



*helping you to put things right*

**Dental**   
Complaints Service

*our second year*

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# our second year

*two thirds of complaints resolved  
in less than a week*

They have a lot in common: that persistent ache of toothache, and that nagging feeling that something's not quite right.

Sometimes – but rarely, given the high quality care dental professionals strive to deliver – the two coincide. A visit to your dental practice can leave you with a nagging feeling of unease afterwards. Something's not quite right.

Of course, that feeling may not result from treatment to an aching molar. It may follow the fitting of a crown, or veneers, or even a simple check-up. The point is you want to complain. What to do?

Your first step is to put your concerns to your dental practice. Generally, they're keen to know if something is wrong, and to put it right. For the first time this year, all members of the clinical dental team are registered with the organisation that regulates dental professionals in the UK, the General Dental Council (GDC). That means they're signed up to high standards about resolving complaints too.

But we're all human. Complaints are often the result of a failure in communication. If that failure persists, putting a complaint to the practice itself may not work out. And that's where the Dental Complaints Service comes in.

Launched in May 2006, the service – which is free to use – allows patients across the UK to complain about any aspect of private dental care, involving any member of the dental team. We work with you and the dental

professional to help resolve your complaint as swiftly, fairly and efficiently as possible – to “put things right”, in the words of our slogan. Launched and funded by the GDC, the service operates independently. The GDC continues to deal with issues of patient safety through its fitness to practise procedures, which are separate from the Dental Complaints Service.

Word is getting around. The Dental Complaints Service has just completed its second full year – in May 2008 – and here we report on it. We're proud of what we've achieved:

- We've dealt with more than 1,620 complaints in the year to May 2008
- That brings the total up to 3,232 complaints since the service opened its doors
- More than two thirds of complaints have been resolved in less than a week
- The average resolution time for all complaints is 13 days
- We've taken more than 12,800 calls to our local rate complaints hotline (08456 120540) over the last year – 22,500 since the service began.

We're proud of this record. We feel that our second year shows other UK public and professional services, particularly those in healthcare, how to handle complaints quickly, sensitively and cost-effectively. This is not just best practice, but a world class standard.

It's not perfect, of course. We strive always to improve. But clearly the service is highly valued by patients and professionals alike, as you can tell from the representative

quotes and illustrative case studies that stud these pages. Quotes are from our feedback files; case studies are anonymised but based on fact.

This success is down to many people. Colleagues and staff at the GDC, particularly its president Hew Mathewson and its chief executive Duncan Rudkin, have encouraged and supported us, as have my colleagues on the service's Advisory Board.

Our team of complaints advisers do an excellent job. Our volunteer panellists – we'll see more of their work in pages to come – demonstrate a commitment that continues to impress. Their contribution is hugely valued.

Finally, it's worth pointing out that it is dental professionals themselves who make the service work. They fund it, through the GDC. They support it. And they engage with it. They have made an important contribution to the success that it is.

**Derek Prentice**  
Chair, Advisory Board  
Dental Complaints Service

## what I *liked* about the service

*[Complaints adviser] was very pleasant and professional...  
They were very helpful and offered me any advice they could. They were  
a good listener and showed empathy for my situation. They pointed me  
in the right direction and the issue was then resolved. Thanks.*

(Dental professional)

*The politeness, courtesy and professionalism.*

(Dental professional)

*Swift response, courtesy and understanding our problem.*

(Dental patient)

*One person dealing with the case.*

(Dental professional)



# helping you to put things right

Helping patients and dental professionals to “put things right” between them is at the heart of the Dental Complaints Service.

So how does the service work? Well, first of all, the service is **fair, independent and impartial**.

We aim to resolve complaints as **quickly and efficiently** as possible.

We know that the longer a complaint drags on, the less likely it is to be resolved.

We’ve also made the service **easy to access**.

All you have to do is call our local rate hotline 08456 120540, or visit our website [www.dentalcomplaints.org.uk](http://www.dentalcomplaints.org.uk).

Once we know the gist of your complaint, we take a common sense, three-stage approach to resolution:

- We encourage you to return to your **dental practice** and give staff there a chance to resolve matters
- If they can’t, **our staff** try to help
- If our staff can’t help, you can put your complaint to a meeting convened **locally** and run by three of our **trained volunteers**.

Most complaints we’ve helped resolve have been about dentists, as you’d expect – they lead the dental team. Others have been about dental care professionals, such as dental hygienists.

So, you’ve called us. We’ve helped you to put things right. But how? What results can you expect?

We may encourage a dentist or dental care professional to:

- Explain or say sorry for what happened
- Refund fees, or a portion of them
- Fund treatment that helps put things right.

Sometimes, “putting things right” may be explaining to you that you haven’t got a complaint. Sometimes, that’s the way it is.

## *when a filling turns into a root canal treatment*

Retired IT project director Mr Brown visited his dentist, Mr Black, for what he thought was a routine £100 replacement filling, in line with the initial assessment he had received as a new patient just a few days earlier.

“There I was, sitting in the chair, receiving what I thought was a filling, when Mr Black declared that a filling wasn’t worth doing,” recalls Mr Brown. “I needed £695-worth of root canal treatment, and he’d already started on it. “I was uneasy and felt I’d been taken

advantage of – I’d had no time to consider whether I wanted to go ahead, or financially plan for the increased cost. And the surgery wasn’t following its own policy of getting full consent from patients.”

Mr Brown was also due to fly to the US for Christmas. Mr Black couldn’t promise to complete the work in time, so the work was completed by another dentist, who waived the initial assessment fee.

When Mr Brown complained to his original practice, pointing out that he should have been consulted prior to any changes in

treatment, it couldn’t resolve his complaint. Neither could DCS adviser Hazel Adams, so Mr Brown and Mr Black were invited to discuss the issue at a complaints panel meeting in Bury St Edmunds, which recommended a refund of £300. This was paid.

“I was very impressed with the service, particularly the panel,” says Mr Brown. “Hazel was a great help, too. The whole thing went very well.”

# building on SUCCESS

*so, our second year – how did we do?*

First, here's how you contacted us:

- We took 19,500 calls, with first-time complaints or following up complaints, compared to 16,800 for the previous year
- Some 12,800 of those calls came through our local rate complaints hotline (08456 120540); in our first year we received 9,700 complaints
- [www.dentalcomplaints.org.uk](http://www.dentalcomplaints.org.uk) got more than 144,890 "hits" from more than 11,900 users, a year-on-year increase of more than 50 per cent.

Of course, often you called us to check whether you had a complaint – it may be that you hadn't – or to complain about NHS treatment, in which case we referred you on appropriately.

Not all calls, emails and web contacts – there's a special complaints form on our website – resulted in complaints. However:

- We logged 1,623 complaints, equivalent to over 31 a week
- More than two thirds of complaints were closed in less than a week
- We held just 26 complaints panel meetings – this is our last chance to help resolve a complaint
- We know of £176,590 paid back by dental practices to patients who contacted us – there may be more as a result of private arrangements.

Dental professionals are continuing to engage positively with the service. One in 14 complaints came to us at the suggestion of

a dental professional, and several practices called us for advice about complaints.

We've said it before, and we'll say it again: the success outlined above is very much down to dentists, dental care professionals and other members of the practice team who all, given the opportunity, work hard to resolve complaints successfully.

## what I *liked* about the service

*Always felt - from day one of contact - that I would receive timely and appropriate advice and support to get issue resolved.*

(Dental patient)

*Speed and politeness.*

(Dental professional)

*Being kept up to date on all relevant proceedings by mail and phone calls, and being made to feel an individual instead of just a punter on the end of the phone.*

(Dental patient)

# 1,623

*complaints, equivalent to over 31 a week.*

# what did you complain about?

What were those 1,623 complaints about?

Ask our complaints advisers and they'll tell you that no two complaints are the same. So the answer is: every aspect of treatment and service.

The table on this page breaks down the five most common areas of complaint.

Treatment issue	Year 2	Year 1
dentures	18%	15%
crowns	16%	14%
fillings – amalgam and tooth coloured	15%	17%
root canal treatments	10%	10%
bridges	7%	9%

The top service issues reported by patients relate to cost, pain, and the attitude of dental professionals or other members of the practice team.

Who were these complaints about? Overwhelmingly, they were about dentists rather than other members of the dental team, such as dental technicians, dental hygienists, dental nurses and practice

receptionists. But that's what we'd expect. Dentists lead the team, so they're more likely to "take" a complaint. And a complaint about one of their team is more likely to be resolved locally.

Of the 1,623 complaints we logged, only 35 were about mixed private/NHS treatment, which we can address. We also got over 700 enquiries or complaints about NHS treatment and care. We redirected these appropriately.

Do any insights follow from this breakdown? We think so. Communication is key to many of these complaints. Get communication right from the start, and a complaint is less likely to result. Whenever we can, we share this with dental professionals.

## *a good professional never retires...*

Even though Mr Grey had retired as a dentist, he was determined to put things right when presented with a former patient's complaint.

Ms Pink paid £2,000 for a series of crowns and bridges, and subsequent remedial work

when they didn't work out. Having discussed her situation with Dental Complaints Service adviser Sally Reid, she asked for a refund.

"Even though Mr Grey had retired, he subsequently refunded the money in full, with a nice letter of apology," says Ms Pink.

"If it hadn't been for the Dental Complaints Service, I don't know what I would have done. I was absolutely delighted with the outcome."

The case illustrates how dental professionals can be determined to "do the right thing" even when retired.

# focus on complaints panels

First, we encourage you to go back to your dental practice to seek to resolve a complaint locally. Second, our complaints advisers try to help “put things right”.

If they can’t, our third step is to invite the patient and dental professional to a meeting facilitated by a panel of trained volunteers – two lay and one professional.

Panel meetings are our last attempt to help resolve a complaint, so the fact that there were only 26 for the year to May 2008 is good – it demonstrates how many complaints were resolved at an earlier stage. Panel meetings also illustrate how we help a patient and dental professional to resolve a complaint between themselves.

Complaints panels have been held throughout the UK, drawing on a pool of 180 trained volunteers who come from all walks of life.

All underwent some pretty rigorous initial and “refresher” training. Some sat on the 26 panels held this year.

Lay volunteers vary from a biochemist, a chartered surveyor, a medical lecturer, a full-time carer and a psychotherapist to consultants in human resources, broadcasting and manufacturing.

A number of the clinical panellists are dentists, of course, but others are drawn from other dental professions: they’re hygienists, dental nurses, therapists and technicians.

Our volunteers, both lay and clinical, come from all points of the compass within the UK: from Aberdeen to Cornwall, from Belfast to London, and various points beyond and between.

The 26 complaints panels found 17 complaints to answer. On nine occasions panellists recommended that no further action be taken in relation to the complaint.

The result of one complaints panel meeting may include more than one recommendation. Here’s a breakdown of recommendations resulting from those 26 meetings:

Specific recommendation(s) made concerning	Frequency	
	Year 2	Year 1
Refund of fees	16	8
Complaints handling best practice	3	6
Issuing /discussing treatment plans and/or costs	8	1
Record keeping – detail/contemporaneous	4	0
Working with a third-party present	0	2
Access to emergency care	0	2
Remedial treatment – financial contribution towards	0	1
Work to be carried out	0	1

*I was initially concerned about what the meeting would be like. .... I was apprehensive about whether you would be looking to please everybody. I was very impressed with how fair the discussion was and how logical and sensible the questioning was. I was pleased that the committee took a very balanced and reasoned approach.*

(Dental patient)

*I was impressed with the relaxed yet professional manner in which the meeting was conducted. Objectiveness of panel noted and appreciated.*

(Dental professional)



*dentistry isn't always an exact science*

Dentistry isn't always an exact science, as Mr White discovered. He wasn't happy with the crown he had had fitted, feeling that the bite wasn't right and his teeth weren't meeting.

His dentist, Mr Rose, took Mr White's concerns seriously enough to send him to a specialist, who, whilst confirming that the crown was aesthetically pleasing, accepted that the bite

was not identical to the previous crown, which had been replaced due to a fracture.

The specialist suggested that the crown might be replaced in order to address Mr White's concerns regarding the bite.

Mr Rose was not prepared to replace the crown himself, having explained in detail the reasons for the crown having been made to those particular dimensions.

By this time, the Dental Complaints Service had become involved. With the encouragement of DCS adviser Letishea McLean, Mr Rose agreed to pay for another dentist to do the necessary £700 worth of remedial work, even agreeing to pay in advance, so that Mr White was not inconvenienced.

"Letishea helped me through the whole process, and we agreed a mutual resolution in the end, which came as a great relief," says Mr White.

*lengthy saga finally resolved*

Ms Lemon paid £3,700 for a set of new teeth, but wasn't entirely happy with some of them, describing them as "not fit for purpose".

"The workmanship was good, but there was something about them – they just didn't feel right," she recalls. When she heard about the

Dental Complaints Service, she went straight to the phone. DCS advisor Jane Kavanagh took the call.

"Jane listened very patiently to my concerns, took down the details, and advised me on what I should do next. She was always very kind and encouraging, and always there with the next step to take."

In consideration of her unhappiness, and with Jane's help, Ms Lemon's dentist, Mr Scarlet, offered his former patient a refund of £3,200.

Given that "my upset", as she called it, had lasted long enough, Ms Lemon decided to accept the offer.

focus on

# governance

The organisation that regulates dental professionals in the UK, the General Dental Council (GDC), set up the Dental Complaints Service, but we operate independently.

However, the GDC funds us, so it appointed an Advisory Board to advise the head of the service.

Members of the Advisory Board include GDC members, as well as patient and professional representatives.



**Derek Prentice**, a lay member of the GDC, who chairs the Advisory Board.



**Meredyth Bell**, a dentist member of the GDC.



**Mike Drewry**, a lay member and representative of the Trading Standards Institute.



**Shelagh Farrell**, a dentist and representative of the Faculty of General Dental Practice.



**John Mooney**, a dentist and representative of the British Dental Association.



**David Murphy**, a lay member of the GDC.



**Mabel Slater**, a dental care professional member of the GDC.



**Gary Waller**, a lay member and consumer representative.

The members meet four times a year to review the service's progress. They review its operational progress, its customer service, its communications, how it is working to business and financial plans, and equality and diversity issues, among other things.

## what could we do to *improve* the service?

*Make people more aware of your service.*

(Dental patient)

*I obtained the details on-line. I wonder how patients without the internet obtain information.*

(Dental patient)

*I chose the cheapest option, but it is not necessarily the fairest. The patient always has the upper hand. Not sure how you can make the dentist feel about this?*

(Dental professional)

*Encourage more local resolution in disputes.*

(Dental professional)

# what next?

*we relish the challenge of identifying and implementing improvements to the service we offer; and we can and will do more to enhance it.*

To minimise the possibility of either a patient or a dental professional missing the opportunity to resolve a complaint about private dental care because they've not heard about us, we shall continue to raise awareness of the service – with the public, healthcare and other care providers, and amongst the wider dental team.

We shall forge relationships with all new regulatory bodies and commissioners of NHS dental care who are, or will be, involved in handling dental complaints. Not only do we want to refer quickly and most appropriately callers with enquiries and complaints about NHS dental care, we shall also share our expertise and experience, and strive to benefit from that of others.

Taking forward our commitment to promote and develop equality and diversity in every aspect of our work, we shall be implementing a process to enable us to assess our effectiveness. This will be by reference to outcomes (both local resolution and recommendations resulting from complaint panel meetings) for patients and dental professionals engaging with us.

And what about outcomes – what patients and the dental team actually achieve as a result of engaging with the service? To learn ourselves, and reflecting one of the original purposes of the service, we shall look at how best to categorise, review and report those results for the benefit of our customers and stakeholders.

Speed of resolution is fundamental to the service's success. We shall continue to explore, identify and implement any and every aspect of what we do to help patients, and dental professionals, resolve complaints quickly as well as effectively.

## *Lake Garda – bridge fails*

Ms Green was at Lake Garda in Italy, two days into a holiday to celebrate her 60th birthday, when the bridge replacing her two front teeth fell out. It had been inserted only a few days earlier as part of preparations for her trip.

“We finally found a dentist locally to put the bridge back in but it was a nightmare. The temporary work was done in the end, but it

spoiled the holiday, and that was a shame,” recalls Ms Green. When she returned home, she hurried off to see her dentist of five years, Mr Gold.

For one reason or another, they got off on the wrong foot. Mr Gold showed Ms Green the door. That was when the Dental Complaints Service stepped in. DCS adviser Michelle Williams encouraged a solution where a colleague of Mr Gold did the remedial work at

no cost, illustrating how the DCS can encourage an imaginative solution to a potentially intractable complaint.

“I thought the service was excellent,” says Mr Gold. “No one likes complaints, so getting help to resolve this one was really useful. It was becoming stressful, and I could feel things going out of control, but the DCS really helped us to resolve matters. I recommend the service to any and all of my colleagues.”

## *how did patients hear about the service?*

	year 2	year 1
Telephone directories	56.0%	53.5%
DCS website	10.1%	17.5%
Dental practice	7.1%	15.5%
NHS	10.6%	4.5%
General Dental Council	7.4%	3.5%
Other	6.4%	3.0%
Word of mouth	2.0%	1.5%
Radio	0.5%	1.0%

Percentages may not add up to exactly 100 due to rounding.

## *how did patients approach the service?*

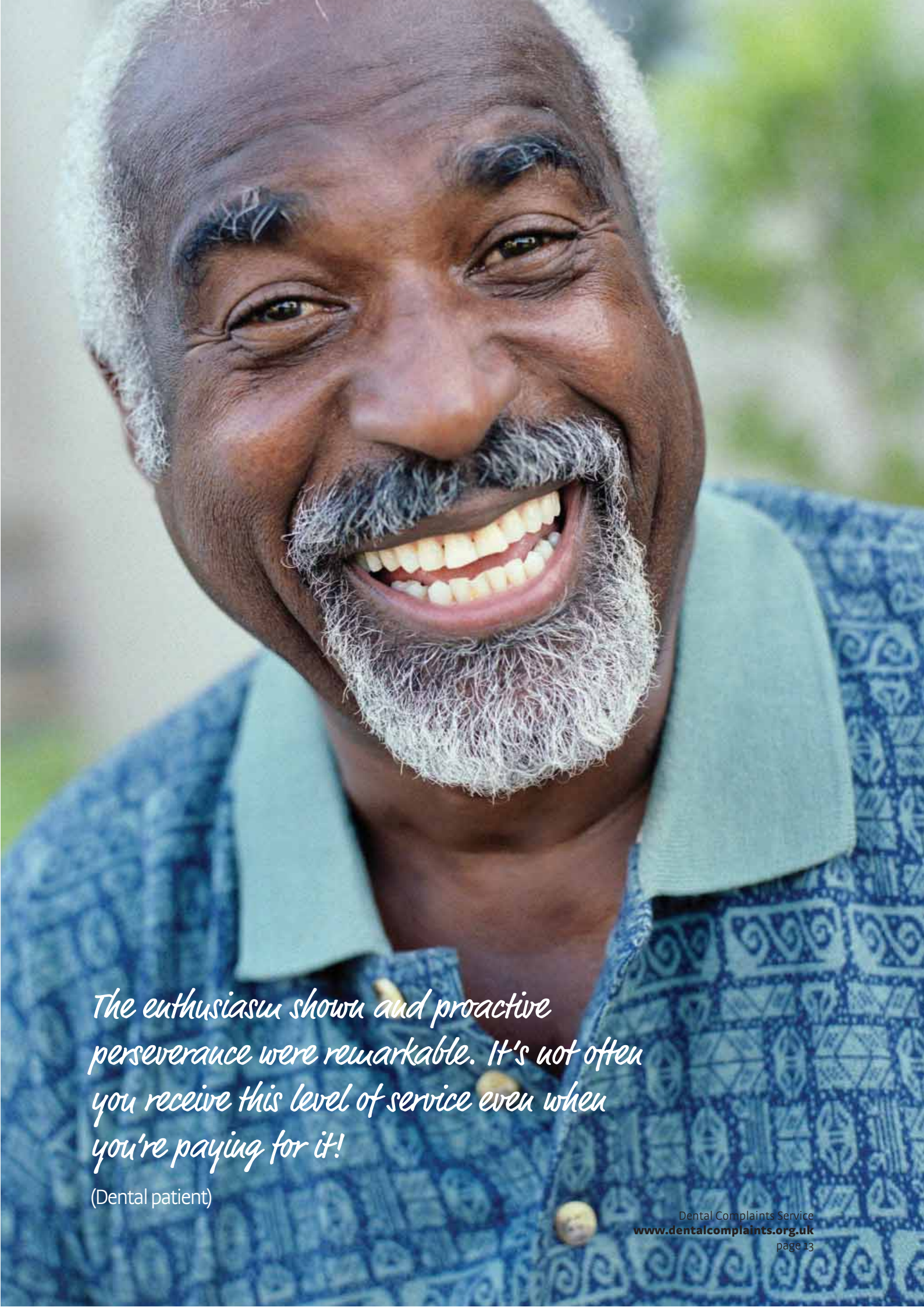
	year 2		year 1	
	number of complaints*	percentage	number of complaints*	percentage
By telephone	782	48.18%	1,343	83.47%
By email	290	17.87%	138	8.58%
By letter	421	25.94%	77	4.79%
By web form	130	8.01%	51	3.16%
	<b>1,623</b>		<b>1,609</b>	

\*The default entry on the service's complaint management system was "letter" up until 26 October 2007, and sampling was used to report distribution. The split of complaints in Year 2 is based on complaints logged since the software was amended on 26 October. Percentages may not add up to exactly 100 due to rounding.

## *how efficient was the service in handling complaints?*

	year 2		year 1	
	number	percentage	number	percentage
Complaints active at year end	59	3.64%	50	3.11%
Complaints closed within the year	1,564	96.36%	1,559	96.89%
	<b>1,623</b>		<b>1,609</b>	

The Service logged, on average, 31.21 complaints per week in its second year of operation, compared with 30.94 for the first year. Percentages may not add up to exactly 100 due to rounding.



*The enthusiasm shown and proactive perseverance were remarkable. It's not often you receive this level of service even when you're paying for it!*

(Dental patient)

## how did patients hear about the service?

	excellent	good	average	fair	poor	N/A
Finding information about the service	52	54	10	5	4	3
Year 2	41%	42%	8%	4%	3%	2%
Year 1	43%	35%	11%	3%	7%	-
Speed with which we operated	96	26	4	1	1	-
Year 2	75%	20%	3%	1%	1%	-
Year 1	87%	9%	2%	-	-	2%
Attitude and courtesy of DCS adviser(s)	108	11	5	-	1	3
Year 2	84%	9%	4%	-	1%	2%
Year 1	92%	7%	1%	-	-	-
Clarity of information	94	24	4	1	2	3
Year 2	73%	19%	3%	1%	2%	2%
Year 1	77%	20%	1%	1%	1%	1%
Recommendation(s) offered	82	31	4	3	2	6
Year 2	64%	24%	3%	2%	2%	5%
Year 1	65%	27%	2%	1%	1%	3%
Quality of service provided	94	25	3	1	3	2
Year 2	73%	20%	2%	1%	2%	2%
Year 1	78%	18%	2%	-	-	2%
Promised timescales met	80	25	5	3	1	14
Year 2	63%	20%	4%	2%	1%	11%
Year 1	73%	13%	3%	-	-	12%

Percentages may not add up to exactly 100 due to rounding.

## how did dental professionals rate the service?

	excellent	good	average	fair	poor	N/A
Speed with which we operated	13	6	1	-	-	3
Year 2	57%	26%	4%	-	-	13%
Year 1	64%	26%	-	-	-	10%
Attitude and courtesy of DCS adviser(s)	17	2	2	-	-	2
Year 2	74%	9%	9%	-	-	9%
Year 1	79%	10%	3%	-	2%	6%
Clarity of information	12	7	1	2	-	1
Year 2	52%	30%	4%	9%	-	4%
Year 1	64%	26%	3%	2%	2%	3%
Recommendation(s) offered	11	10	-	1	-	1
Year 2	48%	43%	-	4%	-	4%
Year 1	57%	26%	9%	2%	3%	3%
Quality of service provided	14	5	3	-	-	1
Year 2	61%	22%	13%	-	-	4%
Year 1	61%	29%	2%	2%	3%	3%
Promised timescales met	17	4	-	-	-	2
Year 2	74%	17%	-	-	-	9%
Year 1	66%	17%	3%	-	-	14%

Percentages may not add up to exactly 100 due to rounding.

## what information do we have about patients?

When a complaint is resolved, we send the patient an equality and diversity monitoring form, and the returned information – 76 monitoring forms were received this year, compared with 61 last year – is recorded.

The following tables compare information on ethnicity and religion supplied by patients, and collated by the service, with the data available from the UK's 2001 census:

	patients	% split of patients	census % split
British / English	99	72.3%	
Irish	3	2.2%	
Northern Irish	1	0.7%	
Scottish	3	2.2%	
Welsh	5	3.6%	
Other White background	9	6.6%	
<b>White</b>	<b>120</b>	<b>87.6%</b>	<b>92.1%</b>
White and Black Caribbean	0	0.0%	
White and Black African	1	0.7%	
White and Asian	0	0.0%	
Other mixed background	1	0.7%	
<b>Mixed</b>	<b>2</b>	<b>1.5%</b>	<b>1.2%</b>
Indian	7	5.1%	1.8%
Pakistani	3	2.2%	1.3%
Bangladeshi	0	0.0%	0.5%
Other Asian background	0	0.0%	0.4%
<b>Asian or Asian British</b>	<b>10</b>	<b>7.3%</b>	<b>4.0%</b>
Caribbean	2	1.5%	1.0%
African	1	0.7%	0.8%
Other Black background	0	0.0%	0.2%
<b>Black or Black British</b>	<b>3</b>	<b>2.2%</b>	<b>2.0%</b>
<b>Arab</b>	<b>0</b>	<b>0.0%</b>	
<b>Chinese</b>	<b>0</b>	<b>0.0%</b>	<b>0.4%</b>
<b>Iranian/Persian</b>	<b>1</b>	<b>0.7%</b>	
<b>Other ethnic background</b>	<b>0</b>	<b>0.0%</b>	<b>0.4%</b>
<b>Ethnicity not specified</b>	<b>1</b>	<b>0.7%</b>	
<b>Total</b>	<b>137</b>	<b>100.0%</b>	<b>100.1%</b>

Percentages may not add up to exactly 100 due to rounding.

	patients	% split of patients	census % split
Christian	70	51.1%	71.6
Buddhist	0	0.0%	0.3%
Hindu	3	2.2%	1.0%
Jewish	1	0.7%	0.5%
Muslim	2	1.5%	2.7%
Sikh	0	0.0%	0.6%
Other	0	0.0%	0.3%
<b>All religions</b>	<b>76</b>	<b>55.5%</b>	<b>76.8%</b>
<b>No religion</b>	<b>21</b>	<b>15.3%</b>	<b>15.5%</b>
<b>Not stated</b>	<b>40</b>	<b>29.2%</b>	<b>7.3%</b>
<b>Total</b>	<b>137</b>	<b>100.0%</b>	<b>99.6%</b>

Percentages may not add up to exactly 100 due to rounding.

## *where did the complaints come from?*

	complaints (%)	UK population split (%)	panels held
<b>England</b>	<b>90.38%</b>	<b>83.60%</b>	<b>23</b>
1. London	15.88%	12.20%	7
2. South East	22.31%	13.61%	4
3. South West	11.13%	8.38%	3
4. East of England	9.94%	9.17%	3
5. East Midlands	6.13%	7.10%	1
6. West Midlands	7.88%	8.96%	2
7. North East	2.06%	4.28%	1
8. North West	8.13%	11.45%	2
9. Yorkshire & Humberside	6.94%	8.45%	0
<b>Scotland</b>	<b>5.88%</b>	<b>8.61%</b>	<b>2</b>
<b>Wales</b>	<b>2.75%</b>	<b>4.94%</b>	<b>0</b>
<b>Northern Ireland</b>	<b>1.00%</b>	<b>2.87%</b>	<b>1</b>
<b>Total</b>	<b>100.01%</b>	<b>100.02%</b>	<b>26</b>

The table above compares the percentage split between the constituent parts of the UK, and regions in the case of England, of complaints logged in the service's second year of operation against the percentage split of UK population as recorded in the 2001 census. The table also shows where complaints panel meetings were held May 2007 – May 2008. Percentages may not add up to exactly 100 due to rounding.



*Overall, I cannot thank the DCS enough for the help and support I received. As a patient, to have somewhere to turn was the most wonderful thing in itself.*

(Dental patient)

## what were the complaints about?

	year 2 (%)	year 1 (%)	all panels
Indirect coronal restorations	25.28%	23.91%	12
Prosthetics	18.00%	15.79%	8
Direct coronal restorations	15.20%	17.73%	8
Endodontics	10.32%	10.23%	2
General practice	9.52%	12.09%	6
Implants	5.52%	4.97%	4
Oral surgery	4.88%	5.37%	nil
Veneers	4.56%	3.75%	4
Orthodontics	3.44%	2.79%	nil
Cosmetic dental treatment	2.08%	0.14%	4
Periodontics	0.64%	0.88%	nil
Radiology	0.48%	0.74%	nil
Dental cosmetic surgery	0.08%	2.21%	nil
<b>Total</b>	<b>100.00%</b>	<b>100.60%</b>	<b>48</b>

The treatment types cited in each complaint allow the service to categorise complaints linked to different dental specialties. The table shows frequency of occurrence (%) for the second year of operation, compared to the results for the first year. Also, shown (in the third column) is the split of specialties, by number, which have been the subject of the 42 complaints panel meetings. Note that treatments falling in more than one dental specialty may be discussed at a complaints panel meeting. Percentages may not add up to exactly 100 due to rounding.



*helping you to put things right*

If you have a complaint about any aspect of the dental care you've received within the UK...

**...just get in touch!**

Call our local rate hotline

**08456 120540**

Or visit our website

**[www.dentalcomplaints.org.uk](http://www.dentalcomplaints.org.uk)**