Dental Tribune

The World's Dental Newspaper · United Kingdom Edition

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News in brief

Price rise

The government is to increase the cost for simple and intermediate dental treatment but complex dental treatment will be frozen at the existing rate. Health minister Dawn Primarolo revealed changes to the costs of some dental treatments. The cost of a dental check-up on the NHS in England will increase by 30p to £16.50. The cost of simple treatments involving examinations, advice, X-rays or a scale and polish will go up from £16.20 to £16.50. The charge for intermediate treatments, such as fillings or extractions, will rise from £44.60 to £45.60. However the maximum charge for 'complex' NHS dental treatments, such as the fitting of crowns, bridges or dentures, will be frozen at the existing rate of £198.

Star levels

Denplan has won the Best Companies' Three Star Accreditation for employee engagement for the fourth year running. The star-rating accreditation scheme is run by Best Companies, the organisation behind the *Sunday Times* list of 100 Best Companies to Work For. Steve Gates, managing director of Denplan, called the award a 'real testament to the team here at Denplan, which continually goes that extra mile and rises to new challenges'.
Practice Plan Limited was also named as an 'outstanding' company to work for. The company was recently awarded two-star accreditation. Nick Dilworth, managing director, said, 'The Best Companies Award is purely based on employee feedback so this is something we should all be very proud of.' The star levels are based upon the level of employee engagement, as demonstrated by fifty-four questions in the annual Sunday Times questionnaire. One star means first class, two stars means outstanding and three stars means extraordinary.

GDC consultation

The General Dental Council is holding a consultation on Student Fitness to Practise guidance. The aim of the guidance is to help dental schools and other training providers of registrable qualifications deal with issues that may arise during a student's course of study, and which call into question whether they are fit to practice. The consultation will run for three months. The deadline for responses to the consultation is 5pm on 26 May. For more information go to ***http://www.gdc-uk.org***

Money matters

Staff cuts
It's never easy pushing staff out the door when the going gets tough, but it helps if you wise up on the do's and don'ts of it all.

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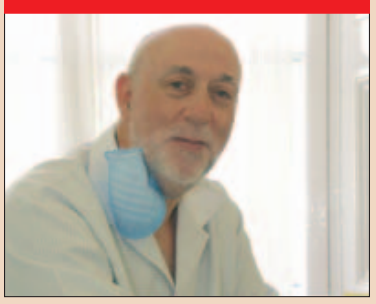
Interview



Dr Scher
Read how one man's dream of being a busy dental specialist not only came true but is also more thrilling than the actual dream!

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Education

Stay calm
Insomnia, lack of appetite and butterflies in the stomach are all symptoms which turn up just in time for the oral exams, but worry not.

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Interview

Magic methods
Read how an operation which took two hours and 30 minutes to insert mini-implants into a patient's mouth was edited down to three minutes.

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'We want commitment' say campaigners

Anti-fluoride campaigners are challenging the chief dental officer to accept personal liability, if anyone suffers side effects, when water fluoridation goes ahead in Southampton and other areas that decide to pursue the same policy.

Fluoridation is a hot topic at the moment, after South Central Strategic Health Authority took the decision to add fluoride to water in Southampton and the surrounding area, against the wishes of many residents and campaigners.

The government is pushing the policy, and health secretary Alan Johnson has called on all primary care trusts (PCT) to consider the move.

The campaigners are mirroring a similar challenge in Australia, when an anti-fluoride campaigner challenged the state premier of Queensland to back up her claims that there are no side effects to fluoridated water by signing a letter accepting responsibility if she was proved wrong.

In front of around 200 shocked people at a public meeting, Ms Bligh signed a document which read: 'I, Anna Bligh, as the instigator of forced fluoridation in Queensland, give my personal guarantee that fluoridation causes no adverse health effects, and in the event that it does, I will accept full liability and will provide financial compensation.'

The process to fluoridate the water supplies of 3.7m Queensland residents began late last year and was introduced by state premier Anna Bligh – great-great-great-great-granddaughter of William Bligh, the captain of HMS Bounty during the famous mutiny in 1789 – shortly after she took office.

Around 70 per cent of Australians already receive fluoridated water, and Ms Bligh claimed there was no evidence of any side effects and, in the face of opposition, introduced it in her state.

Anti-fluoride campaigners in the UK would like to see a similar commitment to accept personal responsibility from health chiefs here, or senior politicians who have backed fluoride, like Health Secretary Alan Johnson or even Gordon Brown.

Doug Cross, from UK Councils Against Fluoridation, said: 'Would Mr Brown, or the chief dental officer like to approach a bank and take out a loan to cover themselves for this? Maybe they would like to offer us their assurances that, like mercury vapour from tooth fillings, fluoride is indeed safe, and they will put their own houses and personal wealth on the line as surety for the practice that they are trying to force on the British public?'

Meanwhile in Suffolk, health chiefs are waiting for the results of a tooth decay survey before it decides whether to use fluoridation to combat tooth caries.

NHS Suffolk's consultant in dental public health, Richard Ward, said the trust would not make any decision until it got the results from a large survey of tooth decay in five-year-olds in the county.

He added: 'The survey will show us where the dental decay is and then we can think about the best way of dealing with it. There are a number of ways of dealing with dental decay such as tooth brushing schemes. We always have fluoridation in mind but it is one of a number of options.'

So far the PCT has not formally discussed fluoridation.

If it decides to go ahead, the East of England Strategic Health Authority will hold a public consultation on the issue. DT

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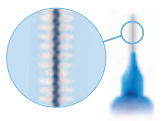

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MOLAR The oral hygiene supplier

Edward Lynch and Wyman Chan will head up the demonstration

CIC features live surgery bleaching

One of the highlights of this year's Clinical Innovations Conference is a live, hands on demonstration of surgery bleaching.

The live demonstration is part of the lecture 'Profitable Clinical Practical Dentistry' by Edward Lynch and Wyman Chan, which includes the latest practical clinical tips for successful posterior composites, bleaching plus the latest developments in tray design and the use of initiators and promoters.

The lecture will also cover predictable internal whitening, enamel micro abrasion, perfect placement of posterior composites, the best results with adhesives and the use of Ozone.

Edward Lynch is a recognised specialist in several fields including restorative dentistry and was recently elected the third most influential person in UK dentistry. Wyman Chan has trained more than 1,500 professionals across the dental spectrum and his training courses incorporate the most cutting-edge thinking.

A spokeswoman for Smile-on, which is putting on the conference, said: 'This year's conference which includes the Annenberg Lecture is set to be the best yet and delegates are strongly advised to book early to avoid disappointment.'

The conference will be held on Friday 15th and Saturday 16th May at the Royal College of Physicians, Regent's Park, London.

For more information, and to book your place, call 020 7400 8989, email info@smile-on.com or go to *www.smile-on.com* DT

Professor calls for more prevention

The head of an inquiry into dentistry has criticised the new NHS dental contract for not producing more preventative dental care.

One of the aims of the new contract introduced in 2006, was to free up time for dentists so they could spend more time with patients promoting oral health.

However, Professor Chris Drinkwater, who is carrying out a review for the British Dental Association, is concerned that in many areas this is not happening.

Professor Drinkwater, who is president of the NHS Alliance, which represents NHS staff working in the community, said: 'It seems reasonably clear that the contract is not allowing a more proactive approach to preventative dental health.'

He believes it could be because of the way the contract is being implemented and there may also be an issue with funding.

He added that clinician engagement is also problematic and it is something that needs addressing.

The inquiry was set up after the publication of a critical report by the House of Commons' Health Committee last year.

However the government, which is also carrying out its own review, claims preventative health care has 'increased substantially'.

Chief Dental Officer Barry Cockcroft said: 'Prescription of high concentration fluoride toothpaste rose by 133 per cent in 2006-7 and sales of topical fluoride varnishes have increased dramatically.'

The review was set up last month as an independent commission into NHS dentistry and is expected to produce a final report in September this year.

It is expected to concentrate on four major areas of work including innovative and flexible commissioning, integration of primary care services, developing oral health in SHA and PCT strategies and incorporating patient experience including access into commissioning. DT

Clinical photography course

The learning resources provider, Smile-on, is now offering dental practices training in how to take high-quality clinical photographs.

Its Clinical Photography Course by Chris Orr, is available on-line or as a CD-ROM, so it can be easily incorporated into and around the working day. The course introduces the role of clinical photography in effective risk management and explores straightforward solutions to treatment monitoring and how to benefit from robust medico-legal protection.

It provides two hours of Continuing Professional Development and shows dental professionals how to keep patients fully informed using high-quality images, and how to support comprehensive clinical audits.

The course explores how to get great image results, focusing on eight key clinical areas, and participants receive non-obligatory advice on available cameras and the latest in digital imaging.

A spokeswoman for Smile-on said: 'With excellent clinical photography skills, participants will be able to accurately record treatment progress and development, create 'baseline' records of presenting conditions, enjoy a higher standard of referral correspondence and use the images to support professional development.'

For more information call 020 7400 8989 or email info@smile-on.com DT

GDC issues botox warning

The General Dental Council is urging dental professionals to think very carefully before carrying out non-surgical cosmetic procedures such as Botox.

Its new guidelines are the result of a public consultation on the scope of practice of the dental team in 2008.

It sought views on what different groups of professionals could do as part of their work and what would be valid additions to conventional dentistry.

Its guidelines now state: 'Registrants choosing to offer Botox or other non-surgical cosmetic procedures should note that the General Dental Council (GDC) expects the same high standards of them, whatever the type of treatment they are carrying out.

In particular, they are advised to work within their knowledge and professional competence and be prepared to back up the decisions they make. Careful thought also needs to be given to maintaining professional standards in relation to advertising these services, and to the need to be indemnified.'

Duncan Rudkin, chief executive and registrar of the General Dental Council, called it a 'complex issue' and said: 'Our primary concern is, as always, patient protection. We urge dental professionals to think very carefully about carrying out non-surgical cosmetic procedures such as Botox.

You must be certain you are trained and competent, and that you can achieve the same high standards we expect of you in other more traditional areas.'

Registrants can contact the GDC through the Customer Advice and InformationTeam on 0845 222 4141 or email CAIT@gdc-uk.org DT

Russ Ladwa is the new dean

New dean for FGDP

Russ Ladwa has been elected dean of the Faculty of General Dental Practice.

Mr Ladwa, a general dental practitioner based in London, will take over from Richard Hayward in June.

Mr Ladwa wants to continue the Faculty's work to improve standards of patient care through education and training of the whole dental team.

He said: 'I am honoured to be called upon to serve this Faculty which has done so much to raise the profile of general practice and to serve the profession that has been so kind to me.'

Mr Ladwa has been involved with the Faculty of General Dental Practice (FGDP UK) since its early days and became a board member in 1994. In the intervening years, he has taken on the roles of examiner and assessor of several of the FGDP(UK)'s diplomas, and acted as deputy director of the Leadership and Management Certificate programme.

Mr Ladwa has twice been vice dean and has chaired the FGDP(UK)'s examinations and education committees and its international working party.

Richard Hayward said: 'Russ brings a wealth of experience and a depth of knowledge to this role. He is dedicated to the FGDP(UK)'s mission and I wish him well for the next three years.'

Mr Ladwa will be supported by vice deans Vernon Holt and Charles Ormond. DT

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GDPUK round-up

This month, the online community ponders over when the credit crunch will hit dentistry, and just how popular business coaches really are

February was a very busy month for GDPUK and its members. Discussion of how the credit crunch will affect UK dentistry was lengthy and wide ranging, leading to comments on life and career coaches who work in UK dentistry helping dentists see things from a business perspective. Scores of messages followed in support of and against business coaches, specifically and in general. This was a full-blown discussion, with some in favour, some against, and both sides putting point after point forward. The coaches themselves showed they were aware of opinions in their blogs. One such topic had more than 100 replies, and the thread was read over 3,000 times.

The ongoing Professor Steele enquiry is being followed. As he is now publishing a weekly blog himself, his points will be publicly aired well before the report sees the light of day.

Mercury in all its forms were analysed, and there was much made of the new environmental impact of the energy saving light bulbs, which have to be disposed of very carefully as they contain mercury vapour. These could be the next source of mercury getting into the human systems in the UK.

Unfortunately, a dental colleague in Northern Ireland has been charged with murder and this was discussed with sadness. Calls were made for this not to be raised, but the news was, and is, in the public domain, and GDPUK reported only that.

Colleagues were also unhappy to read a rumour that the Review Body might only offer a 1.5 per cent rise in fees/contract values for NHS dentistry. It was however, a rumour, and the actual result of this review has not been published at the time of writing.

Amid all the chaos, humour still abounds on GDPUK, and a recent posting of a classic Swedish video of TM joint dissection was listed as concerning the 'yoint'. This was mocked by another colleague who posted a video of the Swedish chef from *The Muppets* we all remember from a few years ago. You have to see it to have a laugh. DT

About the author

Dr Anthony V Jacobs
started the GDPUK emailing list in 1997, and the group membership is now just under 2,000. The list is read in all corners of the UK dental profession as well as by laboratories, and the trade and dental industry. Qualifying in London in 1979, Dr Jacobs is now in partnership with Dr Stephen Lazarus, practicing at 406 Dental in Manchester. He enjoys his profession, and takes pride in providing both simple and complex gentle dentistry, as well as caring for families in a relaxed atmosphere. Dr Jacobs has a long-term commitment to continuing professional development, both for himself, and for the profession in general through his mailing list. He has been a member of the British Dental Association (BDA) since 1975, and is presently chairman of the Bury and Rochdale Oral Health Advisory Group, as well as vice chair of the Bury and Rochdale Local Dental Committee (LDC). Dr Jacobs also sits on the committee and helps to organise the annual conference of Local Dental Committees.

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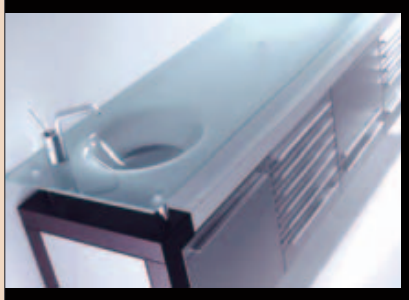

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More training for dental nurses

Dental nurses will have the opportunity to train up on how to apply fluoride varnish, as part of an initiative by the University of Central Lancashire in partnership with Colgate.

The partnership between North Western Deanery, the University of Central Lancashire (UCLan) and Colgate, has led to the training programme for registered dental nurses, enabling them to study part-time towards a Certificate in Oral Health and Application of Fluoride Varnish.

The aim of the university certificate is to prepare registered dental nurses to deliver evidence-based oral health advice and apply fluoride varnish.

The importance of fluoride varnish in preventing caries in both permanent and primary dentition is mentioned in the Department of Health's '*Delivering Better Oral Health* – An evidence-based toolkit for prevention'.

Speaking at the launch last week, Dr Barry Cockcroft, Chief Dental Officer for England, said: 'The toolkit '*Delivering Better Oral Health*' underpins the role of the whole dental team in preventing dental disease and moves the focus away from treatment of existing disease to positively improving oral health.

Modern high quality dentistry provides a wide range of opportunities for all trained dental care professionals to take an active part in supporting patients to achieve healthy functioning mouths.

The launch of this collaborative approach to the training of dental nurses to apply fluoride varnish through the Certificate in Oral Health and Application of Fluoride Varnish is very welcome, and provides an excellent model to support the preventive dental team.'

Eileen Martin, pro vice-chancellor and dean of the Faculty of Health and Social Care at the University of Central Lancashire, called the programme a 'result of true collaborative working' and said: 'This new development for our state-of-the-art School of Dentistry will have national appeal, meeting the learning needs of dental professionals and enabling us to serve the broader dental community. It provides an exciting opportunity for dental nurses to step in to higher education.'

Donna Hough, dental workforce development lead for dental care professionals, at North Western Postgraduate Dental Deanery, added: 'There are a number of reasons registered dental nurses are the ideal choice to train to provide oral health advice and apply fluoride varnish.

Extended duties dental nurses will enhance the skill mix within the dental team by the giving of advice and application of fluoride varnish to the teeth of both children and adults in community and surgery settings.

This training will also serve as a career development opportunity that will contribute to enhanced job satisfaction and ultimately increased retention of these experienced and trained individuals within the field of dentistry.'

Michael Sload, vice president and general manager of Colgate-Palmolive (UK) Ltd, said: 'This new and exciting partnership, and resulting training programme for Dental Nurses, further underpins Colgate's commitment to supporting effective prevention as the cornerstone of modern primary dental care.'

The course is available to registered dental nurses in current employment with the support of their employer.

For further information within Cumbria and Lancashire contact UCLan course enquiries on 01772 892400. For all other areas outside Cumbria and Lancashire, please contact the Portable Training Team on 0161 665 5886. DT

'Howell' investigation branches out

Police are investigating two more deaths in connection with the Northern Ireland dentist Colin Howell, who has already been charged with two murders.

Colin Howell was charged at Coleraine Magistrates Court in Coleraine, with murdering his wife Lesley Howell and former RUC officer Trevor Buchanan nearly 18 years ago.

Police are now re-examining the death of Lesley Howell's father, Henry Clarke, who died 12 days before his daughter's death - apparently from a heart attack or some form of seizure.

They are also looking into the death of mother of two, Alexandra Hickman-Smith, 27, who was found dead at her caravan in Castlerock last November. Her family were told at the time that she had died from diabetes.

Ms Hickman-Smith owned a caravan at the same site where top dentist Colin Howell had been staying after leaving his luxury home in the seaside town last year.

A police spokesman said their investigation remained focused on the double murders but 'a number of lines of enquiry are being conducted into a range of other issues and events'.

Howell has also been charged with sexually assaulting a number of women.

He is accused of four counts of indecent assault on a woman and of unlawfully applying a stupefying or overpowering drug in order to commit an indictable offence.

Mr Howell faces a total of eight charges stretching over a period of more than ten years between March 1998 and October last year.

Last month, at least 200 letters were sent to former patients of Mr Howell by police seeking help with their investigation.

The top implant specialist has made a fortune lecturing in the Middle East and claimed he was also hired by King Abdullah II to teach his own team of dentists the latest techniques.

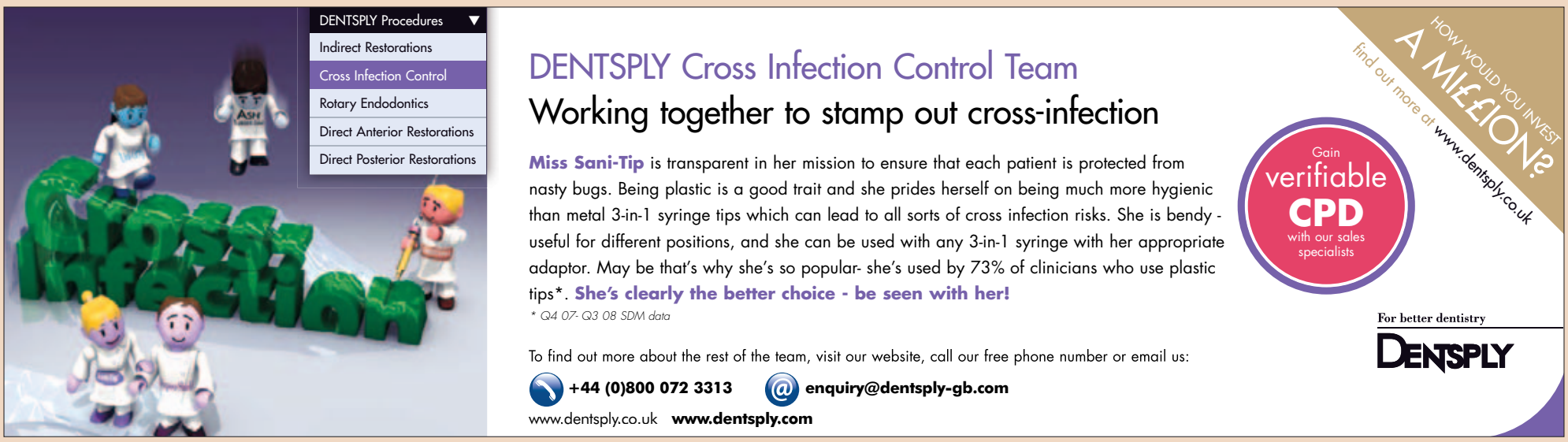
Howell boasted of his links to King Abdullah and Queen Rania in a glossy advertising campaign aimed at attracting wealthy patients from the Irish Republic.

Howell, who had surgeries in Ballymoney and Bangor, charged more than £2,000 for each dental implant and treated patients from all over Ireland, Europe and the USA.

Howell is seen as one of the foremost dental practitioners in Northern Ireland.

Dr Howell has lectured at implant conferences in Jordan and tutored final year dental students at Queens University Belfast. He also ran a cosmetic implant course for dentists who wished to restore their own implants.

He was the course tutor at Queens for core teaching of final year dental students on Dental Implants and a mentor for the Association of Dental Implantology (ADI) and the University of Salford Degree Programme. DT



Fluoridation study for East Midlands

Health chiefs in the East Midlands are carrying out a feasibility study to see if adding fluoride to the water supply will help boost dental health in the area.

The study has been commissioned to find out the advantages and disadvantages of water fluoridation.

The Derbyshire County Primary Care Trust (PCT) is one of the PCTs taking part in the study which will be published in six months' time. Each PCT will look at the results and decide if fluoridation is likely to have boost oral health.

Derbyshire County PCT has said that no decision will be made on the fluoridation of Derbyshire water until the study is done and a full public consultation carried out.

Some areas in Derbyshire already have extra fluoride in their water, with Ogston in Derbyshire in particular, being at a high natural level.

The Bolsover district, which is supplied by Severn Trent water, has had fluoridated water since 1971. This covers about 75 per cent of the district, and parts of north-east Derbyshire, but not Bolsover town itself.

In the South Derbyshire district, next to Burton on Trent, over 22,000 homes receive fluoridated water from the South Staffordshire water board, and have done so since 1987.

Ken Wragg, consultant in dental public health for Derbyshire Primary Care Trust, said: 'Derbyshire County Primary Care Trust has committed to working with other primary care trusts in the East Midlands to commission a feasibility study and economic evaluation of water fluoridation across the region.' DT

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Dentistry crisis for Scotland

There is a huge shortage of dentists in the north-east of Scotland, according to new figures from the Scottish government.

The statistics released by Public Health Minister Shona Robison in response to a parliamentary question, show that in Scotland's worst-affected area, North Ayrshire, there is only one dentist for every 1,632 residents.

Across the whole of Scotland, the ratio of NHS dentists to patients was one to 1,147 last year.

In Dundee there was 1,124 people for every dentist, with a similar figure in Angus.

While in Aberdeen, there are 1,285 people for every NHS dentist, compared with 612 for every city NHS dentist.

The ratio for residents in the Highlands and Shetland are among the best, with just 656 people in the Highlands and 666 in Shetland for every dentist.

Liberal Democrat public health spokesman Jamie Stone said the figures revealed unacceptable discrepancies across the country in getting access to an NHS dentist.

The MSP for Caithness, Sutherland and Easter Ross said: 'We need to look at schemes that are going to boost recruitment of dentists, particularly in the rural areas of Scotland.'

Miss Robison said the Scottish government was trying to tackle the crisis and mentioned the opening of the £21m dental school in Aberdeen last year.

She also said that geographical variations will take time to sort out, but claimed there are more dentists than ever working in the NHS and record numbers of people registered with a dental practice. DT

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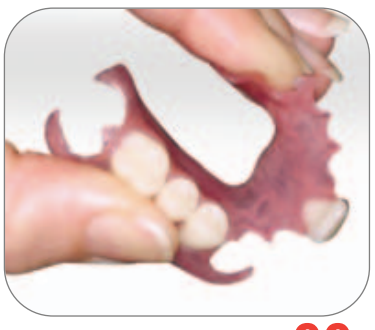

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Clean teeth boosts fertility

Brushing their teeth twice a day can boost a man's sperm count, says the British Dental Health Foundation.

The oral health charity is advising men to brush their teeth regularly after a study found that infertile men are far more likely to suffer from gum disease.

A study of 56 men aged between 23 and 52 by the Bikur Holim Hospital, Jerusalem and the Hebrew University Hadassah School of Dental Medicine found that more than half the men with low sperm counts or no sperm at all suffered from developed gum disease. Gum disease has been linked to heart disease, diabetes and strokes and now infertility.

Chief executive of the British Dental Health Foundation (BDHF), Dr Nigel Carter said: 'Brushing your teeth may not sound sexy, but this study shows its importance to male fertility.

If you want more children remember to brush your teeth twice a day!

Factor in the benefits of good oral health for an attractive smile and to stop bad breath and it's time men picked up their toothbrush.'

The BDHF begins its annual National Smile Month campaign on 17 May, highlighting gum disease's links to overall health under the slogan: 'Look after yourself, brush for health'

National Smile Month will promote the key routines for good oral hygiene. DT

More NHS dentistry for Cumbria

An additional 30,000 NHS places will be available at four new surgeries in Cumbria by the end of the year.

Hundreds of people have joined the waiting list for an NHS dentist in the area after news of the extra places.

West Cumbria already had 16,500 people on the waiting list before the announcement was made.

Purpose-built dental surgeries are being planned in Maryport and Workington under a £1.75m scheme.

The Workington practice will provide 10,000 places divided up between four dentists and the Maryport surgery will have 5,000 places and two dentists.

New surgeries will also provide 10,000 places in Whitehaven and 5,000 in Egremont. Eric Rooney, consultant in dental public health at NHS Cumbria, said: 'With over 30,000 new places on the way, we can envisage that anyone who wants to see an NHS dentist in West Cumbria will soon be able to.'

He is calling for anyone wanting NHS dental care to register by completing a Dental Direct form available at GP surgeries or visiting the website at ***www.cumbria.nhs.uk/pct***.

Patients who are on the waiting list will be informed in advance by letter about where and when the surgery near them is due to open. DT

Tooth decay admissions rise

Over 36,000 children are admitted to hospital with tooth decay every year and the figure is on the increase, according to the Conservatives.

Figures obtained by the Conservatives showed tooth decay is now the third most common reason children are admitted to hospital.

In a Parliamentary answer, health minister Ann Keen, revealed there were 36,530 admissions in 2006/07 among youngsters aged 16 and under.

However, figures for 2001/02 showed that tooth decay was not even one of the five most frequent main diagnoses.

The figures show there has been a 13 per cent rise in the incidence of hospital admissions relating to tooth decay in five years, the Conservatives said.

Shadow health minister Mike Penning, criticised the government for causing a 'significant deterioration in the country's dental health'.

The figures show there was a 13 per cent rise in the incidence of hospital admissions relating to children's tooth decay in five years said the Conservatives.

He added: 'In particular, Labour has completely failed to make any meaningful progress in terms of preventative dentistry. Regrettably, with a new contract that woefully neglects prevention, these problems will only get worse in the future. Labour need to stop dithering and take action to sort out the mess they have created of NHS dentistry.

A good place to start would be to admit their mistakes and scrap the botched dental contract.'

In 2006/07, the two most common reasons for admission among children were acute upper respiratory infections, followed by premature birth and low birthweight. Dental caries (tooth decay) was third, followed by viral infections and acute tonsillitis.

However a spokesman for the Department of Health called the allegations 'misleading' and said: 'To claim we are doing nothing on preventative dentistry is simply wrong. All NHS dental practices now have access to evidenced-based practical guidance on effective preventative treatments.' DT

Revitalise your practice interior

Patients like to experience an up-to-date, friendly and welcoming environment when they visit the dentist, so it pays to keep your practice in tip-top condition. Kathy Adams explains

Dentistry is big business. Patients no longer view visiting the dentist for a check-up as 'routine'. More discerning and demanding than ever, patients look for something to differentiate practices from one another.

To ensure your continued competitiveness in the market, it may very well mean that your practice is well overdue for a facelift. But don't panic! This doesn't necessarily mean that you are going to put yourself out financially, nor does it mean that your practice will experience any unnecessary disruption.

Design is easy

Apply the same design principles as found in retailing outlets on the high street to your practice. Carefully selecting a few choice solutions that suit your budget has the ability to transform your interior.

Transforming your practice can be as easy as changing your flooring. Hard finishes are generally used in a commercial environment and can include timber, vinyl and linoleum flooring. Competitively priced, these options require little preparation and are easy to lay and maintain. With a variety of brightly coloured and sophisticated floors available, whatever you want to achieve from your practice design is available at your fingertips.

Bright and beautiful

The use of colour is very effective in improving your practice space. Why not consider painting the majority of walls in a neutral colour and create a feature wall by picking a wall in your reception or waiting room and painting it in a strong colour? Painting the skirting, architraves or doors on the feature wall in the same colour will create a very eye catching and modern look. Additionally, colour can separate different areas of the practice, for example well-chosen fun colours can enhance a children's area.

Good-quality fittings

It is easy to avoid that domestic look by using well-made commercial fittings, materials and finishes. Choose some commercial quality seating in a great colour and tie this in with some decorative dental art and good lighting. Good lighting and a good choice of light fittings such as architectural fittings of simple steel and glass prove particularly effective can make all the difference by creating a particular mood for your practice. This is a benefit not just to your patients, but can enhance the working environment for your staff, increasing productivity, creativity and motivation.

Selling accessories

Did you know that it is possible to add several thousand pounds to your practices' profit through selling merchandise? A small, yet profitable, merchandise area can be created by painting an area on your wall and mounting on it display equipment, such as wall units or cabinets. Add some sparkle and accent lighting on your display, to create a particularly professional look. DT

About the author

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