

NHS Dental Services

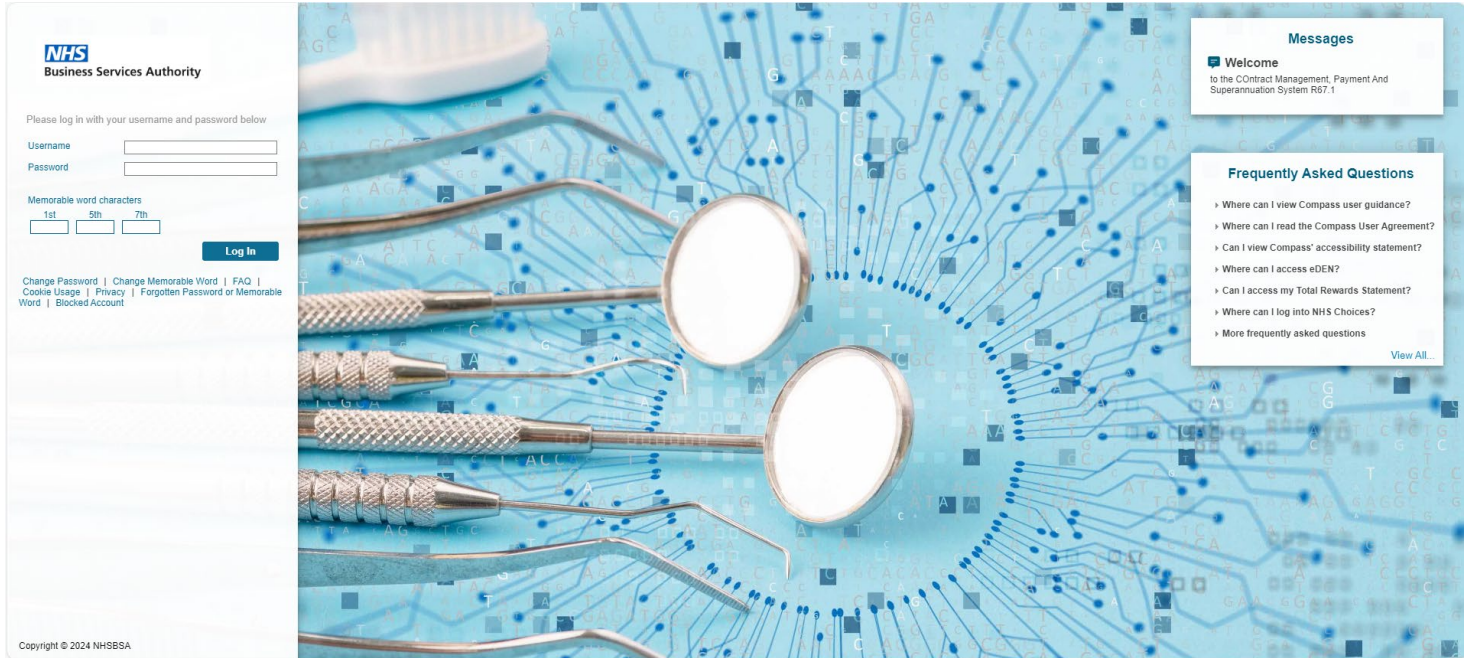
This guide provides details on how to use the online form function in Compass to enter and submit FP17O form information.

More detail on rules associated with each of the data items on the FP17O can be found on our website.

The patient must 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 FP17O (Clinician) – England

Log on to Compass



The following screen will be displayed. Select **Activity** from 'Homepage Menu'

Homepage Menu

- My Profile
- Clinician
- Pensions
- Payments
- Activity
- Reporting
- COVID-19

System Messages

No System Messages Found

User Messages

No User Messages.


User Details

- Full Name
- Email Address
- Security Role
- Current Date
- Last Successful Login

PLEASE NOTE: The boxes are marked with an asterisk are all mandatory fields



Select **Activity Creation (Clinician)** to display the Activity Creation Launch screen:

Home > Activity Creation Launch

Contract ID 

Personal ID

Location ID

Form Type  

You can enter Contract ID manually, or select the magnifying glass icon 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**.

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

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 selecting the magnifying glass next to the 'Postal address Selector'. Then select the correct address from the list displayed.

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

Patient Id	Surname	Forename	D.O.B.	Sex	Last Known Postcode	Action
11145	ASTONVILLA	ENGLAND	08/06/1950	M	WN7 1NJ	Select
11173	BASTIA	FRANCE	08/06/1950	M	WN7 1NJ	Select
11154	BIRMINGHAM	ENGLAND	08/06/1950	M	WN7 1NJ	Select
11174	BORDEAUX	FRANCE	08/06/1950	M	WN7 1NJ	Select
11166	BRAGA	PORTUGAL	08/06/1950	M	WN7 1NJ	Select
11149	CHELSEA	ENGLAND	08/06/1950	M	WN7 1NJ	Select
11997	FINDON	TERRY	08/06/1950	M	WN7 1NJ	Select
11144	FOREST	ENGLAND	08/06/1950	M	WN7 1NJ	Select
11992	GOFFSPARK	RUSSELL	08/06/1950	M	WN7 1NJ	Select
11140	LEIPZIG	EASTGERMANY	08/06/1950	M	WN7 1NJ	Select
11170	MARSEILLES	FRANCE	08/06/1950	M	WN7 1NJ	Select
11171	MONACC	FRANCE	08/06/1950	M	WN7 1NJ	Select
11332	OVERLANDERS	PAUL	08/06/1950	M	WN7 1NJ	Select
12003	PRIORY	JAMES	08/06/1950	M	WN7 1NJ	Select
11334	REBELROUSERS	CLIFF	30/06/2006	M	WN7 1NJ	Select

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. The following codes are accepted for patients who do not have an NHS number:

- 1111111111 = Non-registered UK resident
- 2222222222 = Non UK resident
- 3333333333 = Data sharing consent not given
- 4444444444 = NHS number not found (this must not be used because the patient was not asked for their NHS number)

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 select 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 then there must be an accompanying non-zero patient charge entered
- If Expectant Mother or Nursing Mother is selected the patient must be female

Tax Credit Exemption is no longer accepted on a course of treatment with the Date of Acceptance on or after 6 April 2025.

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

Patient Information | Exemptions, Remissions & Patient Charge | Supporting Evidence | Orthodontic Data Set | Orthodontic Assessment & Treatment Start | Orthodontic Conclusion | Ethnic Origin | Clinician Declaration

Ortho Reg 11 / Appliance Repair

Patient Under 18 Other

Evidence of Exemption or Remission seen Yes No Commissioner Approved

Patient Charge Collected

Save as Draft and Create Another Claim | Save as Draft and Return to Launch Screen | Save and Create Another Claim | Save and Return to Launch Screen | Cancel and Return to Launch Screen

Supporting Evidence

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

Patient Information	Exemptions, Remissions & Patient Charge	Supporting Evidence	Orthodontic Data Set	Orthodontic Assessment & Treatment Start	Orthodontic Conclusion	Ethnic Origin	Clinician Declaration
Ortho Reg 11 / Appliance Repair							
Where another person signs for treatment on behalf of the patient.							
Name of person signing for the patient			<input type="text"/>				
Relationship to patient			<input type="text"/>				
Where Aged 18 in Full Time Education exemption is claimed.							
Name of college or university			<input type="text"/>				
Where Expectant or Nursing Mother exemption is claimed.							
NHS Maternity Exemption Certificate Number			<input type="text"/>				
Baby due/born on date			<input type="text"/>				
Where Income Support, Jobseeker's Allowance, Employment Support Allowance or Pension Credit Guarantee remission is claimed.							
Name of person receiving benefit			<input type="text"/>				
Date of Birth of person receiving benefit (DD/MM/YYYY)			<input type="text"/>				
National Insurance Number of person receiving benefit			<input type="text"/>				
Where HC2 or HC3 Certificate or Tax Credit remission is claimed.							
Certificate Number or Card Number			<input type="text"/>				
Patient Charge Limit (HC3 Certificates only) - £999.99 format			<input type="text" value="0.00"/>				
Save as Draft and Create Another Claim Save as Draft and Return to Launch Screen Save and Create Another Claim Save and Return to Launch Screen Cancel and Return to Launch Screen							

Orthodontic Data Set

Use this 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.

The screenshot shows the 'Orthodontic Data Set' tab in a software interface. It includes several form fields: 'Treatment Proposed' and 'Treatment Completed/Abandoned/Discontinued' (checkboxes), 'Radiograph(s) taken' (text input), 'Removable upper/lower appliance Y/N' (dropdowns), 'Aerosol Generating Procedure' (text input), 'Photographs Y/N' and 'Functional appliance Y/N' (dropdowns), and 'Extractions Y/N', 'Fixed upper/lower appliance Y/N', and 'Retainer upper/lower Y/N' (dropdowns). Below these is an 'Extractions' section with a search bar and a table with columns 'Quadrant', 'Tooth', and 'Action'. The table is currently empty. At the bottom, there are buttons for 'Save as Draft and Create Another Claim', 'Save as Draft and Return to Launch Screen', 'Save and Create Another Claim', 'Save and Return to Launch Screen', and 'Cancel and Return to Launch Screen'.

For extractions, each individual tooth must be recorded in a separate transaction by selecting **Create**.

Select the Quadrant and Tooth notation from a drop-down list in each case.

Select **Save/Create** to add further tooth notations or **Save** to return to the Orthodontic Data Set.

This screenshot is similar to the previous one but shows an 'Extractions' modal window open. The modal has a title bar with a close button (X) and contains two dropdown menus labeled 'Quadrant' and 'Tooth', both with asterisks indicating required fields. Below the dropdowns are three buttons: 'Save', 'Save/Create', and 'Cancel'. The background form is dimmed.

Orthodontic Assessment & Treatment

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 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.

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 1 April 2019, the Date of Referral and Date of Assessment are mandatory if anything is entered in this tab.

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.

Patient Information	Exemptions, Remissions & Patient Charge	Supporting Evidence	Orthodontic Data Set	Orthodontic Assessment & Treatment Start	Orthodontic Conclusion	Ethnic Origin	Clinician Declaration
Ortho Reg 11 / Appliance Repair							
Assessment & review	<input type="checkbox"/>		Assess & refuse treatment	<input type="checkbox"/>	Assess & appliance fitted	<input type="checkbox"/>	
Assessment & Debond	<input type="checkbox"/>						
IOTN	<input type="text" value=""/>	(1-5)	Aesthetic component	<input type="text" value=""/>	IOTN not applicable	<input type="checkbox"/>	
Date of Referral	<input type="text" value=""/>						
Date of Assessment	<input type="text" value=""/>						
Date Appliance Fitted	<input type="text" value=""/>						
<div style="display: flex; justify-content: space-between;">Save as Draft and Create Another ClaimSave as Draft and Return to Launch ScreenSave and Create Another ClaimSave and Return to Launch ScreenCancel and Return to Launch Screen</div>							

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 either “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 mandatory for any conclusion claim. IOTN NA cannot be used for a Treatment Completed claim.

If an IOTN value of 3 is entered, an accompanying Aesthetic Component item is mandatory.

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

Patient Information	Exemptions, Remissions & Patient Charge	Supporting Evidence	Orthodontic Data Set	Orthodontic Assessment & Treatment Start	Orthodontic Conclusion	Ethnic Origin	Clinician Declaration
Ortho Reg 11 / Appliance Repair							
Treatment abandoned - patient failed to return IOTN <input type="text"/> (1-5)	Treatment abandoned - patient requested Aesthetic component <input type="text"/> (1-10)	Treatment discontinued IOTN not applicable <input type="text"/>	Treatment completed	Pre-Treatment PAR Score <input type="text"/>	PAR scores calculated Y/N Post-Treatment PAR Score <input type="text"/>		
Date of Completion or Last Visit <input type="text"/>							
<input type="button" value="Save as Draft and Create Another Claim"/> <input type="button" value="Save as Draft and Return to Launch Screen"/> <input type="button" value="Save and Create Another Claim"/> <input type="button" value="Save and Return to Launch Screen"/> <input type="button" value="Cancel and Return to Launch Screen"/>							

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.

Patient Information	Exemptions, Remissions & Patient Charge	Supporting Evidence	Orthodontic Data Set	Orthodontic Assessment & Treatment Start	Orthodontic Conclusion	Ethnic Origin	Clinician Declaration
Ortho Reg 11 / Appliance Repair							
Repair to appliance fitted by another contractor Date of Completion or Last Visit <input type="text"/>	Regulation 11 replacement appliance						
<input type="button" value="Save as Draft and Create Another Claim"/> <input type="button" value="Save as Draft and Return to Launch Screen"/> <input type="button" value="Save and Create Another Claim"/> <input type="button" value="Save and Return to Launch Screen"/> <input type="button" value="Cancel and Return to Launch Screen"/>							

Ethnic Origin

Select this tab and complete the Ethnic Origin.

White									
English or Welsh or Scottish or Northern Irish or British	<input type="checkbox"/>	Irish	<input type="checkbox"/>	Gypsy or Irish Traveller	<input type="checkbox"/>	Any other White background	<input type="checkbox"/>		
Mixed multiple ethnic groups									
White and Black Caribbean	<input type="checkbox"/>	White and Black African	<input type="checkbox"/>	White and Asian	<input type="checkbox"/>	Any other Mixed or Multiple ethnic background	<input type="checkbox"/>		
Asian or Asian British									
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Any other Asian background	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
Black or African or Caribbean or Black British									
Caribbean	<input type="checkbox"/>	African	<input type="checkbox"/>	Other Black or African or Caribbean background	<input type="checkbox"/>				
Other Ethnic Group									
Arab	<input type="checkbox"/>	Any other Ethnic Group	<input type="checkbox"/>						
Other									
Patient declined (pre 01/04/2026)	<input type="checkbox"/>	Ethnicity Not Stated	<input type="checkbox"/>	Patient Ethnicity Unknown	<input type="checkbox"/>				

If the treatment is on-going, select either **Save as draft and create another FP17** or **Save as draft and return to launch screen** – the 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

Patient Information	Exemptions, Remissions & Patient Charge	Supporting Evidence	Orthodontic Data Set	Orthodontic Assessment & Treatment Start	Orthodontic Conclusion	Ethnic Origin	Clinician Declaration
Ortho Reg 11 / Appliance Repair							
All the necessary care and treatment that the patient is willing to undergo will be provided							<input type="checkbox"/>
All the currently necessary care and treatment that the patient is willing to undergo has been carried out							<input type="checkbox"/>
I declare that I am properly entitled to practice under the current dental regulations and that the information I have given on this form is correct and complete. I understand that if it is not, appropriate action may be taken. For the purpose of verification of this and the prevention and detection of fraud and incorrectness, I consent to the disclosure of relevant information from this form to and by the NHS Business Services Authority							<input type="checkbox"/>
Save as Draft and Create Another Claim Save as Draft and Return to Launch Screen Save and Create Another Claim Save and Return to Launch Screen Cancel and Return to Launch Screen							

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.