

NHS Dental Services

The below information provides the details to use the online form function in Compass to enter and submit FP17O form information.

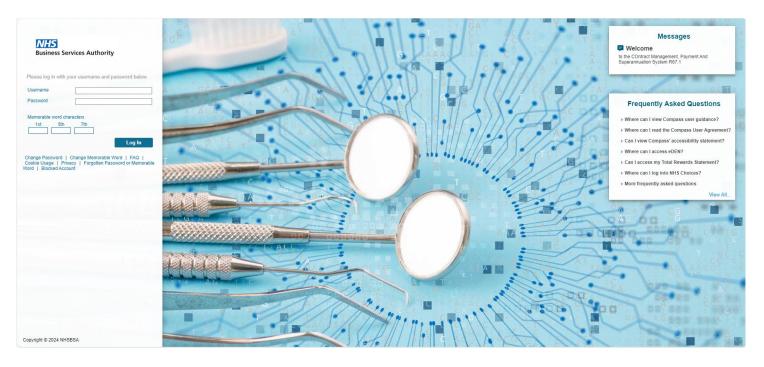
For more detail on rules associated with each of the data items on the FP17O, please refer to the "Completion of Form Guidance – FP17O" available here and select the Dental forms menu option.

Please note that the patient will need to sign a paper PR form or the electronic equivalent. The signed PR form will need to be retained by the practice as part of the patient record for a period of two years.



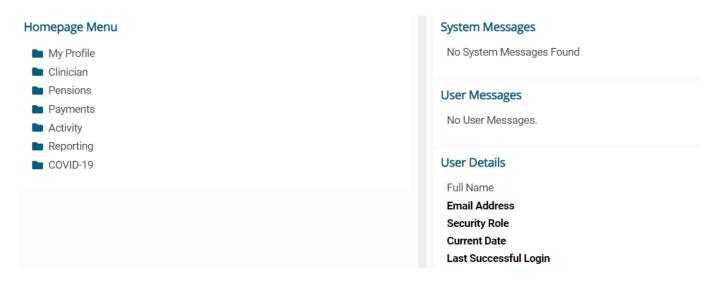
Completion of online form guidance FP170 (Clinician) - England

Log on to Compass and select Activity from the Homepage Menu:



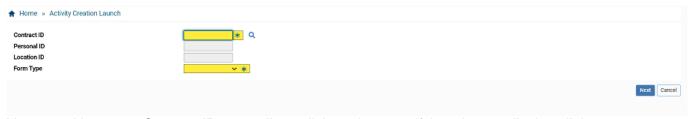


The following screen will be displayed.



PLEASE NOTE: The boxes displayed as yellow are all mandatory fields

Select Activity creation to dislpay the launch screen:



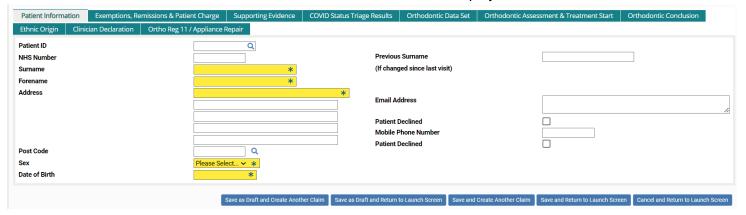
You can either enter Contract ID manually or click on the magnifying glass to display all the contracts you work on and choose the appropriate contract.

Use drop down to choose the form type (FP17O) and select "next" button.

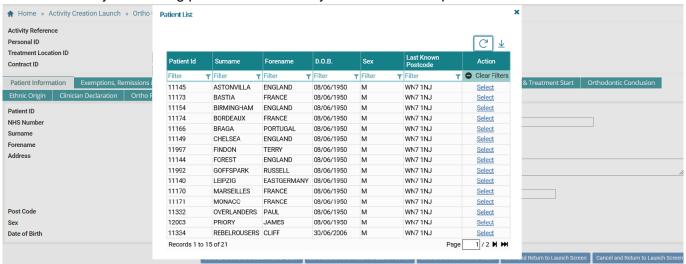


Select **Patient Information tab** and complete relevant patient information – DOB format can be either DDMMCCYY or DD/MM/CCYY.

If it is a new patient, you must enter their details manually, however, you can search for their address by entering their post code in the Post Code field and clicking on the magnifying glass next to the 'Postal address Selector'. Then select the correct address from the list displayed.



If it is an existing patient, click on the magnifying glass next to Patient ID field and this will present you with a list of all your existing patients from which you can select the patient.



This screen also allows for the recording of the optional Previous Surname, Patient's E-mail Address and Patient's Mobile Telephone Number fields. If the patient does not give an e-mail address then the "Patient Declined" box underneath must be ticked. Similarly, if the patient does not give a mobile phone number then the "Patient Declined" box underneath must be ticked.

An NHS Number must be entered. If it not known or available then zero must be entered.



Exemptions, Remissions & Patient's Charge

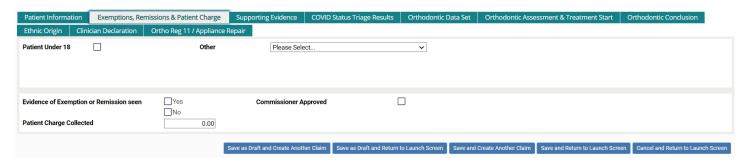
Use this tab to enter any exemption or remission appropriate for the patient concerned or to enter the patient charge collected. Only one exemption or remission category can be entered. If any exemption or remission category is entered then one of the Evidence of Exemption or Remission Seen boxes must be ticked.

For patients who are aged under 18 tick that specific exemption box.

All Other exemption categories appropriate for adult patients are now available from a drop down list. None of the fields are mandatory, but the following on-screen validation checks will take place:

- If the patient is aged under 18 at the Date of Referral* on an assessment claim then the Patient Under 18 box must be ticked
- If the patient is aged 18 or over at the Date of Referral* on an assessment claim then the Patient Under 18 box must not be ticked
- If the Aged 18 in Full Time Education box is selected then the patient must be aged 18 at the Date of Referral*
- If Partial remission HC3 Certificate is selected than there must be an accompanying non-zero patient charge entered
- If Expectant Mother or Nursing Mother is selected then the patient must be female
 - * Date of Assessment for cases where Date of Assessment is before 1st April 2019

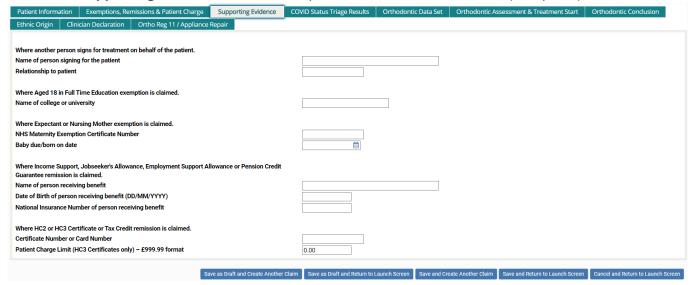
The box "Commissioner Approved" must be ticked on all assessment claims where the patient is 18 or over at the Date of Referral.





Supporting Evidence

Select the **Supporting Evidence** tab and complete with relevant information (if required)



COVID Status Triage Results

Select the **COVID Status Triage Results** tab to enter the number of Triages taken place prior to the patient attending the practice, this should be recorded against each COVID status box as required. The recording of Triage information prior to any face to face treatment is optional and no longer required for submission.



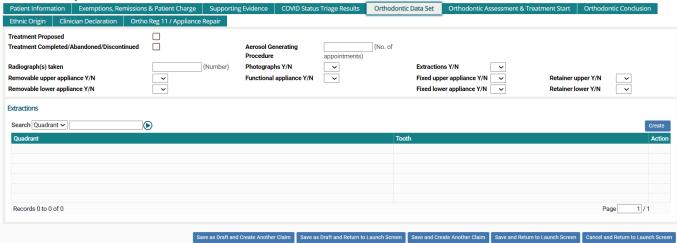


Orthodontic Data Set

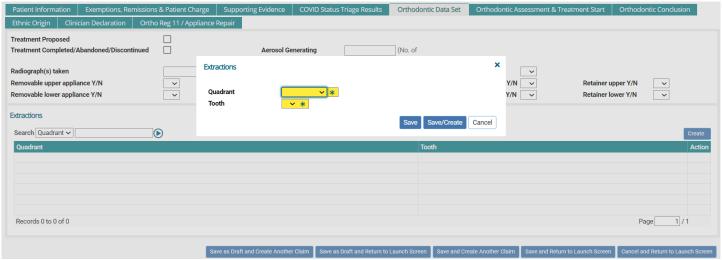
Use this "tab" to record any Orthodontic Data Set details required concerning the appliances or retainers fitted, radiographs/photographs taken or extractions made.

Tick the Treatment Proposed box for any claim involving an Assessment Appliance Fitted or tick the Treatment Completed/Abandoned/Discontinued box for any orthodontic conclusion claim.

If the Extractions box is set to Y then the tooth notations applicable to those extractions must be entered and similarly if extraction tooth notations are entered then the Extraction box must be set to Y.



For extractions each individual tooth must be recorded in a separate transaction by using the "Create" button. Select the Quadrant and Tooth notation from a drop-down list in each case. Select the "Save/Create" button to add further tooth notations or "Save" to return to the Orthodontic Data Set "tab".





Orthodontic Assessment & Treatment Start

Use this tab to record the assessment and start of treatment phase.

Select one of "Assessment & review", "Assessment & refuse treatment", "Assessment & appliance fitted" or "Assessment and Debond". Selection of one of these boxes will allow the entry of "IOTN", "Aesthetic Component" and/or "IOTN not applicable". Note that if an IOTN value of 3 is entered then an accompanying Aesthetic Component item is mandatory. An IOTN entry is now mandatory for any assessment claim. IOTN NA cannot be used for an Assess/Appliance Fitted claim and an Aesthetic Component is mandatory for such claims.

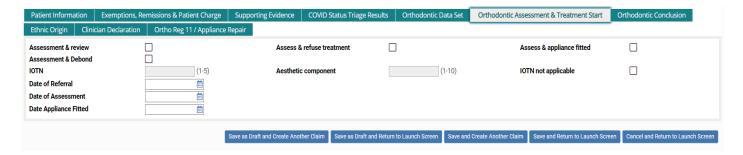
Please note for Assessment and Dedond to be claimed the following must be true.

- date of assessment is 1 October 2022 or later
- IOTN score is present or IOTN not applicable is selected
- patient is from overseas and they are unable to provide their orthodontic treatment records due to circumstances outside of their control
- patient has an orthodontic appliance
- patient has no history of NHS orthodontic treatment in England
- patient does not pay for NHS dental treatment

Date of Referral* and Date of Assessment are mandatory if anything is entered in this tab.

* - if Date of Assessment is on or after 1st April 2019

The Date of Referral must not be after the Date of Assessment. The Date Appliance Fitted must not be prior to the Date of Assessment and need only be present if "Assess & appliance fitted" is.



Orthodontic Conclusion

This tab is used when an orthodontic course of treatment has reached its end.

The Date of Completion is mandatory if anything is entered in this tab.

Select one of the tick boxes "Treatment abandoned – patient failed to return", "Treatment abandoned – patient requested", "Treatment Discontinued" or "Treatment Completed.

The "PAR scores calculated" box must be completed by entering Y or N as appropriate.

An IOTN entry is now mandatory for any conclusion claim. IOTN NA cannot be used for a Treatment Completed claim. Note that if an IOTN value of 3 is entered then an accompanying Aesthetic Component item is mandatory.



Optionally a one or two digit Pre Treatment PAR Score and/or Post Treatment PAR Score can be entered.



Ortho Reg 11/Appliance Repair

This "tab" should be used for either of the items Repair to an Appliance Fitted by Another Dentist or Regulation 11 Replacement [orthodontic] Appliance is required. It cannot be used in conjunction with any Assessment or Treatment Start or Treatment Conclusion.

The Date of Completion is mandatory if anything is entered in this "tab"



Ethnic Origin

Select this tab and complete the Ethnic Origin accordingly.



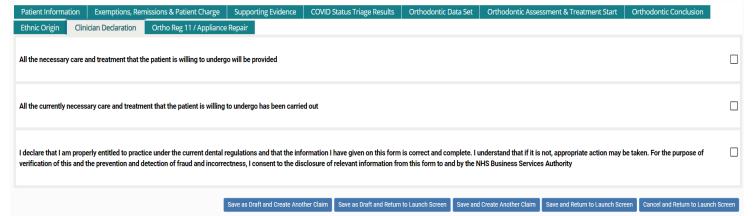
If the treatment is on-going, select either "Save as draft and create another FP17" or "Save as draft and return to launch screen" tab – claim can be finalised at a later date.



Clinician Declaration

If the treatment is completed, select **Clinician Declaration** tab and click on the relevant boxes—the claim created can only be submitted for validation if this section is completed.

Select either the "Save and create another FP17" tab or the "Save and return to launch screen" tab once the Declaration has been entered. The "Save and create another FP17" tab will take you to the creation screen for a new claim and the "Save and return to launch screen" will take you to the screen that enables you to change contract/performer details for any further claims



To authorise claims that have been created by support staff – i.e. Practice Manager or Receptionist, select "Activity" from the menu, followed by "Activity Authorisation Search" which will list the claims awaiting authorisation.