My concerns as a final year dentistry student mirror that of the ADAQ and are as follows:

- 1) The draft scope of practice does not balance the available workforce against the burden of oral disease. There is an expanding workforce of dentists to meet the needs of an adult population and an unmet need in child and adolescent oral health and prevention.
- 2) A change to the 'registration standard' places a requirement on university curricula to then ensure they match this standard. The length of courses may have to be increased to absorb extra curricula. The DBA has no place in requiring universities to change curricula, particularly when it is not specifically to address an area of need.
- 3) Correct diagnosis of adult patients requires a variety of skill sets which require 5-7 years to acquire through a dentist's degree. Without this complete skill set accurate diagnosis is not possible.
- 4) The definition of dentistry for a dentist is overly restrictive. A dentist degree provides a core skill set, which allows further evaluation and integration of additional skills. However, DT, OHT, DH and DP offer a restricted scope of practice and should have all of the elements of their scope of practice defined as their degrees do not provide the necessary foundation to allow for the addition of advanced skill sets.

Furthermore, if an all inclusive definition is adopted, the public will have difficulty differentiating between who is a dentist, and who is a "dental practitioner".

We need to ensure the term 'dentist' is not confused with, or equated to, other oral health professionals.

ADAQ opposes these changes and believes the DBA proposal is seriously flawed and has the potential to undermine public safety.

Regards, Michael To Bdent 4 University of Sydney