'34% of dentate adults aged 55 to 64 reported experiencing physical pain occasionally or more often compared with 26% of dentate adults aged 16 to 24.'

Another, less likely, reason for a below average score might be a disproportionate number of patients being surveyed by the practice who were attending because of an urgent dental problem. This shows that responsibility for understanding the reason for a lower score, and any action needed as a result, must rest with the practice team themselves, who alone will be able to assess all the circumstances.

Finally, it may be considered that the use of a questionnaire distributed by the practice, such as this, may help to demonstrate a commitment to the wellbeing of patients. Consequently, a tool like this might not only be valuable by informing the practice of development opportunities,

but also have value in practice marketing and promotion. Further research is needed to investigate the effect of using questionnaires such as this on patient perceptions of practices.

CONCLUSION

Patient surveys are a useful opportunity to elicit collective feedback from patients on self perceived oral health. When results are benchmarked they can inform practices, particularly when reviewed together with additional relevant data, of opportunities to develop clinical services to produce still higher standards of oral health and wellbeing for their patients.

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Erratum

Research article (*BDJ* 2012; **213**: E17) and Research summary (*BDJ* 2012; **213**: 512–513)

'A school-based epidemiological study of dental neglect among adolescents in a deprived area of the UK'

In the above Research article and its associated summary, the author affiliations should have read as follows:

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We apologise for any confusion caused.