

## SCHEDULES

### SCHEDULE 1

#### Information to be Supplied on an Application for Registration as a Person Who Carries on a Private Dental Practice

### PART 2

#### **Information about the private dental practice**

5. The name, address, telephone number, facsimile number (if any), and electronic mail address (if any) of the private dental practice.

6. Where the private dental practice is being operated from more than one site, the name, address, telephone number, facsimile number (if any), and electronic mail address (if any) of each site.

7. The description of the private dental practice in respect of which the applicant seeks to be registered.

8. The statement of purpose of the private dental practice.

9. A statement as to the facilities and services which are to be provided by the private dental practice including the extent of such facilities and services.

10. The date on which the private dental practice was established or is proposed to be established.

11. Details of indicative charges payable by the service users.

12. In respect of the premises to be used by a private dental practice, a description of the premises, including a statement as to whether the premises are purpose-built or have been converted for use as a private dental practice.

13. In respect of the premises to be used by a private dental practice, a statement as to whether, at the date the application is made, the premises are capable of being used for the purposes in paragraph 14 without the need for planning permission, building works, or conversion of the premises and, if the premises are not capable of such use at the date the application is made, details of the permission, works or conversion needed.

14. The purposes referred to in paragraph 13 are—

- (a) achieving the aims and objectives set out in the statement of purpose of the private dental practice; and
- (b) providing facilities and services in accordance with the statement referred to in paragraph 9.

15. A statement as to the security arrangements, including arrangements for the purposes of—

- (a) safeguarding access to information held by the private dental practice; and
- (b) restricting access from adjacent premises or, when the premises form part of a building, from other parts of the building.

**Status:** This is the original version (as it was originally made).

**16.** The name and address of any other private dental practice, which the applicant has or has had a business or financial interest, or at which the applicant is or has been employed, and details of such interest or employment.

**17.** Whether any other business is or will be carried on in the same premises as those of the private dental practice and, if so, details of that business.

**18.** Details of any Class 3B or Class 4 laser products<sup>(1)</sup> that will be used to provide dental treatment to patients including whether the required professional protocol has been drawn up and the appropriate training undertaken.

**Information about staff posts**

**19.** A list of staff posts at the private dental practice and the duties and responsibilities attaching to each post.

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(1) For the meaning of Class 3B or Class 4 laser product *see* Part 1 of British Standard EN 60825 – 1 (Radiation safety of laser products and systems). Copies can be obtained from BS1 Customer Services, 389 Chiswick High Road, London W4 4AL.