

**From:** jasyn randall  
**To:** [dentalboardconsultation](#)  
**Subject:** Scope of practice  
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May 10th 2018

Dear Dr John Lockwood  
Chairman, Dental Board of Australia

Re: Scope of Practice Public Consultation

I write to express grave concern over the Dental Board's proposed changes to the Scope of Practice Registration Standard. In my view, the proposed changes pose a significant risk to patients. Any changes to the scope of practice must also consider the legal limits to practice and the minimum competency set of all dental practitioners.

I support the positions of the Australian Dental Association and the Australian Society of Orthodontists. In particular I have grave concerns about the new reflective tool for self-assessing ones competency or level of training. Many CPD courses are offered by companies selling products – their main goal is to sell their product which is not necessarily in the public's best interests. A general dentist does not have the training to understand the problems with some of the claims made by companies selling these appliances and techniques and simply start using them as instructed. Only a specialist has the level of training and knowledge to recognise any flaws or limitations.

As an example I have seen multiple cases of inappropriate orthodontic treatment undertaken by general dentists in the past few years and have had to retreat a number of them. Often the patient ends up paying twice for treatment that should have been performed correctly the first time. Would you want this to happen to one of your family members?

Many other specialists that I have spoken to have grave concerns and this a common finding by many Orthodontists throughout Australia and the world and is supported by;

- Indemnity insurers stating that the number and value of orthodontic claims are rapidly rising;
- Indemnity insurers now require general dentists doing orthodontics to pay an increased premium;
- The increase in GP practices promoting and advertising themselves as providers and sometimes "specialists" in braces/aligner treatment and other non-traditional orthodontic treatment techniques learnt on weekend courses, "mini-residencies" and other short courses.

I trust that these examples demonstrate the inadequacy in self-assessing adequacy and level of training. A general dentist does not have the specialist training of ~5000 hours of orthodontics over 3 years full time to determine what appropriate or inappropriate training is. I completed my specialist training in 2014 and have worked full time since. I still find some complex cases quite challenging

to treat and makes me wonder that some of these non-specialist practitioners or dentists that have done a 'weekend course' don't really have the training or expertise to properly diagnose, treatment plan and then carry out the treatment required to the same skill level as a specialist practitioner. I often use the analogy, 'if my Mother needed an implant', would I send her to a periodontist or a general dentist? It really is a case of you might think you know, but still don't know what you don't know.

'Reflective' learning is doing harm over an extended period of time in orthodontics. The purpose of attending University based programs is to give the training to understand what is suitable and what is potentially harmful rather than learning by trial and error as with many of the GP-directed CPD courses. I therefore support maintaining the status quo (Option One) as laid out in the consultation and also suggest stronger review of CPD as many courses are unsuitable and simply revenue raising for companies selling products of dubious or even dangerous efficacy.

Kind Regards,

Dr Jasyn Randall