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on building her
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Is your practice working for you?

So many principals are overworked and underpaid, **Seb Evans** says. Is it time to start making your practice work for you?

We're often led to believe that becoming a practice principal is the promised land. Whether it's years as an associate dreaming of the day you can finally call the shots or buying into a business from outside healthcare, where you can design your own surgeries and build a team that shares a specific clinical vision.

Whatever the journey to becoming a practice owner, the vision is often a lifestyle that reflects that level of responsibility. Whether that be clinical freedom, professional prestige and, of course, the financial rewards that come with being the boss.

But if we're being honest, for many, the reality looks a lot different than the dream.

I often speak to principals who are business owners but, in practice, are the most overworked employees in their own buildings.

They are the first ones in and the last ones out. They spend their lunch breaks dealing with HR fires and their weekends worrying about a broken compressor or a dip in the monthly figures.

The most frustrating part? Many of these principals find themselves time poor and – surprisingly – financially worse off than the high-performing associates at the same practice.

There is a strange paradox in modern dentistry. An associate can put their handpiece down at 5:00 PM, walk away with zero overhead stress, and take home a paycheck that rivals or exceeds that of the person who owns the practice.

The question we have to ask ourselves is – how smart are we actually being with our money?

DENTISTRY IS A BUSINESS

If business ownership isn't making you wealthier or giving you more freedom, then something in the engine is broken.

This isn't necessarily

a fault of the private dentistry model; it's usually because clinicians aren't taught how to be chief financial officers.

More often than not, they're exceptional at clinical diagnosis, but not always trained in the art of extracting money from a business in the right way.

Principals often focus so much on the clinical output that they neglect how to actually build long-term personal wealth.

It often feels a bit 'ugly' or taboo to talk about profit in a healthcare setting. It's a caring profession, after all.

But let's be direct – dentistry is a business.

If your practice isn't profitable and structured correctly, you can't invest in the best technology, you can't pay for the best staff and you certainly can't provide the best care.

For all the personal risk you take, you deserve a return that reflects that burden.

In this issue, we dive deep into this financial disconnect.

On pages 26 and 27, we hear from Sameer Patel, who discusses a vital truth – most dentists simply aren't making their personal money and their business income work for them.

He explores how to shift this in the first of a series of columns.

Your income shouldn't be the leftovers after the bills are paid. It needs to be an essential, non-negotiable part of the business cog.

My advice for this month? Stop being the last person in the practice to get any financial attention.

Look at your numbers, read Sameer's insights, and start making sure that the business you built is finally starting to work for you.



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Private Dentistry is an essential reference for dental practice development in the 21st century, focused on helping practices evolve sustainably, operate innovatively, and thrive.

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Are we heading towards a crash in dental practice goodwill values?

Chris Barrow warns that dental practice values may be heading for a crash as speculative buying begins to outpace real business performance



Focusing on fundamentals

Those fundamentals are not mysterious.

Sustainable EBITDA matters. So do recurring patient demand, clinician retention, strong middle management, clean data, robust compliance, sensible debt, and a business that does not depend on one heroic principal.

In other words, the practices and groups most likely to command premium valuations in the long term will be the ones that could still prosper if no sale ever happened.

That is a far healthier test of value than any pitch deck promising riches at the next turn of the wheel.

My plea is not for pessimism, but for sobriety. Dentistry remains an essential service and a fundamentally attractive sector. Yet attractive sectors are not immune to over-exuberance.

When narratives become too easy, when everyone claims they will sell up to someone larger, and when 'future multiple' starts to matter more than present performance, wise owners should pause.

In business, as in markets, the most dangerous words are often: 'Don't worry, there will always be another buyer.'

In every market cycle, there comes a point when a sensible trend starts to attract an irrational narrative.

In UK dentistry, the rapid rise of small dental groups is not, in itself, a problem. Consolidation can bring better systems, deeper management, improved buying power and clearer career paths.

But when expansion is driven less by patient care and operating discipline, and more by the promise of a quick re-rating on exit, it is reasonable to ask a difficult question: who, exactly, is the end buyer?

Lessons from the South Sea Bubble

That question matters because parts of the market are beginning to sound uncomfortably like a modern version of the South Sea Bubble. For those who need a refresher, the South Sea Bubble was the great British speculative mania of 1720.

Investors piled into the South Sea Company on the strength of an exciting story and the assumption that the price would keep rising because someone else would always pay more.

When confidence evaporated, valuations collapsed, and many were left holding paper wealth that could not be realised.

I am not predicting disaster, and I am certainly not arguing that all dental groups are fragile. Some are being built on real infrastructure, long-term

capital, operational excellence and a genuine commitment to clinical culture. The strongest groups are built to own well, not merely to sell well. Those businesses may prove highly resilient.

The concern lies elsewhere: in the growing belief that assembling a collection of practices is, by itself, a route to a higher Earnings Before Interest, Taxes, Depreciation, and Amortisation (EBITDA) multiple and a lucrative flip within a few years.

Scale can create value. Scale without integration, governance, leadership depth and cash discipline can simply magnify risk.

The roll-equity trap

This is where the familiar 'we'll all get rich with shares in Topco' story deserves especially careful scrutiny.

The promise can sound seductive: sell now, roll equity, wait patiently, and become significantly wealthier when the parent company sells on.

Occasionally, that may happen. But paper shares are not the same as realised value, and hope is not the same as strategy.

If too many small groups are built on the same assumption – that institutional money will always be available and that the next buyer will pay an even higher multiple – then goodwill values risk drifting away from the fundamentals that ought to support them.

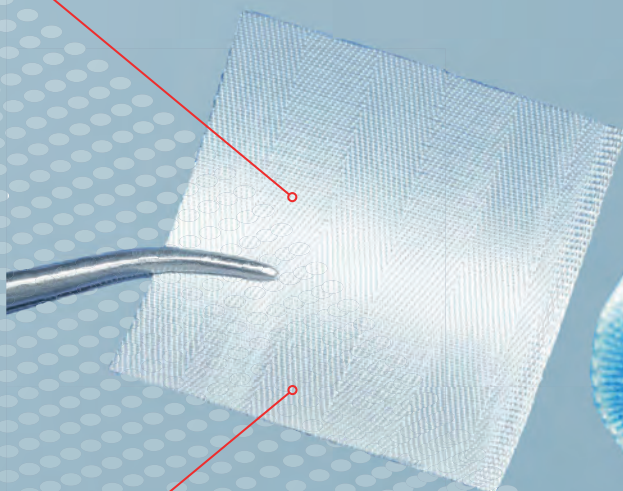
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DRMR

Manrina Rhode explains how she built a dental practice with soul

I still have moments when I walk through the door of DRMR and think, wow. Especially if I've been away for a few days, or I'm coming back from holiday, I'll step inside, look around, and feel it all over again: this is mine. I created this.

What makes it even more special is seeing it through other people's eyes. Patients, colleagues – even dentists visiting from abroad who have followed my work online – often stop in their tracks after stepping inside. When they react with that same sense of awe, I relive the excitement of building it. It still feels fresh. It still feels new.

FROM ASSOCIATE TO PRINCIPAL

My journey to this point wasn't quick. I worked as an associate for 18 years before deciding to open my own practice. Like many associates, I loved clinical dentistry. I still do – it's my favourite part of the day. It puts me into a flow state that feels effortless and fulfilling.

What I underestimated was the leap from associate to principal. I had no real concept of the sheer volume of work involved in running a business. Looking back, I almost want to revisit my former principals just to thank them. They made it look easy – I now know that it isn't. It's a huge responsibility, and the learning curve is steep.

Opening a squat practice, especially one at the top end of the market, was an intense, all-consuming experience. It challenged me in ways I hadn't anticipated. But it also accelerated my growth, both professionally and personally, in a way nothing else could have.

A PERSONAL VISION

From the beginning, I knew DRMR had to reflect me completely. That was non-negotiable.

I wanted to create something exceptional – something beautiful, distinctive and recognisable. This wasn't just about opening a clinic; it was about building an environment that aligned with my values, my

THIS WASN'T JUST ABOUT OPENING A CLINIC; IT WAS ABOUT BUILDING AN ENVIRONMENT THAT ALIGNED WITH MY VALUES, MY AESTHETIC AND MY WAY OF WORKING

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aesthetic and my way of working.

I wanted it to attract patients from all over the world – and that's exactly what has happened.

I'm actually quite risk-averse by nature. I like certainty and structure. But opening a squat practice didn't feel risky to me, because I already had patients seeking me out. I knew that wherever I went, they would come.

That gave me the confidence to focus entirely on delivering the vision. This practice has my soul in it.

Every single detail – down to the shade of gold on a door bolt – was chosen deliberately. If something wasn't right, it wasn't good enough. I couldn't build my dream and then live with compromises that would irritate me every day.

I'm incredibly detail-focused, which is why cosmetic dentistry suits me so well. I approached the design of the practice in exactly the same way I approach smile design. I didn't ask someone else to interpret my vision, I created it myself.

I thought through every moment of my working day:

- What frustrates me?
- Where are the inefficiencies?
- What could be better?

For example, I've always disliked holding a mirror up for patients during consultations. So I designed a solution: a mirror on wheels that could be moved seamlessly into place. It didn't exist, so we made it.

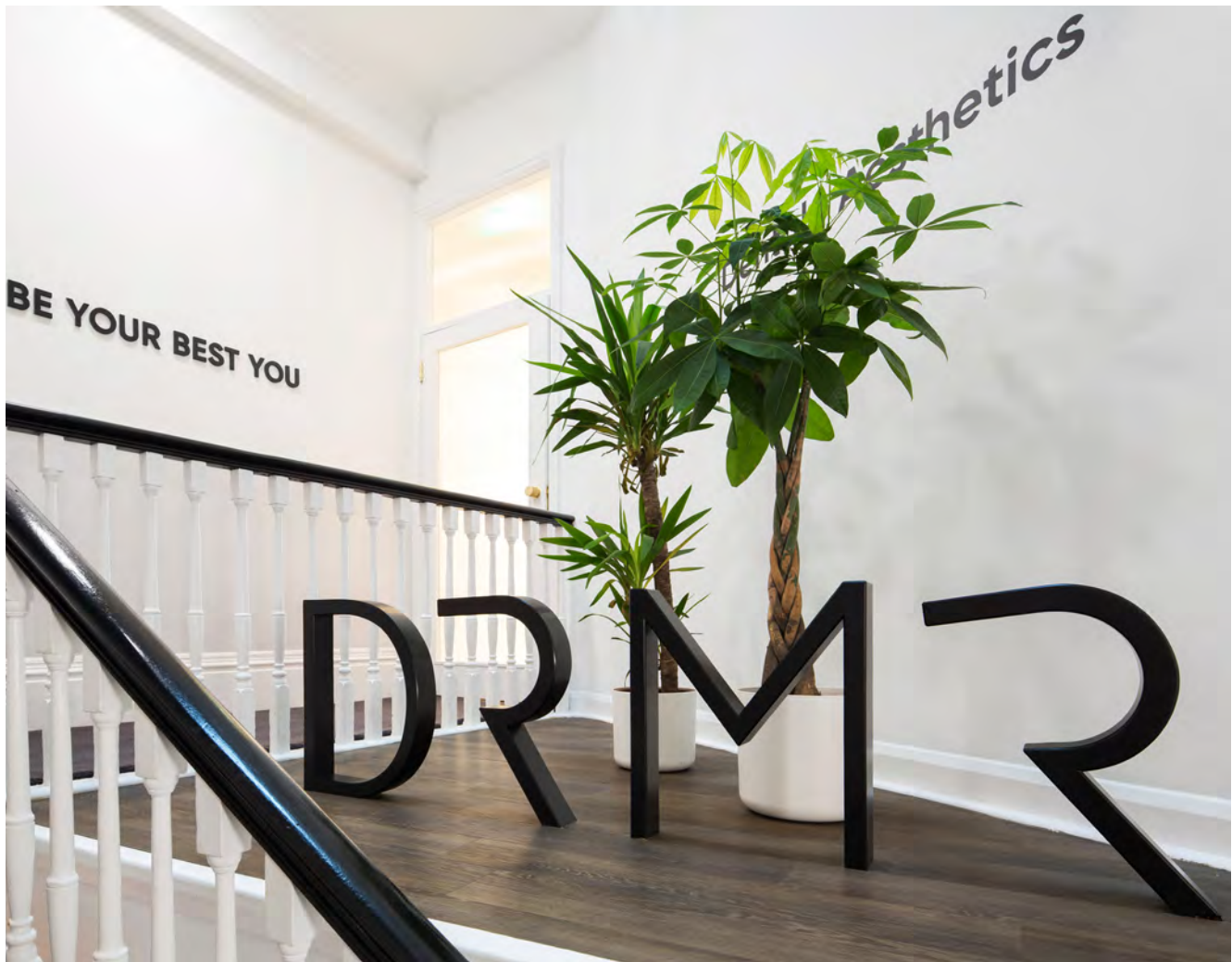
That process repeated itself throughout the build. I visualised my workflow, identified problems and designed solutions. Nothing was left to chance.



The ethos

DRMR is a chic, luxurious practice in the heart of Knightsbridge, London.

With every element meticulously designed to elevate the patient experience, the concept behind DRMR is 'Be your best you'. The state-of-the-art clinic offers a number of different treatments and services, including cosmetic dentistry, fillers, anti-wrinkle injections and skincare.



THE REALITY OF THE BUILD

The build itself was, without question, the most stressful part of the journey.

It was new territory for me, and I struggled with the unpredictability. Deadlines shifted, costs increased and plans changed.

At the time, it felt like things were going wrong, but I later realised this is simply the nature of construction. Every colleague I spoke to had experienced the same challenges.

That was a big lesson: things don't always go to plan, and that's okay.

Despite the stress, the build was also my favourite part. Seeing an idea evolve into a physical space is incredibly rewarding – and, unexpectedly, addictive. Once it was finished, part of me wanted to start all over again.

It truly takes a village to build a practice.

We held weekly project meetings with the architects, builders, project manager and equipment specialists. While principals don't always attend these, I was involved in every step.

One of the most important relationships I had during the process was with Pete Higson from RPA Dental. He understood my vision instinctively and supported me throughout, especially during the more emotional moments. When you're building something so personal that level of understanding and trust is invaluable.

Having people around you who 'get it' makes all the difference.

THE FINISHED SPACE

There are so many elements of the practice that I love, but one room stands out above all: my treatment room.

To me, it's the most beautiful surgery in the world. Every detail – from the cabinetry to the finishes – has been meticulously designed. When people walk in, there's always a moment of silence followed by: 'wow'. That reaction never gets old.





Insights from RPA Dental

From the outset, it was clear this wasn't going to be just another practice. This was about creating something truly exceptional.

The property itself – an unusual, angular space in a prominent Knightsbridge location – required careful consideration to ensure it could function effectively as a dental practice.

Initially, it was far from inspiring: a dated office with suspended ceilings, fluorescent lighting and worn carpet tiles. The key was to look beyond that and focus on the fundamentals – ceiling height, natural light and structure. Once we established feasibility, the process became about unlocking its potential.

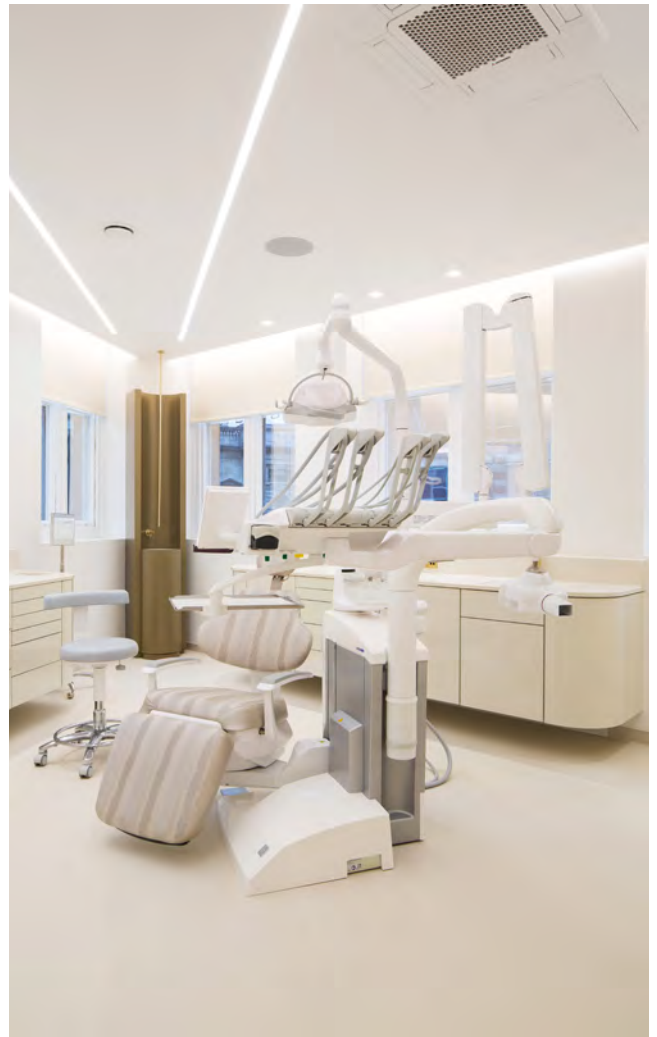
The layout demanded detailed planning. Elements such as waste systems, air conditioning and long-term maintenance had to be integrated seamlessly without compromising the design. With the right team in place, we were able to resolve these challenges and create a highly functional clinical environment.

A defining feature of the build is the resin flooring. While a significant investment, both in preparation and installation, it was essential to achieving the desired finish. It adds warmth and continuity throughout the space, elevating it beyond a standard clinical aesthetic.

Ultimately, this project was about delivering a clear, uncompromising vision – balancing technical precision with design to create a space that performs as well as it looks.

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Even the patient bathroom has its own story. The resin floor was hand-poured and mixed on-site, inspired by a technique I'd learned in a glass-making class. It's those unexpected, creative touches that bring the whole space to life.

The first six months after opening were intense. I worked constantly – often only sleeping and working, with little time for anything else. It was demanding in a way I hadn't experienced before, but it was also transformative.

This journey has changed me. It's made me more resilient, more capable and more confident. The growth has been exponential, and I wouldn't trade it for anything.

REFLECTIONS

If you're considering opening your own practice, my advice is simple: don't underestimate it.

Life as an associate can be wonderful, and there's no obligation to take this step. But if you feel a deep, persistent desire to create something of your own – something you can't ignore – then you have to do it. Just know that it won't be easy.

It will be challenging, stressful, and at times overwhelming. However, if you go into it with the right mindset, it will also be one of the most rewarding experiences of your life.

I feel incredibly proud of what I've built here.

This practice has elevated my life in ways I couldn't have imagined. It's not just a place of work, it's a reflection of who I am and what I believe in.

Would I do it again? Without a doubt!

Meaningful design in dentistry

Katie Thomas explores the shift towards empathetic practice design, where interior innovation and wellness-focused aesthetics are used to foster deeper emotional connections with patients

Dentistry might operate in a clinical setting, but despite the many regulatory hurdles, there remains plenty of scope for personal flair.

The real artistry lies in balancing the two – understanding how the space works, and then layering in design to elevate it.

Compliant materials can still feel warm and tactile, storage can be discreetly concealed and layouts designed to flow effortlessly, even under the heavy burden of CQC compliance. The real fun begins once all the technical and regulatory aspects are addressed.

A dream practice comes alive through lighting, colour, texture, and carefully considered features that highlight its unique style and branding, while clever space planning enhances the patient experience and supports growth.

So, where can you make the greatest impact with your interior design ideas to create a space that looks great and fosters those essential emotional connections? Let's explore the areas to consider.

COMFORT AND CLARITY

Practice interiors are no longer solely defined by style or trend. Instead, they are shaped by emotion, behaviour, wellbeing and inclusivity.

Spaces that look good should also feel right – and it starts with reducing

overwhelm.

Dental environments can be intense – visually, acoustically and emotionally – so the aim is to soften that experience wherever possible.

That might mean calmer lighting, better acoustic control, or creating quieter zones where people can decompress.

Clarity is also crucial, and spaces should be easy to navigate without overthinking.

Clear layouts, intuitive wayfinding, and a sense of visual order can significantly improve the overall experience. The patient journey should be seamless and free of any

barriers to care.

Then there's the idea of choice. Not everyone experiences space in the same way, so offering options, whether that's different seating types or more private waiting areas, allows people to interact with the space in a way that suits them.

True inclusivity isn't about overdesigning or overcomplicating; it's about creating environments that feel comfortable, calm, and accessible to as many people as possible, without ever losing that sense of warmth or personality.

MATERIAL HONESTY

Purposeful design is key. Natural stone, timber, clay, recycled finishes and tactile fabrics bring warmth and authenticity to interiors.

These materials foster emotional connections and ground spaces in something real and enduring. Innovative materials or technologies are currently influencing sustainable interior finishes.

There's a noticeable shift away from overly synthetic, short-life materials towards finishes that feel more intentional and, crucially, are built to last.

It's no longer about chasing trends. It's about designing spaces that still feel relevant, beautiful and robust many years down the line.

We're also seeing a big rise in low-tox paints, recycled-content surfaces, and elevated laminates that genuinely rival natural materials, giving you that warmth and tactility

THE PATIENT JOURNEY SHOULD BE SEAMLESS AND FREE OF ANY BARRIERS TO CARE



Katie Thomas

Katie is founder of wellness-focused interior design company KTM Design



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but with far better durability and hygiene performance, which is key in clinical environments.

On the technology front, it's less about anything showy and more about the quiet intelligence behind the scenes.

Thoughtful LED lighting, smart controls and energy-efficient systems – the kind of things that work hard in the background – reducing energy consumption while elevating the overall experience without you even noticing.

TEXTURE AND COLOUR

Texture can influence atmosphere, mood, and wellbeing. Incorporating materials that engage the senses, such as rattan, stone and textured plaster, in waiting areas can satisfy the desire for comfort and connection.

Patients are drawn to environments that feel grounded and human.

Spaces that support emotional balance and relaxation help foster patient confidence.

DESIGNING WITH PURPOSE MEANS CRAFTING SPACES THAT MEET REAL NEEDS, SUPPORT WELLBEING AND REFLECT EVERYONE WHO USES THEM

Colour remains one of the most powerful storytelling tools, not through bold statements but via thoughtful, layered expression.

Deep burgundies, plums and emerald greens, for example, create interiors that feel cocooning and luxurious without overpowering rooms.

Blues – often used in clinical settings because they evoke calmness, build trust and reduce stress – can enhance creativity, making them ideal for cosmetic dentistry.

And finally, shades like burnt ochre, cinnamon, clove, and deep terracotta are increasingly popular in dental interiors. These, too, add warmth and are used to add depth to cabinetry and to complement natural stone and clay finishes.

IDENTITY AND CONNECTION

There's an increasing emphasis on identity. Practices no longer want to feel generic; they want to be distinctive.

This is reflected in the materials, finishes, furniture, and lighting – every touchpoint.



A designer should interpret your brand and translate it into a physical environment so it feels cohesive, thoughtful and instantly recognisable.

That's how you create award-winning clinics that stand out.

And then there's the emotional layer, which is arguably the most important.

If a space can genuinely help someone feel calmer, more at ease, and more reassured, it completely transforms their experience.



Ultimately, a dental practice should perform optimally, but how people perceive the space is now a key design factor.

TEAM EFFICIENCY

For staff, excellent practice design involves optimising flow and functionality.

When everything is exactly where it should be, and movement through the space feels natural, operations run smoothly. When storage is intuitive, the entire day functions differently.

Excellent practice design should support those who work within it – reducing friction, saving time, lowering stress and ultimately enabling the team to focus on what truly matters – delivering great care.

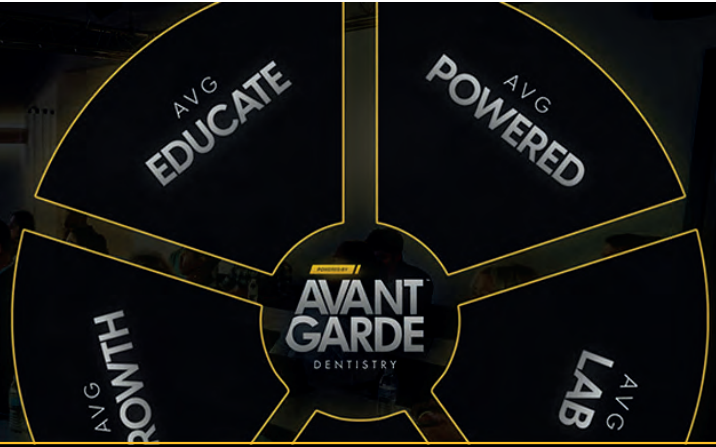
COLLABORATIVE POWER

Collaboration among designers, clients, makers and suppliers is crucial in creating meaningful spaces. Conversation fuels creativity.

Designing with purpose means crafting spaces that meet real needs, support wellbeing and reflect everyone who uses them.

This shift towards more human-centred design signals an exciting future – one where empathy, sustainability and creativity are central to every dental practice.

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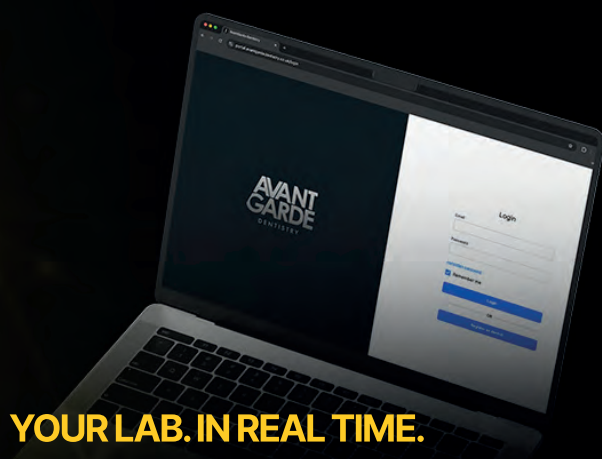


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Dr Indy Singh

Dental self-employment mastered

Minesh Patel breaks down the transition to life as a 'business of one', providing a roadmap for clinicians to master tax obligations and secure their professional future

Dental school invest thousands of hours in developing clinical competence, and the profession is rigorously trained in the delivery of patient care.

Far less time, however, is devoted to understanding what happens after the income is received.

The transition from foundation or vocational training into life as a dental associate or practising independently as a self-employed dental care professional (DCP), represents far more than a clinical milestone.

Once you enter self-employment, you are no longer simply delivering treatment; you are operating a 'business of one'. That business has revenue, costs, compliance obligations, risk exposure and strategic decision-making needs.

The most financially resilient clinicians are rarely those who earn the most.

More often, they are the ones who build sound financial systems early in their careers

MASTERING THE 'TAX POT'

One of the earliest shocks for the newly self-employed professional comes not from dentistry, but from HM Revenue and Customs (HMRC).

Unlike salaried employment, many associates and DCPs receive gross income (after direct costs, for example laboratory fees and, where applicable, superannuation contributions).

There is no PAYE system quietly



deducting tax behind the scenes.

The money landing in your account is not all yours.

A simple but highly effective discipline is to set aside approximately 30-35% of monthly income into a separate high-interest savings account; your dedicated 'tax reserve' account.

While the precise percentage will vary depending on earnings, pension contributions and student loan obligations, the principle remains; tax liabilities should be ring-fenced as income is received.

SURVIVING THE DOUBLE TAX SHOCK

For many dentists and DCPs new to self-employment, the first real financial wake-up call arrives in January of the second year.

Under HMRC's self-assessment system, many dental professionals must make 'payments on account'.

This involves paying the previous year's tax bill plus 50% of the following year's estimated liability.

Without planning, this can produce considerable cash-flow stress.

Statutory tax payment deadlines fall on 31 January and 31 July each year.

For clinicians who have not been proactively reserving funds, the January payment can feel particularly punitive; arriving shortly after the festive period, during quieter clinical months, and shortly after dentists' annual GDC fees are due.

Importantly, engaging an accountant does not remove personal responsibility. You remain legally liable for the accuracy of your tax return.

Timely submission of complete financial records is not merely courteous; it is prudent governance.

MAKING TAX DIGITAL

The UK tax landscape is entering a new phase.

From 6 April 2026, HMRC's making tax digital (MTD) framework will come into force, marking one of the most significant compliance changes for self-employed in years.

Under MTD, self-employed professionals will be required to maintain digital records and submit quarterly updates where their total gross income exceeds:

- £50,000 from April 2026
- £30,000 from April 2027
- £20,000 from April 2028.

For many dental professionals, these thresholds will already be met.

Income and expenses will now need to be tracked using MTD-compatible software, or managed digitally through an accountant.

Instead of submitting a single annual self-assessment return, clinicians will now have five reporting obligations.



Dr Minesh Patel

Dr Minesh Patel is an associate dental practitioner with a focus on financial literacy for dental professionals.

This change is more than an administrative adjustment. It reflects a broader trend; increased transparency and scrutiny by HMRC.

There is a potential upside however; maintaining contemporaneous digital records throughout the year can significantly reduce last-minute administrative pressure and provide real-time insight into cash flow and profitability.

THE HIDDEN COST OF ASSESSMENT ERRORS

Self-assessment errors are surprisingly common among the self-employed, and the dental workforce is unlikely to be immune.

Analysis by the Institute for Fiscal Studies, based on HMRC audit data, suggests that error rates among self-employed taxpayers' approach 60%, with under-reporting of income representing the most frequent issue.

While many discrepancies are relatively modest, the consequences can still be significant. Around 4% of cases involved tax liabilities exceeding £10,000, often accompanied by substantial interest charges and financial penalties.

YOUR MOST VALUABLE ASSET

Dentistry is both physically and cognitively demanding.

Musculoskeletal disorders, hand injuries, visual strain, burnout and stress-related illness are well-recognised occupational risks.

Yet income protection is often still viewed as 'optional'.

For self-employed dentists and DCPs,

Reporting deadlines will typically be:

- 7 August (for period 6 April to 5 July)
- 7 November (for period 6 July to 5 October)
- 7 February (for period 6 October to 5 January)
- 7 May (for period 6 January to 5 April) and
- 31 January (final year end return and declaration for period 6 to 5 April).

managed digitally through an accountant.

UNLIKE SALARIED NHS ROLES, THERE IS NO EMPLOYER-FUNDED SICK PAY; WHEN CLINICAL WORK STOPS, INCOME STOPS

illness or injury carries an additional financial consequence.

Unlike salaried NHS roles, there is no employer-funded sick pay; when clinical work stops, income stops.

For this reason, income protection insurance warrants serious consideration, particularly for clinicians with dependants or large fixed overheads.

Policies offering an 'own occupation' definition are especially important. These pay out if you are unable to perform clinical dentistry specifically, rather than any alternative occupation.

Most providers typically insure anywhere between 50% and 75% of gross earnings.

Although this appears restrictive, benefits are usually paid tax-free, meaning the replacement income often approximates previous net earnings.

For many clinicians a monthly replacement income may represent the more functionally appropriate form of cover, however having both policies will help financially mitigate a broader range of ill-health related scenarios.

LIFE INSURANCE AND BUSINESS CONTINUITY

For dentists and DCPs, life insurance is equally important.

This can provide a lump sum that can repay mortgages, settle personal liabilities, and provide disposable cash to loved ones. This prevents economic hardship for family members and reduces the risk of forced asset sales.

Unlike many employees, self-employed clinicians do not receive employer death-in-service benefits.

For practice owners or partners, life insurance plays a vital role as it can:

- Repay commercial mortgages, practice loans or equipment finance
- Facilitate business continuity for the entire dental team and the patients
- Fund cross-option agreements for incorporated practices and can ensure ownership transfers smoothly

without financial strain on surviving partners.

BUILDING A FOUNDATION

A dental career can span decades. The early years of self-employment are rarely about maximising income alone. They are about building systems.

Dentistry prides itself on governance, audit and documentation in clinical practice. Monetary management deserves the same structured, data-driven approach.

In part two, we will examine higher-level tax strategy, pensions, the £100,000 income trap, student loans, and the often-misunderstood mechanics of pension tax relief.

Disclaimer: This article is for general educational purposes only and does not constitute personalised financial, legal, or tax advice.

Key insurance policy considerations include:

- Policy term or duration; is the policy length. Longer terms typically carry higher premiums
- Deferred period; waiting period before benefit payments commence. Longer deferral periods reduce premiums
- Index (inflation) linking; protects the purchasing power of benefits over time, though premiums will increase accordingly
- Level cover; monthly benefit amount remains fixed throughout the policy term. Premiums are usually cheaper but level cover, but does not protect against inflationary erosion
- Guaranteed and reviewable premiums; guaranteed premiums remain fixed for the policy duration. Reviewable premiums may increase periodically, sometimes significantly. Guaranteed premiums are often initially higher, but they reduce the risk of future affordability concerns.

It is also helpful to distinguish between:

- Critical illness cover, which provides a lump sum payout on diagnosis of specified conditions; and
- Income protection, which provides an ongoing monthly benefit.

As employment law evolves, HR in dentistry is harder to ignore

Lara Brewood-Green explains how Dentistry HR provides a clearer way of handling day-to-day HR decisions

If I think about the conversations I have with practice managers and owners, HR is very rarely the thing they open with. It tends to come out more gradually.

A question about how to handle an absence. A situation that didn't feel entirely straightforward at the time. Something that's been dealt with, but still sits slightly in the background.

Most of it isn't urgent. It's just part of running a practice. And for a long time, that's been manageable.

What's changing now is the context around those decisions.

Over the next year, a number of employment law updates will come into force, covering areas such as sick pay, family leave, workplace conduct and record keeping.

None of these changes are particularly dramatic on their own. But they do bring a sharper focus to how things are handled behind the scenes.

Where things start to feel less certain

In most practices, people are doing their best to handle situations fairly. But they're doing it in real time.

You're often making decisions in between patients, or at the end of a long day, without the luxury of stepping back and working through everything in a structured way.

So, things get resolved, but not always documented as clearly as they could be, or handled in exactly the same way.

That's not a failure. It's just the reality



of how practices operate.

What we're seeing now is that this more informal approach can start to feel slightly uncomfortable as expectations shift.

Why dentistry feels different

Dentistry has always had its own rhythm.

Teams are small, people work closely together, and situations tend to feel more personal than procedural.

At the same time, there's a constant layer of regulation sitting in the background, which doesn't pause while you work through a people issue.

Most HR systems haven't been built with that in mind.

They assume time, distance and structure that simply don't exist in a busy practice. And that's often where the friction comes from.

A bit more clarity in the day to day

What most practices are looking for isn't more to do. It's a clearer way of handling what's already there.

That's exactly the thinking behind

Dentistry HR.

It's been developed to support the day-to-day reality of practice life, bringing together clear documentation, simple processes and access to experienced HR support.

Not to overcomplicate things, but to make them feel more manageable.

A more confident way forward

The changes in employment law aren't there to make things harder.

But they do highlight how important it is to feel clear about what you're doing.

For many practices, this isn't about changing everything. It's about putting a bit more structure around what's already happening.

And that, ultimately, creates more space to focus on the practice itself.



Lara Brewood-Green

Lead people consultant at Dentistry HR

Dentistry HR

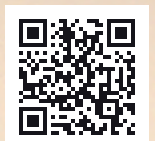
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Financial intelligence in dentistry

Part one – understanding the foundations within your practice

sameer Patel breaks down the foundations for understanding finance as a dentist or practice owner

When we talk about financial intelligence in dentistry, the instinct for many clinicians is to immediately think about numbers – revenue, profit margins, daily production and tax efficiency.

While these are important, they are not where true financial intelligence begins.

The foundation of financial success in dentistry is not financial at all, it is clinical.

The business of dentistry is, fundamentally, good dentistry.

Building value beyond your day rate

One of the most common mistakes dentists make early in their careers is focusing too heavily on what they earn per day.

While daily income is tangible and easy to measure, it is a poor indicator of long-term financial success.

What truly matters is the goodwill you are building within your practice.

Goodwill is not just a term used in practice valuations; it is the cumulative reputation and perceived



HOW YOU TAKE MONEY OUT OF YOUR BUSINESS IS JUST AS IMPORTANT AS HOW YOU EARN IT

value that patients associate with you as a clinician.

Whether you are an associate or a principal, your personal brand is being formed every single day. We create it through our communication, clinical outcomes and experiences we provide.

Patients do not measure you by your hourly rate. They measure you by how you make them feel.

Financial intelligence, therefore, begins with understanding that your income is a by-product of your clinical influence and patient trust – not the other way around.

The psychology of comprehensive care

A key shift in both clinical and financial growth is moving away from 'single-tooth dentistry' and towards comprehensive care.

Single-tooth dentistry is transactional. It solves immediate problems but rarely builds long-term value.

Comprehensive care, on the other hand, is transformational. It considers overall oral health, functional stability (including occlusion) and aesthetic outcomes.

This is where treatment planning plays such a crucial role. At its simplest, effective treatment planning can be broken down into three stages:

1. Health – eliminating disease and stabilising the oral environment
2. Function – ensuring longevity through occlusal harmony and biomechanical stability
3. Aesthetics – delivering outcomes that enhance confidence and satisfaction.

When you consistently follow this framework, your conversations with patients naturally evolve.

You are no longer 'selling' dentistry – you are guiding patients through a structured pathway to better health and confidence.

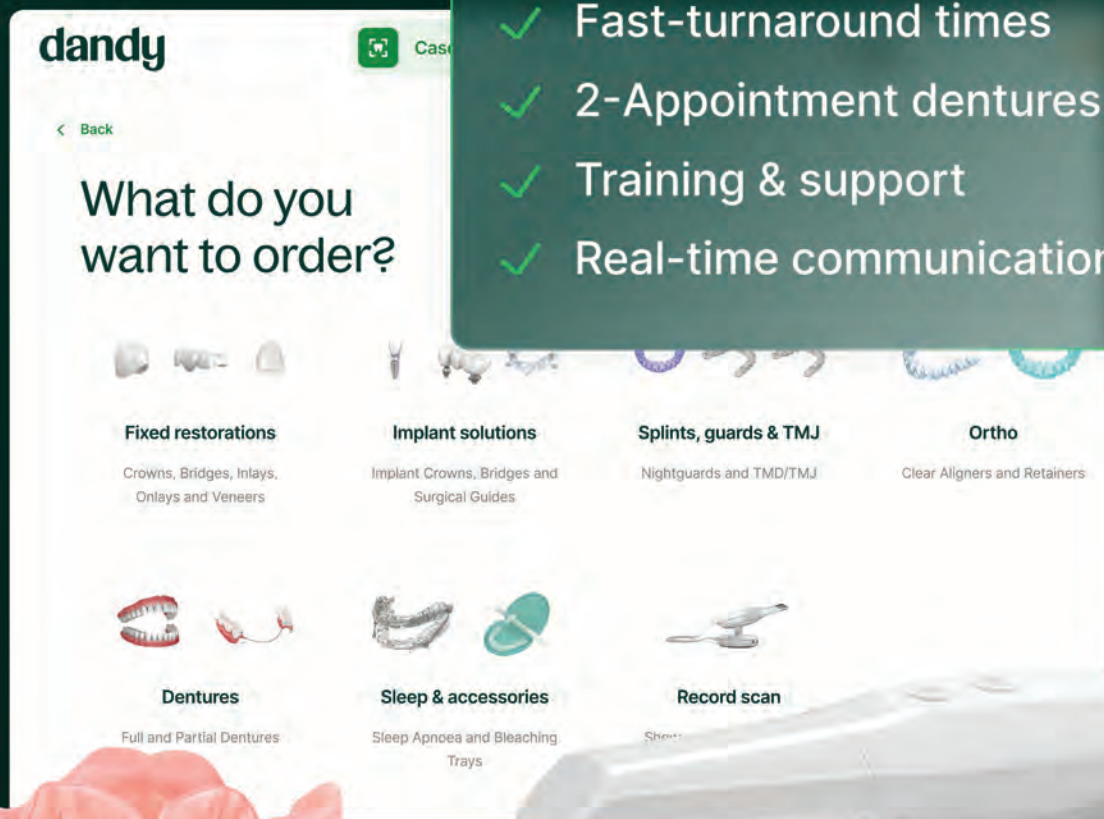
This shift is critical. Patients are far



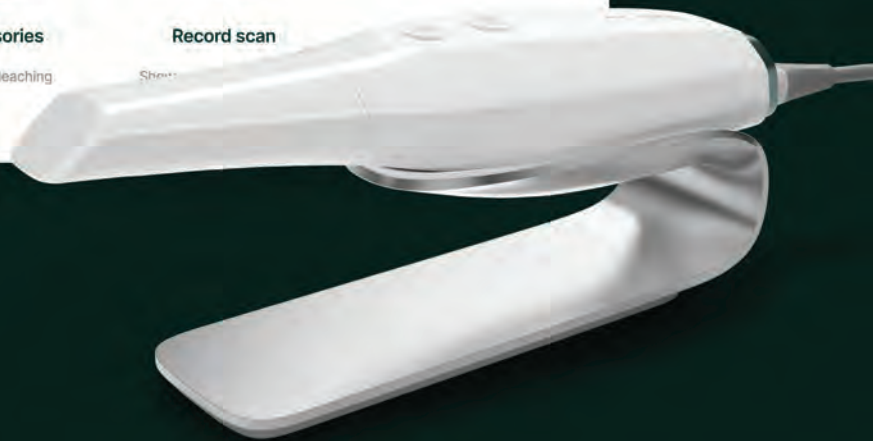
Sameer Patel
Clinical director at Elleven Dental

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more receptive to comprehensive care when they feel educated rather than sold to.

The role of photography

Clinical photography is no longer optional; it is essential.

High-quality photography allows you to show patients their current condition clearly as well as demonstrate problems they may not have been aware of. It will also help you to document and showcase your results.

Before-and-after cases are particularly powerful. They not only reinforce your credibility but also help patients visualise what is possible.

For dentists who are serious about growth, investing in photography is one of the highest-return decisions they can make.

Photography investments

- Investing in a good camera and lens
- Learning proper lighting and composition
- Attending a dedicated dental photography course
- Consistently documenting your work.

Photography enhances communication and strengthens your personal brand.

In financial terms, it directly contributes to higher-value treatment uptake and long-term patient retention.

Experience – communication – confidence

As your experience grows, so too does your ability to communicate effectively.

Patients are highly perceptive. They respond not only to what you say, but how you say it.

This element is often underestimated yet is central to financial success in dentistry.

A confident clinician who communicates clearly and demonstrates their work through photography will consistently outperform a technically competent clinician who struggles to explain their value.

Building financial awareness

Once you begin to develop clinical confidence and consistency, the next stage is to build financial awareness.

This is where many dentists fall behind – not because they lack intelligence, but because financial education is rarely taught within dentistry.

At this stage, it is important to understand a fundamental distinction – saving is not the same as investing.

Saving is about preserving capital. Investing is about growing it.

The power of investing early

Dentistry provides a unique advantage – relatively high-earning potential from an early stage in your career.

However, the real opportunity lies not in what you earn, but in what you do with it.

Investing early allows you to benefit from compound growth over decades.

Even modest, consistent contributions can grow into substantial wealth over time.

One of the most effective and often overlooked tools available to dentists is pension planning.

With the current tax structures, pension contributions can be highly efficient, offering both immediate tax benefits and long-term growth potential.

Over time, these contributions can compound into significant sums – often reaching into the millions for those who start early and remain consistent.

The key takeaway is this – financial security in dentistry is not achieved through income alone, but through disciplined, long-term investing.

Drawing income efficiently

The second component of financial intelligence within a dental practice is understanding how to extract income efficiently.

For many dentists this involves balancing salary and dividends.

A common threshold to be aware of is the £100,000 income level. Beyond this point, the effective tax rate increases significantly due to the tapering of personal allowances.

As a result, many dentists choose to limit their salary to a tax-efficient level and extract additional income through



dividends.

This approach can reduce overall tax liability, but it must be tailored to individual circumstances and guided by professional advice.

How you take money out of your business is just as important as how you earn it.

This is an area where collaboration with a knowledgeable accountant is essential. A proactive financial strategy can make a substantial difference to your net income over time.

Bringing it all together

Financial intelligence in dentistry is often misunderstood as purely numerical. In reality, it is layered and holistic.

Dentistry offers an extraordinary opportunity – not just to earn well, but to build lasting wealth and professional fulfilment.

However, this opportunity is only fully realised when clinical excellence and financial awareness are developed together.

In the next article, we will explore in more detail how to structure your income, optimise tax efficiency and begin building a financial framework that supports both your personal and professional goals.

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Stop the awkward money talk

Lesley Turner suggests ways to make talking about patient finance easier for the dental team



As a nation we don't find talking about money comfortable. However, as we now live in a world where things outside our control

have a direct effect upon our cost of living, being able to spread the cost of things is becoming more important.

Which means patient finance is likely to play a bigger part in practice life.

We need to overcome our innate squeamishness about discussing money and accept that finance is a useful tool for both the practice and our patients.

When handled well, discussions about finance remove barriers and help patients access the care they want without pressure or embarrassment.

START EARLY

Set expectations before the patient arrives. Have clear information on your website and add a brief mention about it in new-patient communications to raise awareness.

Letting patients know finance is an option helps them to feel less anxious

and more open when discussing treatment.

Introducing finance early in the conversation also makes a big difference. Rather than presenting it only after the treatment plan and fees, weave it in gently during initial discussions.

FOCUS ON REASSURANCE

Patients respond well when you present finance as something that supports choice. You are offering them a solution rather than trying to persuade them so use calm, neutral language.

This helps them feel in control and reduces any awkwardness around affordability.

KEEP MESSAGING CONSISTENT

Consistency builds trust.

So, make sure reception, clinicians and treatment coordinators (TCOs) all feel confident answering common questions so that patients receive the same message throughout their visit.

Finance conversations falter when some members of the team use different wording or seem unsure about how to explain things.

CREATE A COMFORTABLE TREATMENT-PLAN DISCUSSION

When you present a treatment plan, help your patient to feel at ease discussing fees and finance options by talking about them as naturally as you would discuss its clinical benefits.

If you're clear and confident in the way you explain things, they'll take their lead from you and relax about the subject.

GIVE PATIENTS SPACE

Some people prefer to deal with finance matters in the privacy of their own home. Offering them a handout, link or QR code gives them time to think and avoids making them feel pressured.

A follow-up call or message offering more information or answers to questions helps you to stay in touch without things appearing pushy.

REVIEW AND REFINE

Embedding finance into the patient journey is a process rather than a one-time task.

Collecting feedback from patients and your team helps you refine your approach and allows you to adjust conversations so they remain clear, consistent and supportive.

MAKE FINANCE PART OF YOUR CULTURE

When finance is a normal part of business, it can be a benefit to everyone.

Embedding conversations about patient finance into your practice culture allows patients to feel comfortable discussing affordability, enables clinicians to focus on treatment decisions and allows the whole team to work together confidently.

When it's a natural part of the patient journey, it builds trust, supports treatment acceptance and improves the overall experience for both patients and the practice.

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Lesley Turner

Lesley is business development manager at Medenta

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Stop being invisible on Google

With local search now at the centre of patient choice, **David Nelkin** provides a streamlined guide to ensuring your practice remains visible, trusted and chosen



Local search for dental practices has shifted, and Google Business Profile (GBP) now sits at the centre of visibility, trust and patient choice. This is a takeaway guide to what

actually matters if you want your practice to be found, trusted and chosen in 2026. Below are the key takeaways practices should focus on.

01

Google Business Profile now decides whether you're seen

Your website still matters, but it no longer controls discovery. Map results, local listings and AI-driven answers are increasingly built from Google Business Profile data. If your GBP is weak, incomplete or generic, you won't appear. Put simply, your website explains your practice, whilst your GBP decides whether anyone ever sees your practice where they're searching.

02

GBP is Google's source of truth, not just a listing

Google Business Profile isn't 'that box on the right-hand side'. It's Google's verified record of who you are, what you offer and whether people engage with and trust you. Because that data is structured and verified, Google places more weight on it than almost any other source. That's why practices that actively manage their GBP consistently outperform those that treat it as set and forget.



David Nelkin
CEO and founder of Xcelerator Dental



AI hasn't replaced GBP, it's made it more important

AI overviews and conversational search don't replace local data; they rely on it. When someone searches for a dentist near them, Google and other AI platforms resolve the local entity first, and that entity is almost always pulled from GBP data. If your information isn't clear, consistent and credible, you're invisible before a click ever happens.



What actually influences GBP rankings now

Google Business Profile rankings aren't driven by one magic factor. They're shaped by how well relevance, activity, engagement and trust work together. That includes your business name, categories, reviews, services, attributes, opening hours, visual content, links and, critically, how people interact with your profile. Profiles that look active and useful consistently outperform technically correct but neglected ones.



Engagement is the most overlooked signal

Google pays close attention to how people interact with your profile and this impacts your rankings. Calls, clicks, time spent on your listing all feed into prominence. Profiles that feel alive perform better than profiles that simply tick the boxes.



Reviews still matter, but volume isn't the goal

Google reviews remain a powerful local signal, but they no longer work in isolation. A cross-channel reputation strategy is critical not just for Google, but other platforms such as Chatgpt and Perplexity rely on them.

Recency also now matters more than historic totals. A steady flow of recent reviews consistently outperforms large but stagnant review profiles. Review content also matters more than ever.

Reviews that mention experiences and outcomes feed into Google's summaries and AI-driven features.



The essential Google Business Profile checklist for 2026

Below is the practical takeaway. If you want a GBP that performs in 2026, this is what it should include:

Business name
If your legitimate trading name (think your logo, strapline and signage) includes what you want to be found for, it can help rankings. Don't keyword-stuff or invent names.

Categories
Choose the most accurate primary category and add all relevant secondary categories. Consider practitioner listings and ensure each one has a different primary category and is optimised properly.

Reviews
Ask consistently, prioritise recency and sentiment, and reply to every review promptly.

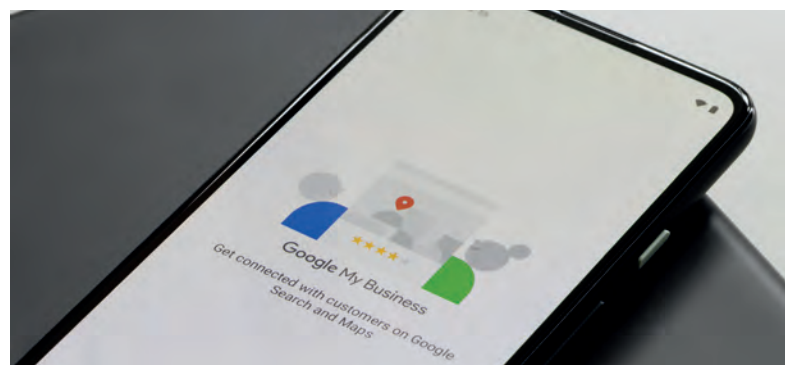
Services and products
List every core treatment. Add custom services in patient-friendly language and treat products like mini landing pages.

Attributes
Add every relevant attribute, including finance, accessibility and amenities. They will boost your rankings for relevant searches.

Website and booking links
Use the correct link types and track them to your website and booking page.

Opening hours
Keep hours and special hours accurate and don't exaggerate availability. One extra hour a day answering phones will ensure you appear above your competitors during that hour.

Visual content
Upload real photos and videos regularly and have 100 as a minimum. Avoid stock images and update them every month or two.



Advancing dental technology and service

As the dental industry undergoes vast changes in technology and service expectations, Belmont's latest **Eurus Series** arrives to keep dentists and patient needs at the forefront

The dental industry has changed vastly over the last 30 years, not only from the technological perspective, but also in terms of expectations and service. As a leading manufacturer, one of our key priorities is to ensure that our products advance alongside technology, while keeping both the dentist and the patient's needs at the forefront.

With our latest Eurus Series recently launched, we believe we've achieved exactly that. Not only are these treatment centres ergonomically designed, but the intuitive touchscreen makes them simple and efficient for the dentist to use. In addition, we offer a treatment centre to suit however you prefer to work.

THE EURUS S1

Our over-the-patient treatment centre has been thoughtfully designed to allow treatments in both standing and seated positions. It features a fixed leg rest and is especially popular in seamless upholstery among NHS dentists. The S1 is available in holder type, rod type, and has a flexible system with module and mobile cart options.

THE EURUS S8

Our fully ambidextrous treatment centre enables the perfect left- or right-handed setup. Available in holder type, rod swing and vac pack.

It features a high-quality instrument delivery system with programmable settings for up to six different dentists, plus an easy-to-use assistant console with high-volume vacuum. The S8 also supports a safe working patient weight of up to 200 kilograms.

THE EURUS S6

Our flagship folding leg chair is super compact, exudes refinement and helps ease patient anxiety by keeping the dentist table and instruments discreetly positioned behind the backrest. The S6 is available as a below the patient delivery system and vac pack, making it perfect for smaller surgeries.

INTUITIVE TOUCHSCREEN AND INTEGRATED TECHNOLOGY

The entire Eurus Series benefits from our intuitive touchscreen operation, providing simple fingertip control and programming for the operator. Our integrated Waveone technology, available as a factory-built option, offers a single file reciprocating system for efficient root canal shaping.

In partnership with Bien-Air, we're also delighted to offer an implant dentistry motor system that can be integrated

as a built-in option when ordering any new Eurus treatment centre. This brings additional advantages to your working day, enabling reliable implant treatments with the Bien-Air implant micromotor and handpieces;

WE'RE ALSO DELIGHTED TO BRING IMPLANTOLOGY INTEGRATION AS A BUILT-IN OPTION



Eurus S1



Eurus S8



Eurus S6

pre-programmable settings are operational via our intuitive touchscreen.

Forever patient focused, we are committed to developing a strong pipeline of evolving products, improving, advancing, keeping dentists at the forefront of their profession.

Redefining dental marketing.

We blend innovative AI
with human expertise.



Book a discovery call today



Lessons for dentistry – breaking the ceiling of business growth

In a market where many are content to follow, **Nick Caesari** explains how a leadership mindset built on innovation, intentional ‘headspace’ and a refusal to accept limitations can transform a struggling venture into an industry leader

Could you introduce yourself and give us some background on your business?

I am the chief executive officer (CEO) of two companies working in the transport sector.

My first company, started in 2012, is one of the leading training providers working with most of the major UK fleets (HGV, vans, grey fleet) and providing training to drivers, helping to protect vulnerable road users (pedestrians and cyclists), and improving driving standards and road safety.

Innovation is a key part of our strategy and some of our successes include the introduction of counter terrorism training to the transport industry and being the first (and largest) virtual reality training provider in our sector.

My other company is all about transport accreditation standards and was developed as a direct competition to two government owned schemes.

Although it’s been a challenging journey competing against the government, we are now the fastest growing fleet accreditation scheme in the UK, recognised on major infrastructure projects such as TfL, HS2, Sizewell and National Highways, as well being adopted by some of the UK’s largest fleets.

In dentistry, many practices offer similar treatments. In your industry, how do you differentiate your business



Nick Caesari
Nick Caesari is the founder of Fleet Source and Mission Zero.

from the competition, and what is your process for identifying what your customers actually value?

You can choose to be a leader or a follower in the market.

We do not obsess about what our competition is doing because by then, it is too late.

We spend a lot of time undertaking research to find the gaps in the market, industry sectors that aren’t being serviced properly, demographics that have been overlooked, or where dominant players exist and the perceived barrier to entry seems too high.

DON’T LET ‘YOU’ BE THE REASON AS TO WHY YOUR BUSINESS IS LIMITED. I HAVE ALWAYS STATED THAT I HAVE NO CEILING BECAUSE I HAVE A WILLINGNESS TO LEARN

Once we identify that opportunity, we become experts in that area.

We develop a solution that either creates a completely new product offering or significantly improves the customer value of existing products in the market.

We make sure that we don’t go to market too fast, launching a substandard product.

But equally, we do not over engineer our products to the point of perfection, because otherwise we risk a competitor getting to market before we do.

Whatever our product, we make sure it will be challenging for our competitors to replicate easily; we want them sitting in their meetings saying, ‘how did they do that?’.

Our competitors eventually work it out and, in some cases, catch up.

But by that point we are already onto our next new proposition.

We are seeing a rise in the cost of living and business overheads. As a leader, what is your strategy for maintaining profitability during tough economic cycles?

We work in a highly competitive industry where most competitors use price as the key for winning or retaining business.

That is a short-sighted approach that quickly erodes margins and creates a customer expectation that the same product will just keep getting cheaper over time.

We found that the most effective way to maintain our margins is to keep innovating our product range to provide a vastly improved level of service and customer experience.

It is not about the price of a product or service; it is about the customer’s perception of the value of that product or service and that is what we obsess about.

The other area we obsess about is cost (direct or overhead), as we are fully in control of those.

We regularly review our cost base, find out where we might be bleeding cash and find efficiencies fast.

Cashflow is everything to a business so we monitor our cash flow often

because the sooner we know when cash will be tight, we have enough time to influence and improve that position.

What is your philosophy on recruitment and retention?

Leadership is what is important, not management.

As CEOs, you could assume that everyone should just do as we say but that is not a very productive 'people' strategy.

You set the temperature of the business and people look to you to inspire them and make them feel like they are part of something exciting.

You need to take time to explain the



vision, how it will help the company, and most importantly, individuals' roles in helping to achieve that vision, and what it could mean to them personally when it's achieved.

As CEOs, we need to understand what motivates everyone, create development plans for each employee and don't wait for the annual appraisal to promote someone.

If they are outstanding and have the right attitude for progression, move them up fast, pay them more, set higher expectations and keep driving.

Equally, also learn to accept that some people are content with where they are in life and pushing them is not going to achieve a better outcome.

Many dentists struggle with being both the 'lead worker' and the 'business owner'. How do you balance this?

For me it is all about headspace.

I run two companies, which although are in the same sector, their position and objectives differ significantly so what works for one, might not work for the other.

Like all business owners, I could fill my

'headspace' everyday with accounts, staff development, operational issues etc (times two companies). And although all those things are still very important, they are actually a distraction to growth.

You need to carve out time for yourself every week, away from the office, where you can focus on the challenges and the ideas.

Even if I am in the office, I will disappear for a while for a walk or a coffee, staring up at the sky, clearing my mind and populating it with that one objective.

You'd be amazed what you can come up with in five minutes and for me, it is this activity that drives our innovation and new products.

Every successful entrepreneur has a 'war story'. Can you tell us about a significant mistake or setback?

I have unfortunately had to lose a business that I worked hard on for seven years and it came down to one very poor decision.

The worst part was that it was after our most successful year working on the 2012 Olympics, but that was part of the problem; we felt indestructible because of the Olympics project and complacency set in.

I backed the wrong client opportunity, which took us down in less than a year.

I have started three businesses since that time, and each one is different because I have learnt from the mistakes I have made in each.

That is the most important thing, asking yourself, 'what can I do better' and not focusing on blaming everyone or everything else.



Technology in all walks of life is moving incredibly fast. How do you decide when to invest in new, expensive innovation and when to stick to the tried-and-tested methods?

Technology is expensive and it can be a real money pit if you don't know what you are doing.

People are obsessed with AI at the moment but like most emerging technologies, they only become an achievable reality for most businesses when they are available commercially 'off-the-shelf'.

We are lucky enough to have our own development team that works on propriety technology so we can perfectly shape the proposition to our customers' requirements however that is not our default position.

What we are really good at is converging technologies, where we take several 'off the shelf' products and 'mash' them together as a complete solution.

Most of the hard work has already been done, you just need to identify a unique way of delivering that solution.

If you could sit down with a room full of aspiring business owners today, what is the one piece of advice you would give them?

Don't let 'you' be the reason as to why your business is limited.

I have always stated that I have no ceiling, there is nothing I can't achieve because I have a willingness to learn, I am a fast learner and I have access to Google (and now AI).

Push yourself to find the answers first before you push others.

Invest the time, do the research and never say to yourself 'I don't know how to do that' before attempting to find out. You'll be amazed at what you're capable of achieving if you just push yourself and ignore psychological barriers.

Avoiding burnout – we're in this together

Zoe Close addresses the worrying issue of burnout within the dental profession with a particular focus on the role of the practice manager



Burnout is a significant problem within dentistry. A 2025 Dental Protection survey of 1,600 dental professionals found that 63% felt frequently burnt out and exhausted, while nearly one in five were concerned about their mental health.

These figures highlight how important it is to take this issue seriously.

As a practice manager, you are the bridge between clinical and non-clinical teams. Staff look to you for reassurance, and everything lands on your desk.

Although you may be surrounded by people, practice management can feel surprisingly isolating.

When you're continually holding everything together for everyone else, it becomes easy to miss early signs that your own wellbeing needs attention.

Without the right support network, personally and professionally, any manager can begin to feel the effects.

Checking in with yourself regularly is essential so you can recognise these early signs before they escalate.



Zoe Close
Head of sales at Practice Plan

Why peer support matters

One of the most effective antidotes to burnout is connection.

Being able to share experiences with people in the same boat can be a lifeline.

Many Practice Plan practice managers already benefit from peer support groups. These safe spaces allow managers to openly discuss challenges, exchange ideas or simply ask for help, knowing they're not alone.

A standout example is the long-running practice manager group in the north east facilitated by regional support manager (RSM) Jayne Gibson.

For more than 10 years, Jayne has built a trusted community where practice managers meet regularly, access expert speakers and learn from one another in a confidential environment.

Originally a small handful, the group has grown to almost 40 participants.

What makes the group work is its shared ownership. There's a genuine commitment to supporting one another.

Jayne has watched with pride as quieter or less experienced members gradually feel confident to contribute.

Every person is treated with empathy and respect, and the group has become a vital support mechanism many members say they wouldn't want to be without.

Connection makes a difference

Jayne's group is just one example. Other RSMs run their own Whatsapp groups, which act as daily touchpoints.

Questions about equipment problems, suppliers or staffing issues receive quick, practical responses. Managers appreciate this and value knowing that support is there whenever they need it.

Managers in the West Midlands, get to attend RSM Josie Hutchings' annual practice manager event at Practice Plan's headquarters.

They come together for a day of learning, inspiration, conversation and fabulous cake.

Many say it offers a rare chance to step away from the practice and think about new ways of doing things. The feedback is overwhelmingly positive, and many attend year after year because they value the opportunity to spend time with others.

You're allowed to ask for help

Whether or not you're part of a support group, the key message is: you don't need to navigate the pressures of practice management alone.

Acknowledging the demands of the role is an important step in protecting your wellbeing rather than a weakness.

If you're feeling stretched, reach out. If you're a Practice Plan client, that may mean contacting your RSM.

You could also join ADAM (the Association of Dental Administrators and Managers), attend local events, or simply speak with another practice manager who understands your world.

You may be surprised by how willing others are to help and how therapeutic those conversations can be.

If you're coming to Dentistry Show Birmingham on 15 and 16 May, why not visit us at stand G50 for a chat? Otherwise, call 01691 684165 or visit www.practiceplan.co.uk/be-practice-plan.

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Stop hiring for the CV



Founder of Exceptional
Team Performance

Mark Topley challenges the traditional recruitment model, arguing that in private dentistry, the character of your team is the true driver of the patient experience

THE SINGLE BIGGEST PREDICTOR OF WHETHER SOMEONE WOULD STILL BE THERE 12 MONTHS LATER WAS WHAT HAPPENED BETWEEN ACCEPTING THE JOB OFFER AND WALKING THROUGH THE DOOR*

Most dental practices recruit the wrong way round. A vacancy opens, CVs come in, and the shortlist is built on qualifications, experience, and availability. Someone gets hired.

Three months later the practice owner is wondering why it doesn't quite feel right – technically capable, but something is off. The dynamic has shifted. Patients are noticing.

The root cause is almost always the same. The recruitment process assessed what the candidate could do. It barely touched on who they are.

In private dentistry, that distinction is commercially significant. The patient experience is the product. And patient experience is delivered – or undermined – by the character of the people in the building. You can train technical skills. You cannot train character.

Start with yourself

Before you can recruit to your values, you need to know what they are – not the words on your website, but the actual behaviours that define how your practice operates at its best.

What does a great day look like? How do your best team members handle a complaint, a nervous patient, a difficult colleague?

The answers to those questions are your values, expressed as behaviour rather than sentiment. Once you have that clarity, recruitment becomes a very different conversation.

Redesign the interview

Over the last 18 months I have been speaking and running workshops on value-based recruitment across the profession.

The feedback from practice owners and managers who have applied this approach is consistent – fewer mis-hires, shorter settling-in periods, and teams that hold together under pressure. The shift starts with the questions you ask.

Tell me about a time when a patient was difficult. What did you do and what would you do differently? This reveals self-awareness and whether the candidate takes ownership or deflects blame.

What would your last team say about you on a difficult day? The honest answer is more useful than any polished competency example.

Why private dentistry specifically? Candidates who talk about time, quality of care, and patient relationships alongside earnings tend to stay longer and integrate better.

Red flags worth taking seriously

A consistent pattern of leaving roles because of management or colleagues rarely resolves in a new environment.

The candidate who can't describe a meaningful mistake tends to amplify under pressure.

Someone who asks exclusively about pay and hours before showing any curiosity about the practice is telling you something about their priorities.

Onboarding is part of recruitment

In a conversation with Nigel Jones, strategy director at Practice Plan, he shared something from early in his career – research examining staff longevity in AXA call centres found that the single biggest predictor of whether someone would still be there 12 months later was what happened between accepting the job offer and walking through the door on their first day.

The calls not made, the silence, the absence of a welcome.

Private dental practices are not call centres, but the human dynamic is identical. What you do in that gap tells a new team member everything about the kind of organisation they have joined.

The technical skills can be developed. The character needs to be there from the start. And the relationship begins the moment they say yes.

*For more information, visit
www.marktopley.co.uk.*

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Clearer X-rays are changing the patient experience

When patients can see what their dentist sees, treatment conversations become easier and decisions come with more confidence. Dr Amanda Bassey-Duke explains how AI-supported diagnostics changed her consultations at Clyde Munro Dental Group

In dentistry, diagnosis is only half the job. The other half is helping the patient understand what you have found and why it matters.

What feels obvious to a clinician can look like a blur of greys to the person in the chair.

If there is no pain, no swelling and nothing obvious to the eye, being told you need treatment can still feel abstract.

Dr Amanda Bassey-Duke, associate dentist at Dental Care Perth, part of Clyde Munro Dental Group, describes those conversations as having once felt a bit like "dark arts".

The dentist could explain what they were seeing, but patients often had little choice other than to take their word for it.

For her, that changed when the practice introduced Second Opinion from Hello Pearl.

The software analyses dental X-rays in real time, producing colour-coded overlays that highlight areas such as decay, bone loss and calculus directly on the patient's image.

Amanda now uses it with every

YOU'RE GETTING PROACTIVE PATIENTS RATHER THAN REACTIVE PATIENTS. AND THAT'S THE BEST KIND OF DENTISTRY

patient and they go through the findings together. The structure of the appointment is much the same, but the conversation becomes easier.

Patients are not just being told. They are being shown. When they can see how close decay is to the pulp, or where bacteria is collecting between their teeth, the conversation becomes more concrete.

That is especially useful in private practice, where trust and clarity shape the whole experience.

Broader patient research from Pearl found that 55% of respondents ranked trust in the diagnosis as the most important factor influencing willingness to accept treatment.

Amanda has seen the impact first hand.

In patient surveys following AI-supported appointments, 86% said the visuals helped them understand their oral health, 77% said they trusted the diagnosis more after seeing the AI results, 77% said the enhanced X-ray influenced them to book a treatment appointment, and 94% said they were happy with their appointment overall.

People who were initially unsure often revisit the image shared with them later and decide to go ahead with treatment.

The effect also extends to preventive care. People come back for subsequent appointments wanting to know whether their brushing has improved their gum health, or whether a small area of decay has stabilised.

"You're getting proactive patients rather than reactive patients. And that's



the best kind of dentistry, because we all know that if you catch things early, the patient needs a lot less dentistry," Amanda explains.

There is a practical gain for the clinician too.

Amanda found that faster diagnosis and clearer conversations saved around 9 minutes and 22 seconds per examination – time that can now go on admin, documentation or simply staying on schedule.

She also speaks openly about the value of consistency across a long clinical day.

What comes through most clearly is how straightforward the shift actually is. Not a change in clinical approach, not a new way of diagnosing, just a better way of showing patients what is already there.

And when patients can see it for themselves, everything that follows becomes easier.

To hear Dr Amanda Bassey-Duke discuss how she uses Pearl in practice, watch a webinar she presented recently <https://bit.ly/48mSxnP>. To see Pearl in action, book a demo at hellopearl.com/getdemo

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The award-winning husband-and-wife team

We hear from **Vishal Patel** and **Smita Parmar** about what drove them to become the most improved practice in 2025

We're the team behind Dalmeny House Dental, a practice based in Worcester Park that we've been building together for five years now.

What makes us a little unique is that we're a husband-and-wife team – which means the heart of this practice is genuinely personal.

Every decision we make, every standard we set, we own it together. And that shared commitment runs through everything we do.

As for what drew us to dentistry – it was never just about teeth. Dentistry, at its best, is about people. It's about sitting with someone who hasn't smiled properly in years, or who walks in anxious and walks out feeling genuinely cared for.

That human connection, combined with the craft and clinical precision the profession demands, made it an easy choice.

Thirteen years in and that hasn't changed – if anything, it's deepened.



Vishal Patel and Smita Parmar
Husband and wife team that own Dalmeny House Dental

WATCHING PEOPLE DEVELOP THEIR CONFIDENCE AND THEIR CRAFT WITHIN OUR PRACTICE IS SOMETHING WE'RE DEEPLY PROUD OF

WINNING THE PRIVATE DENTISTRY AWARDS

Winning at the Private Dentistry Awards was one of those moments where you have to stop and let it land properly.

When you're in the middle of building something – growing a team, expanding the practice, refining systems, improving patient journeys – you rarely pause to reflect on how far you've come.

Winning Most Improved Practice 2025 gave us that pause.

But more than the personal pride, what struck us most was what it meant for our team.

These 18 people have invested themselves in what we're building here, and that award belongs to every single one of them.

It was wonderful validation that the work matters, the standards matter, and that doing things properly and with genuine care for people is something worth recognising.

True improvement isn't just about adding a treatment or repainting the walls – it has to run deeper than that.

For us, a most improved practice has to show growth across every dimension simultaneously: clinical excellence, patient experience, team



culture and business sustainability. If you're only improving in one area, you're not really transforming.

It means asking hard questions – are our patients receiving the standard of care they deserve? Do they feel genuinely listened to and respected? Does every team member feel supported, challenged, and valued? Is the way we're working today better for patients than it was two years ago?

Improvement also has to be consistent. It can't be something you do for a season and then plateau.

The practices that genuinely improve are the ones that build systems, instil values and create a culture where getting better is simply part of who they are.





WHERE DO YOU START?

If you're looking to start on the journey, start with your patients and your team, because everything else flows from there.

For us, the first step was being really clear on the standard of care we wanted to deliver – not what we were currently delivering, but what we believed our patients deserved. From that vision, everything else had a direction.

Practically, here's how it unfolded for us.

Audit where you are honestly. Look at your patient journey from first contact to post-appointment. Where does it fall short? Where is the experience inconsistent?

Invest in your team before you invest in anything else. We grew from 10 to 18 team members, but more importantly, we invested in the development of every individual.

A team that grows personally will grow professionally, and that directly impacts your patients.

Expand your clinical offering thoughtfully. We introduced Invisalign, implant dentistry, facial aesthetics and cosmetic treatments – but always alongside, never at the expense of, our general and preventative dentistry.

Growth in treatments should serve your patients, not just your revenue.

Optimise before you expand. We moved from three to four surgeries, but before we did that, we focused on making sure our existing clinics were running as effectively as possible.

Now we run busy four-clinic days most days of the week because the foundations were right.

Make your examinations non-negotiable. The way we deliver our patient examinations is something we are incredibly proud of – thorough, personal, consistent for every single patient, every single time.

If there's one thing to get right first, it's that.

LOOKING BACK

Winning the award has absolutely helped our practice. There's something powerful about external recognition. It affirms the direction you're heading and gives your whole team a collective sense of pride that's hard to manufacture any other way.

From a practical standpoint, it's opened conversations. Patients mention it, prospective patients find us because of it and it gives our team something to feel genuinely proud of when they talk about where they work.

In a profession where trust is everything, being recognised at that level by your industry peers carries real weight.

But perhaps the most valuable thing it's done is give us a moment to reflect.

It's easy to always be looking forward – the next improvement, the next goal.

The award gave us permission to look back and appreciate what we've actually built together over 13 years.

Without question, the standard of care we provide our patients is what we're most proud of.

When we took on this practice, our patients simply weren't used to the quality and depth of dentistry we brought to them.

Seeing that shift – watching people genuinely understand what a

thorough, caring dental experience feels like – has been the most rewarding part of this entire journey.

The way we deliver our examinations is something we've poured real thought and heart into.

It's thorough, it's personal, and it's consistent – every patient, every time.

That consistency isn't an accident. It's a deliberate choice, and it's the thing we guard most carefully as we grow.

Beyond the clinical side, seeing our team flourish is something that means an enormous amount to us.

Going from 10 to 18 people isn't just a number – each one of those individuals has grown with us, and watching people develop their confidence and their craft within our practice is something we're deeply proud of.

ONE PIECE OF ADVICE

We hope our journey shows other practices that genuine, lasting improvement is absolutely achievable – but it has to come from the right place. Not from chasing awards or trends, but from a real and unwavering commitment to your patients and your people.

We're a husband-and-wife team running a practice in Worcester Park, and five years in, we wake up every day still excited by what we're building.

That passion is what drives the improvement – and if there's one piece of advice we'd give to any practice starting out on this journey, it's simply this: care deeply, be consistent and never stop asking how you can be better for the people who trust you with their health.

Insight-seeing Carestream Dental



Carestream Dental helped dental professionals see the future of their imaging systems at BDIA Dental Showcase, with leading CBCT solutions on show.

Clinicians and their teams found out more about the capabilities of such systems, including integration with new AI-propelled CS 3D Imaging Premium software, which accelerates implant workflows with accuracy.

Amongst the solutions on display was the CS 8200 3D Advance Edition, a state-of-the-art but equally intuitive CBCT system which makes high-quality image taking simpler.

With CBCT imaging, 3D object scanning, and panoramic and cephalometric imaging capabilities, the CS 8200 3D Advance Edition offers versatility for practices looking to transform their care capabilities.

For more information on the imaging systems on offer from Carestream Dental, contact the team today.

www.carestreamdental.co.uk

Showcasing a commitment to clinical excellence British Endodontic Society

The British Endodontic Society (BES) was delighted to attend BDIA Dental Showcase 2026, taking the opportunity to meet many current and future members of the society.

BES council member, Dr Rahul Patel, presented his session 'Keeping it hot or keeping it simple: warm vertical condensation versus single cone' which was enjoyed by many endodontic lovers in attendance.

The BES is committed to providing high-quality educational opportunities to its members and improving the nation's oral health by consistently supporting pioneering research and clinical excellence.

The society offers its members a wide range of benefits, with the aim of furthering clinical knowledge and supporting endodontic excellence.

If you missed us at the show, and would like to find out more and become a member, please get in touch with our team today.

www.britishendodonticsociety.org.uk
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Invaluable business insights

Denovo Dental Partners



Denovo Dental Partners was delighted to host Mary Portas OBE at BDIA Dental Showcase 2026, where she offered invaluable business insights and advice to boost patient retention.

Mary is one of the UK's most influential and innovative business leaders: a celebrated author, broadcaster, journalist, activist and government adviser across retail, fashion, and consumer industries.

During the session, Mary spoke to Kristen Pope, chief integration, partnership and communications officer of Denovo, about what it takes to build a meaningful brand, create a positive workplace culture, and inspire engagement and loyalty from patients.

The Denovo team were also on hand on the exhibition floor to speak with practice owners about the opportunities for growth available through the Denovo model.

Their unique shared ownership approach enables principals to retain autonomy while benefiting from the support and scale of a collaborative group – with full business value realised through a combination of upfront cash and equity.

To learn more about Denovo Dental Partners, or to arrange a conversation with the team, please get in touch.

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IN THE HOT SEAT

Cosmetic dentist, Matt Parsons, shares his journey from childhood aspirations to international implant training and building a digital community of nearly 100,000 followers

Q What was the initial spark that led you toward a career in dentistry?

A When I was in primary school my friend announced that he was going to be a dentist when he was older, to which I confidently replied, 'me too!' A friend of my dad's was a dentist (and always seemed to have the latest golf clubs and a cool car) and allowed me to do some work experience with him.

I liked how his days felt – the patient interactions and friendships, the teamwork within the practice, and the work-life balance. From then on, it was a no brainer for me.

Q What is the biggest clinical or business lesson you brought back from your time practising overseas?

A I worked in Australia for a year or so not long after my DFI year.

I left an NHS associate position that largely rewarded speed, efficiency and, if I'm being totally honest, playing the games the system seemed to want us to play.

In Australia it is a private, often insurance-based system. In the NHS as it currently is, patients are lucky to even have a dentist; your diary will be full months in advance regardless. In Australia, that changed completely.

Patients are spoiled for choice and will shop around to find the dentist they want. The patient journey, rapport and quality of work became the deciding factors for success, instead of volume and speed.

Adapting to this stood me in good stead to return home to a career in private dentistry and also allowed me to become better clinically.

Having an hour for a posterior composite or two hours for a root canal felt like a luxury, and allowed me to really take my time to figure out and try to perfect the basics – something that the pressures of our current NHS system don't always allow younger dentists with large UDA targets.

Q You recently attended a course in Brazil, what are the benefits of attending training courses abroad?

A I spent a week placing implants at a training institute called IBOM in Rio de Janeiro with Dr Alex Marques, and I cannot exaggerate how phenomenal it was.

I couldn't find a course in the UK that was as focused on hands-on surgery, which is why I decided to go abroad.

One reason this may be possible in Brazil is patient attitudes.

The culture seemed more geared towards gratitude towards your surgeon even when things didn't go perfectly, compared to the UK where there is often more of a blame culture if problems arise.

This is a generalisation, but a 'defensive dentistry' culture isn't conducive to learning new or difficult skills.

It also goes without saying that combining education with travel is always appealing!

Q You've built a following of nearly 100k on Instagram – what was the hardest part of scaling that digital presence?

A The hardest part was (and continues to be!) the fear of putting my work out there.

There are so many quality dentists on Instagram that scrolling through their work can make it difficult to post your own cases, especially early in your career, for fear of judgement or public criticism.

I did quickly realise that Instagram is, on the whole, a supportive place.

Many senior clinicians remember what it felt like when they were starting out and are open to offering advice, help and support.

People are kinder than you think, and your work is usually better than you give yourself credit for.

Q When you aren't in the surgery, how do you spend your spare time to decompress?

A I'm very lucky to enjoy my job as much as I do, I rarely feel the need to 'decompress' as such.

When work has been difficult, the 'correct' answer would probably be exercise or a dog walk, but for me I find that I often just want to zone out and do nothing.

Maybe some TV or some scrolling, and often a beer.

Most of my weekends and evenings are spent with my amazing young family, either at various sports clubs or at our caravan.

Q What is the best piece of career advice you've ever received that you still pass on to your own mentees today?

A Patients will remember how you made them feel above and beyond anything else you do.

We can become blasé about the fact that our day-to-day job can be a really important part of our patient's day/week/month, especially with significant procedures and significant financial costs.

If a patient feels like they don't matter to you, that relationship can cause problems in the future.

If a patient feels like you care, it can help you through any difficulties that may arise.



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