information as the Health Board or the Agency may issue.

Complaints

36.—(1) Subject to sub-paragraph (2), a contractor shall establish and operate, in accordance with this paragraph, a procedure (in this paragraph and in paragraph 37 referred to as a “practice based complaints procedure”) to deal with any complaints made by or on behalf of the contractor’s patients and former patients.

(2) The practice based complaints procedure to be established by a contractor may be such that it also deals with complaints made in relation to one or more dentists or other persons employed or engaged by the contractor.

(3) A practice based complaints procedure shall apply to complaints made in relation to any matter reasonably connected with the provision or assistance with the provision of general dental services and within the responsibility or control of—

- (a) the contractor;
- (b) where the contractor is a body corporate, any of its directors or former directors;
- (c) any dentist either employed or engaged by the contractor;
- (d) a former partner of the contractor;

(e) an employee of the dentist other than one falling within paragraph (c);
and in this paragraph and paragraph 37, references to complaints are to complaints falling within this sub-paragraph.

(4) A complaint may be made on behalf of a patient or former patient with the patient's consent, or—

- (a) where the patient is a child under 16—
 - (i) by either parent, or in the absence of both parents, the guardian or other adult person who has care of the child; or
 - (ii) in the care of an authority under Part II of the Social Work (Scotland) Act 1968⁽⁵⁾ or in the care of a voluntary organisation, by that authority or organisation; or
- (b) where the patient is incapable of making a complaint, by a relative or other adult person who has an interest in that patient's welfare.

(5) Where a patient has died a complaint may be made by a relative or other adult person who had an interest in the patient's welfare or, where the patient was as described in sub-paragraph (4)(a)(ii), by the authority or voluntary organisation.

(6) A practice based complaints procedure shall comply with the following requirements:—

- (a) the contractor shall specify a person (who need not be connected with the contractor's practice and who, in the case of an individual, may be specified by job title) to be responsible for receiving and investigating all complaints;
- (b) all complaints shall be—
 - (i) recorded in writing;
 - (ii) acknowledged, either orally or in writing, within the period of three days (excluding Saturdays, Sundays, Christmas Day, New Year's Day and other public or local holidays agreed with the Health Board) beginning with the day on which the complaint was received by the person specified in paragraph (a), or where that is not possible, as soon as reasonably practicable; and
 - (iii) properly investigated;
- (c) within the period of 20 days (excluding Saturdays, Sundays, Christmas Day, New Year's Day and other public or local holidays agreed with the Health Board) beginning with the day on which the complaint was received by the person specified in paragraph (a), or where that is not possible, as soon as reasonably practicable, the complainant shall be given a written summary of the investigation and its conclusions;
- (d) where the investigation of the complaint requires consideration of the patient's dental records, the person specified in paragraph (a) shall inform the patient or person acting on the patient's behalf if the investigation will involve disclosure of information contained in those records to a person other than the contractor or a partner, deputy or an employee of the contractor and obtain the consent of the patient or the person acting on the patient's behalf to such disclosure; and
- (e) the contractor shall keep a record of all complaints and copies of all correspondence relating to complaints, but such records shall be kept separate from patients' dental records.

(5) [1968 c.49](#); Part II of the Social Work (Scotland) Act 1968 was extended with modification by the Guardianship Act [1973 \(c.29\)](#) and was amended by the Health Services and Public Health Act [1968 \(c.46\)](#), the National Health Service (Scotland) Act [1972 \(c.58\)](#), the Health and Social Service and Social Security Adjudications Act [1983 \(c.41\)](#), the Foster Children (Scotland) Act [1984 \(c.56\)](#), the National Health Services and Community Care Act [1990 \(c.19\)](#), the Children (Scotland) Act [1995 \(c.36\)](#), the Community Care (Direct Payments) Act [1996 \(c.30\)](#), the Immigration and Asylum Act [1999 \(c.33\)](#), the Community Care and Health (Scotland) Act [2002, \(asp 5\)](#), the Criminal Justice (Scotland) Act [2003, \(asp 7\)](#), the Management of Offenders etc. (Scotland) Act [2005, \(asp 14\)](#), and the Adult Support and Protection (Scotland) Act [2007, \(asp 10\)](#).

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(7) A contractor shall inform the contractor's patients about the practice based complaints procedure which it operates and give the name (or title) and address of the person specified in sub-paragraph (6)(a).

Co-operation and investigation

37.—(1) A contractor or any dentist who assists the contractor in the provision of general dental services shall cooperate with any investigation of a complaint by the Health Board in accordance with the procedures which it operates in accordance with directions given under section 2(5) of the Act⁽⁶⁾, whether the investigation follows one under the practice based complaints procedure or not.

(2) The cooperation required by sub-paragraph (1) includes—

- (a) answering questions reasonably put to the contractor or dentist by the Health Board;
- (b) providing any information relating to the complaint reasonably required by the Health Board; and
- (c) attending any meeting to consider the complaint (if held at a reasonably accessible place and at a reasonable hour, and due notice has been given), if the presence of a contractor or any dentist who assists the contractor in the provision of general dental services at the meeting is reasonably required by the Health Board.

Returns re complaints

38.—(1) A contractor whose name is included in the dental list shall provide to the Health Board by 30th June each year a return stating the number of complaints received in accordance with paragraph 36 in respect of the period of 12 months ending on 31st March of that year.

(2) In the case of a dentist who practises in partnership with one or more other dentists whose names are included in the dental list, the information referred to in sub-paragraph (1) shall be provided in respect of the partnership as a whole instead of by dentists in the partnership individually.

Professional indemnity

39. A contractor shall, if asked in writing to do so by the Health Board on whose dental list the contractor's name is included—

- (a) state whether the contractor is indemnified against claims relating to the business of dentistry carried out by the contractor, and relating to the practise of dentistry by any dentist, assistant, deputy and other dental care professional whose work the contractor directs or who is employed or engaged by the contractor;
- (b) if the contractor is so indemnified, provide documentary evidence to that effect.

Clinical audit activities

40.—(1) Subject to the remainder of this paragraph, in the relevant period a dentist on the dental list shall—

- (a) undertake at least 15 hours of clinical audit activities; and
- (b) where that dentist is of a type described in subparagraph (7), undertake at least 5 hours of clinical audit activities within the first year of the relevant period.

(2) A contractor must take reasonable steps to ensure that any dentist employed or engaged by the contractor in the provision of general dental services shall—

- (a) undertake at least 15 hours of clinical audit activities during the relevant period; and,

(6) Section 2(5) was amended by the National Health Service and Community Care Act 1990 (c.19), Schedule 9, paragraph 19(1).

- (b) where that dentist is of a type described in paragraph (7) undertake at least 5 hours of clinical audit activities within the first year of that relevant period.
- (3) A dentist shall produce such evidence which demonstrates compliance with that dentist's duties under subparagraph (1) as the Health Board or NHS Education for Scotland (as the case may be) requires.
- (4) In this paragraph—
 - “clinical audit activities” means activities (approved by NHS Education for Scotland or the Health Board) which:
 - (a) involve the systematic and critical analysis of the quality of dental care provided by the dentist, (including the processes used by that dentist for diagnosis, intervention and treatment and use of resources) and;
 - (b) have a defined start and end date, no more than 6 months apart;
 - “the relevant period” means the three year period from 1st August 2010 until 31st July 2013 (inclusive) and each successive period of three years thereafter.
- (5) Notwithstanding subparagraph (1) where a dentist joins a dental list after the first day of a relevant period, that dentist shall, from 1st August of the calendar year immediately after that dentist joins, undertake such number of hours of clinical audit activities as are proportionate (which may be zero) to the proportion of the relevant period that remains from that 1st August to the end of that relevant period.
- (6) In the operation of subparagraph (5) where that dentist is of a type described in subparagraph (7), that dentist shall, when undertaking such number of hours of clinical audit activities as are proportionate to the remainder of the relevant period, ensure that at least 5 hours of clinical audit activity are undertaken within a year from 1st August of the calendar year immediately after that dentist joins.
- (7) The type of dentist described is a dentist who has never been included in sub-part A of a dental list kept under these regulations, or any earlier form of such a list kept under any earlier similar enactment.