

Citizen Participation and Public Petitions Committee
Wednesday 26 November 2025
18th Meeting, 2025 (Session 6)

PE2187: Reinstate 6-monthly dental check-ups for state pensioners

Introduction

Petitioner David Corner

Petition summary Calling on the Scottish Parliament to urge the Scottish Government to reinstate 6-monthly dental check-ups for state pensioners.

Webpage <https://petitions.parliament.scot/petitions/PE2187>

1. This is a new petition that was lodged on 22 September 2025.
2. A full summary of this petition and its aims can be found at **Annexe A**.
3. A SPICe briefing has been prepared to inform the Committee's consideration of the petition and can be found at **Annexe B**.
4. Every petition collects signatures while it remains under consideration. At the time of writing, 30 signatures have been received on this petition.
5. The Committee seeks views from the Scottish Government on all new petitions before they are formally considered.
6. The Committee has received submissions from the Scottish Government and the petitioner, which are set out in **Annexe C** of this paper.

Action

7. The Committee is invited to consider what action it wishes to take.

Clerks to the Committee
November 2025

Annexe A: Summary of petition

PE2187: Reinstate 6-monthly dental check-ups for state pensioners

Petitioner

David Corner

Date Lodged

22 September 2025

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to reinstate 6-monthly dental check-ups for state pensioners.

Background information

At my age, my teeth need more attention than ever.

It was 14 months between my last 2 check-ups as my dentist went sick when I was due to attend.

In between these check-ups, both my wife and I needed dental treatment.

I feel I am being pushed towards going private.

Annexe B: SPICe briefing on PE2187

Briefing for the Citizen Participation and Public Petitions Committee on [PE2187](#): Reinstate 6-monthly dental check-ups for state pensioners, lodged by David Corner

Brief overview of issues raised by the petition

The petitioner feels that the length between dental check-ups is now too long, particularly for older people.

What has changed in NHS dental services in recent years?

From November 1, 2023, substantial reforms were made to the treatments provided by dentists offering NHS care. This was mainly to streamline and improve what had become a complex approach to both treatment offered and payments dentists could claim for different treatments. The number of 'items' of treatment was greatly reduced and rationalised to reflect a more considered approach to NHS treatment, rather than simply adding more items to the list. This is presented as the '[Statement of Dental Remuneration](#)' and is an amendment to Regulations passed in 2010 (National Health (General Dental Services)(Scotland) Regulations 2010).

The revised clinical examination

One of the key changes was to the so-called 'check up'. Previously, people would be sent a reminder to visit their dentist on an annual basis, but some dentists did this every six months. This was to become a much more thorough oral examination, as the Scottish Government, in its response to the petition points out, an Extensive Clinical Examination. The dentist can claim an amount for this examination, but it is free to the patient. This entails (note that this is information for the dentist, not the patient):

"1-(a) Extensive Clinical Examination

• Extensive clinical exam, advice, charting, and report. This should include, where appropriate:

- a medical and dental history update;
- charting of missing/present teeth and existing restorations;
- appropriate charting and/or monitoring of any malocclusion; (a bad or misaligned bite)
- a soft tissue exam;
- a caries risk assessment; ('caries' is dental decay)
- a basic periodontal exam and periodontal risk/status;

- oral hygiene status;
- temporomandibular joint (TMJ) assessment; (where jawbone attaches to the skull)
- any relevant non-carious tooth surface loss; (loss not due to decay)
- recording of information on habits affecting oral health and provision of advice (where required) on: behaviour, diet, smoking, alcohol, and drug use;
- clinical photographs, where required.

Under these new arrangements, the recall length can be set at 12, 18 or 24 months based on the overall oral health of an individual patient and clinical advice from the NHS dentist. However, this clinical examination cannot be claimed for within an 11-month period from the last appointment. This effectively means that most people will be recalled annually and not within a shorter time interval. The dentist might feel that a 'review exam' is required between these 'check-ups'.

The review exam entails:

“Review Examination

• Appointment for clinical review between examinations based on patient risk factors identified in item 1-(a). This item may include, but is not limited to, reviews:

- required between examinations;
- of trauma following initial treatment;
- of patients with high caries rates;
- of suspicious lesions;
- of periodontal status;
- of tooth surface loss;
- of temporomandibular joint (TMJ) dysfunction;
- of orthodontic status following an initial diagnostic orthodontic assessment where the patient was not ready for active orthodontic treatment.”

Guidelines and evidence for time intervals between check ups

[NHS National Services Scotland, the body that makes the payments to dentists for the work they carry out, updated the guidance about the oral health examination and diagnosis.](#)

The recommendations and guidance are based on National Institute for [Health and Care Excellence \(NICE\) guidelines](#) that were reviewed in 2020 following evidence published from a 4-year randomised control trial (RCT) study called the [INTERVAL](#)

[trial](#). The study included people from all age groups over the age of 18. The exclusion criteria for the study were:

- patients who had a medical condition indicating increased risk of bleeding
- immunocompromised patients.

“The INTERVAL trial involving regular adult NHS dental attenders has shown that a variable risk-based recall interval is not detrimental to oral health and is acceptable to patients and dentists with the potential for cost savings. Over a 4-year period, we found no difference in oral health between patient participants allocated to a 6-month or a variable risk-based interval. Nor did we find a difference between the intervals of 24-month, 6-month and risk-based recall for the 30% of adults considered suitable to be recalled at 24 months by their dentist. However, people greatly value and are willing to pay for frequent dental check-ups.”

Source: [Risk-based, 6-monthly and 24-monthly dental check-ups for adults: the INTERVAL three-arm RCT. NIHR Health Technology Assessment, Vol. 24, Issue 60. November 2020](#)

What evidence is there that older adults require more frequent check ups?

[In 2015 Public Health England carried out a review of oral health surveys of older people](#). Most of the data and information came from those living in residential care because that is where studies had been carried out. The observations from the review were:

“older adults living in residential and nursing care homes are more likely to be edentulous (without any teeth), and less likely to have a functional dentition (arrangement and number of teeth in the jaw)

· untreated caries is higher in the household resident elderly population than in the general adult population and older adults living in care homes have higher caries prevalence still, where the majority of dentate residents have active caries

· signs of severe untreated caries appear to be more common in the oldest age groups across all settings and current pain also appears to be slightly higher than in the general adult population

· periodontal (tissues around the teeth – gums, ligaments and bone) disease is most common in the age groups of 65 to 84, but due to differences in survey design it is not possible to say how this compares across settings”.

The review also points out that more older people now keep their teeth for longer (rather than having full sets of dentures) so they require more complex, surgery-based treatment. Other, [more recent research](#), reiterates this point.

Anne Jepson

Senior Researcher

29 October 2025

The purpose of this briefing is to provide a brief overview of issues raised by the petition. SPICe research specialists are not able to discuss the content of petition briefings with petitioners or other members of the public. However, if you have any comments on any petition briefing you can email us at spice@parliament.scot

Every effort is made to ensure that the information contained in petition briefings is correct at the time of publication. Readers should be aware however that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.

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Annexe C: Written submissions

Scottish Government written submission, 10 October 2025

PE2187/A: Reinstate 6-monthly dental check-ups for state pensioners

Does the Scottish Government consider the specific ask[s] of the petition to be practical or achievable? If not, please explain why.

The Scottish Government set out its position on dental examinations when it delivered NHS dental payment reform in November 2023. The requests made by the petition are not aligned with current best clinical practice guidance relating to dental examinations upon which the Scottish Government's NHS dental policy is based.

The payment reform introduced the Extensive Clinical Examination, which is based on NICE clinical guidance around the appropriate recall for dental check-ups; this information is available online: [Overview | Dental checks: intervals between oral health reviews | Guidance | NICE](#). The recall length can be set at 12, 18 or 24 months based on the overall oral health of an individual patient and clinical advice from the NHS dentist. This check-up cannot be claimed within an 11 month period from the last appointment.

An extended clinical exam can be provided to patients every 12 months but dentists are able to use their clinical discretion to recommend a longer recall frequency where this would be appropriate for the patient, or see them more frequently through a review exam. These changes, based on clinical best practice, allow dentists to use their clinical discretion so they can provide the best care possible to patients. This includes changes to examination recall times, which follow independent best practice guidelines set by NICE, allowing dentists to tailor recalls based on patients' individual oral health needs.

The key determinant of frequency of access to NHS dental services is need for care and treatment, as the policy does allow for patients to be seen more often than the Extensive Clinical Examination through the Review Appointment. The Review Appointment allows for a patient to be seen more frequently where additional risk factors have been identified that require additional oversight from the dentist.

There is an element of patient choice with regards to utilising either NHS or private care and this is a matter for discussion between the patient and clinician. However, the NHS dental service provides a full range of treatment options for NHS patient. Due to the focus under payment reform towards the clinical assessment of patients as being a key step on the way towards an NHS dental service which appropriately assesses, responds to and supports the oral health needs of every patient in Scotland.

In conclusion the NHS dental system provides for clinical best practice that is based on evidence that is reflected in the annual Extensive Clinical Examination to assess Oral Health and subsequent level of care required for each patient. No one will have reduced access to dental examinations resulting from dental reform because any patient may be seen as often as the dentist deems it clinically necessary through the Review Appointment.

What, if any, action the Scottish Government is currently taking to address the issues raised by this petition, and is any further action being considered that will achieve the ask[s] of this petition?

The Scottish Government does not consider that the issues raised in this petition require remedial action.

Annual examinations supported by needs based clinical review appointments provides NHS dental services with an extremely flexible ability to support individual patient oral health needs.

Petitioner written submission, 17 October 2025

PE2187/B: Reinstate 6-monthly dental check-ups for state pensioners

All that I would like to say is that I believe the present dental arrangements are “unfair”.

Why is it that some patients can pay for 6 monthly check ups and others can't because their dentist has decided against it?

Shouldn't everybody be entitled to the same options?