



Dental therapy student **Kimberly Close** appeals to principals and practice owners across the UK to take a closer look at the remit of the dental therapist.

‘It is essential to the smooth running of my practices to employ dental therapists. They are cost effective and free up my time for more complex cases. Therapists are at the heart of my dental team, alongside specialists and dental nurses; without them I would not be able to run a successful business.’ These are the words of dentist Dr Lance Knight from Manchester who opened his first practice in 2006 and now owns five practices. Dr Knight has always employed a dental therapist, and currently employs ten dental therapists across his practices. They work mainly on a private basis, although one is employed under the NHS.

*Dental therapists*  
are at the **heart**  
of the *dental team*



When I was a locum dental nurse I was lucky enough to work for Dr Lance Knight at his Manchester practice. This was while I was studying for a Bachelor of Science degree, and I had previously worked as a dental receptionist when I first left school. I was drawn to a caring profession and consider myself to have the gift of the gab; ultimately I wanted to become a dental hygienist/therapist.

So, I applied to the University of Bristol, King's College Hospital Dental Institute and the University of Liverpool. Both Liverpool and King's invited me for an interview. I was accepted by Liverpool and with just two weeks to go until I started there, I was accepted at King's. So, I decided to leave the north-west behind for two and a half years.

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In 2002 it was made possible that dental therapists could work in general practice, yet it seems as though many dental practices continue to lag behind when it comes to employing a dental therapist. I feel that this must arise from confusion or misunderstanding as to our role or it could be because principals and practice owners do not see us as economically viable.

'Therapists are a part of modern dentistry and if some dentists are too short-sighted and old-fashioned to see this and choose not to employ therapists, then with time, it may be the dentists who are out of a job,' says Dr Knight.

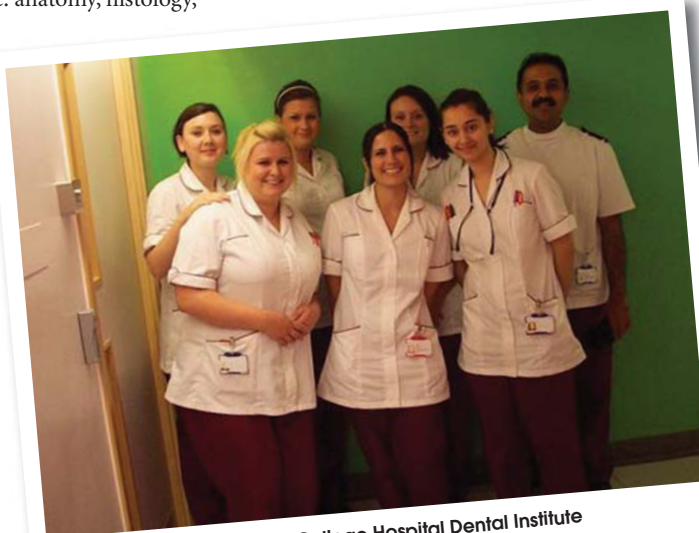
Dentistry today is built around the dental TEAM. Everyone in the dental team contributes towards making dentistry work: the dental receptionist, the dental nurse, the practice manager, the dentists and the dental hygienist/therapists. To be a successful dental team everyone's role must be appreciated and understood by everyone. I would ask all principals and practice owners to please think about employing a dental therapist and what it would mean for your dental practice. If you are a dental therapist reading this, think about owning your own dental practice!

*For further advice about employing a dental therapist contact the British Association of Dental Therapists or the British Society of Dental Hygiene and Therapy:*

[www.badt.org.uk](http://www.badt.org.uk)  
[www.bsdt.org.uk](http://www.bsdt.org.uk)

I have been at King's for 22 months now, studying a Royal College of Surgeons Combined Diploma in Dental Hygiene and Dental Therapy (a bit of a mouthful). My colleagues and I are counting down the months, if not days until we finish. It is indeed the most challenging and difficult thing I have ever studied for. At King's, there are 31 of us in our year and the intake for the year below was 40. Our lecture timetable is based around months of lectures, followed by clinical activity. Some of the subjects we study are: anatomy, histology, physiology, microbiology, pharmacology, medical conditions, tooth morphology, dental histology, dental hygiene, periodontology, law and ethics and oral medicine - and this is by no means an exhaustive list.

Our course is hard graft and we have just eight months left until we are fully qualified. Many of us are wondering whether or not we will be able to obtain a dental therapy job. The catalyst for my writing this article is that despite



**Group B - Year 2 at King's College Hospital Dental Institute**

Back row (L-R): Kimberly Close, Avril Fraser, Stephanie Freeman, Vinai Chudasama

Front row (L-R): Nicola Glenn, Lourdes Flindall, Saarah Chaudry

## 'We don't just scrape and polish!'

### *The dental therapist's current list of permitted duties:*

- Intra and extra oral assessment
- Record indices and monitor disease
- Scaling and polishing
- Apply materials to teeth such as fluoride and fissure sealants
- Take dental radiographs
- Provide dental health education on a one to one basis or in a group situation
- Routine restorations in both primary and permanent teeth, from Class 1-V cavity preparations
- Can use all materials except pre cast or pinned placements
- Treat all types of patient
- Extract primary teeth under local analgesia.

### *From 1 July 2002 following legislative changes, dental therapists can, provided that they have completed appropriate training, perform these extended duties:*

- Pulp therapy treatment of primary teeth
- Placement of pre formed crowns on primary teeth
- Administration of inferior dental nerve block analgesia
- Temporary replacement of crowns and fillings
- Take impressions
- Treat patients under conscious sedation provided the dentist remains in the surgery throughout the treatment.

Dental therapists need a treatment plan written by a dentist prior to commencement of any procedures being undertaken on patients.

For more information also see *Being a dental therapist; Vital* summer 2009 pages 22-23.