

Welcome to the Dental Board of Australia's May 2016 newsletter.

In this issue **News from the Board** The continuing professional development cycle dates are changing We're making changes to how we assess overseas-trained specialists 2 2 Who do the advertising guidelines apply to? 2 Who does what in dental accreditation? 2 Approval of programs to extend scope Have you read the new fact sheet on the use of 2 botulinum toxin and dermal fillers by dentists? Who is responsible for infection prevention 3 and control? 3 Who can use conscious sedation in their practice? Registration renewal update 3 **National Scheme news** 3 New video outlines objectives and role of the 3 National Scheme 3 Employer obligations: new awareness campaign National drug screening protocol in place from November 2015 3 State and territory summaries and profession summaries now available – annual report 2014/15 4 Dangers of button battery ingestion 4 Are your contact details up to date? 4 Keep in touch with the Board Welcome to the first newsletter for 2016 from the Dental Board

of Australia (the Board)

We have received a lot of feedback from the different dental professional associations suggesting many topics for the newsletter, which we will cover in this and future editions.

We would also like to take the opportunity to welcome those dental practitioners who have registered for the first time in recent months.

As you start your professional practice as a dental practitioner, it is important that you familiarise yourself with the standards, codes and guidelines published by the Board on its website. We also publish <u>fact sheets and FAQ</u> to help you understand

your obligations. We encourage you to take the time to read and understand this material and reflect on how the different requirements apply to your practice.

Issue 10, May 2016

Another important document is the code of conduct, which is at the centre of the Board's regulatory policy framework. The code sets out what we expect of you to support safe, effective and ethical practice. We encourage all registered dental practitioners, no matter how long you have been registered, to familiarise yourselves with the code. It is important also that employers of registered dental practitioners understand this document so that they can support their employees to meet their obligations.

There are other requirements, set by entities such as state and territory governments, that you need to meet, for example, for radiation licensing, drugs and poisons legislation. You need to familiarise yourself and comply with the requirements that apply to your practice in all the states and territories in which you work.

Before you start practising, you must have your professional indemnity insurance (PII) in place. The Board's registration standard and fact sheet for <u>professional indemnity insurance</u> arrangements explain what you need to do.

News from the Board

The continuing professional development cycle dates are changing

The revised continuing professional development (CPD) <u>standard</u> came into effect on 1 December 2015. We have also published associated quidelines and FAQ.

Dental practitioners need to complete 60 hours of CPD in any given three-year cycle.

The current three year CPD cycle is due to end on 30 June 2016 and you need to complete the 60 hours for this period. The guidelines explain how you can work out how much CPD you need to do if you register part way through a cycle.

The next cycle will start on 1 December 2016 and run until November 2019 and you need to complete the 60 hours for this period too.

This means there is a five-month period of transition between cycles from 1 July 2016 to 30 November 2016. During this time we encourage you to continue to undertake CPD activities. You do not need to complete any additional requirements for these five months, but any CPD activities that you do complete will count towards the new cycle starting on 1 December 2016. CPD hours completed in this five-month period cannot count towards the cycle ending on 30 June 2016.



We're making changes to how we assess overseas-trained specialists

The Board has published important information on how we intend to assess applications for <u>specialist registration</u> from overseas-trained dentists.

Under the National Registration and Accreditation Scheme (the National Scheme), the Australian Dental Council (ADC) has assessed overseas specialist qualifications for substantial equivalence to an Australian specialist program, on behalf of the Board.

We are currently working with the Australian Health Practitioner Regulation Agency (AHPRA) to support a transparent and consistent assessment of applications for specialist registration from overseas-trained dental specialists. This involves the development of a framework with clear criteria and evidence requirements.

The new assessment process will start from 1 July 2016. We will update you before the new process begins.

Who do the advertising guidelines apply to?

This is a common question from the professional associations.

The National Boards' **Guidelines for advertising regulated health** services (the Guidelines) apply to anyone who is advertising these services. This may be registered health practitioners, nonregistered health practitioners, individuals and body corporates including employers of dental practitioners.

The Guidelines help anyone advertising these services to understand their obligations.

We all know that advertising can be a useful way to communicate the services health practitioners offer to the public so that consumers can make informed choices. It is important that advertising is not false or misleading, as this is unlawful, may compromise health care choices and is not in the public interest.

As well as the National Board guidelines, advertisers need to comply with all other relevant legislation including the Australian Consumer Law (ACL).

The ACL is administered and enforced jointly by the **Australian** <u>Competition and Consumer Commission</u> [ACCC] and the state and territory consumer protection agencies, with the involvement of the Australian Securities and Investments Commission (ASIC) for financial services matters.

There are also specific requirements for the advertising of therapeutic goods. These are described in legislation administered by the Therapeutic Goods Administration (TGA).

We will continue to work with AHPRA and the other National Boards to ensure that the information we provide supports advertisers to understand what they need to do.

Who does what in dental accreditation?

If you registered with the Board using an Australian qualification this means it was first accredited by the Australian Dental Council (ADC) against profession-specific

accreditation standards and then approved by the Board as a program that can lead to registration.

Only programs approved by the Board may lead to registration or endorsement. This includes specialist registration. All approved programs are published on the Board's website.

The ADC also monitors approved programs to make sure that they continue to comply with the standards.

There are other types of accreditation agencies that register and regulate education providers:

- Tertiary Education Quality and Standards Agency (TEQSA) - Australia's independent national regulator of the higher education sector, and
- Australian Skills Quality Authority (ASQA) the national regulator for Australia's vocational education and training (VET) sector.

TEQSA and ASQA regulate and register higher education and VET sector program providers, effectively providing a license to operate. They accredit programs against generic standards that are not profession specific.

Approval of programs to extend scope

We have published revised information on our website about programs to extend scope.

These programs, previously known as add-on programs, are accredited by the ADC and approved by the Board.

Programs to extend scope allow dental practitioners to:

- acquire foundation knowledge not obtained through their initial qualifications, or
- refresh this foundation knowledge.

The programs:

- apply to dental hygienists, dental therapists, oral health therapists and dental prosthetists, but
- do not apply to dentists. A dentist's qualification that leads to registration provides the complete foundation knowledge to enable full scope in dental practice. Dentists need to build on and refresh their foundation knowledge to adopt new techniques using continuing professional development (CPD).

The website includes the list of current approved programs and the historical list.

Have you read the new fact sheet on the use of botulinum toxin and dermal fillers by dentists?

We have published a new fact sheet to explain what we expect of dentists when using botulinum toxin and dermal fillers in their practice.

If you use these scheduled medicines in your practice you need to read this.



Who is responsible for infection prevention and control?

Another common question from professional associations is: 'Who is responsible for making sure infection control requirements are met?'

All registered dental practitioners, including if you are an employee, are responsible for making sure that the Board's requirements are met. The guidelines on infection control and other material published on the website help registered dental practitioners to meet their obligations.

The National Health and Medical Research Council's (NHMRC) Australian Guidelines for the Prevention and Control of Infection in Healthcare state that infection prevention and control is everybody's business. As a registered dental practitioner, you are expected to understand and practise in accordance with these Australian guidelines at all times.

The Board's CPD registration standard and guidelines describe how much and what type of CPD you need to do. We expect you to continue to maintain and update your knowledge throughout your career across all areas of your practice, and recommend that you regularly do a CPD course in infection control. This will help you attain and maintain contemporary knowledge of the required standards, policies and procedures in infection control, and understand the science behind these requirements.

Any CPD you complete in infection control would be considered clinically or scientifically based activities for the purpose of meeting the Board's requirements.

Who can use conscious sedation in their practice?

Conscious sedation is a technique used in dental practice to induce a depression of consciousness during which patients are able to respond purposefully to verbal commands or light tactile stimulation.

Only dentists, including dental specialists, whose registration is endorsed for conscious sedation can use this technique in their practice.

Towards the end of 2015, we published a revised registration standard for endorsement for conscious sedation. The requirements under the registration standard have not changed, the standard has been drafted to improve the understanding of these requirements including FAQ.

Supportive information has been published on our website to support this implementation. This includes a number of FAQ related to conscious sedation and the use of nitrous oxide by dental practitioners.

The national register of practitioners confirms if a dental practitioner's registration includes an endorsement.

Registration renewal update

In the recent renewal period, 96% of dental practitioners renewed their registration and 98% of these did so online. This high rate of online renewal reflects the trend for all renewing practitioners across the National Scheme.

The Board will publish its next quarterly data update in June 2016. For previous updates on the registered workforce, visit the statistics page on the Board's website.

National Scheme news

New video outlines objectives and role of the **National Scheme**

AHPRA has recently launched a new video (with accompanying infographic) explaining the Australia-wide scheme that is in place to protect members of the public.

Working in partnership with the 14 National Boards, AHPRA helps regulate Australia's 630,000-plus registered health practitioners through a national scheme.

The video explains how the National Scheme works and how patients are protected.

Both resources are available on the What we do page of the AHPRA website. The video can also be watched on AHPRA's YouTube channel.

We are currently developing a range of interactive communication material to support dental practitioners to understand and practise at the standard expected by the Board.

Employer obligations: new awareness campaign

AHPRA has published a <u>news item</u> that outlines employers' obligations, and has ads running on LinkedIn and Facebook. This is the first step in the campaign, with many more activities to follow, including direct mail, paid print advertising, and inlanguage advertising (for the public campaign).

The campaign will be rolled out in stages and has three target audiences and objectives:

- 1. Employers check the <u>register</u> before employing someone, keep up to date with changes to registrations, make mandatory reports when required.
- 2. Practitioners know your obligations as a registered health practitioner.
- 3. Public check to see if your practitioner is registered.

National drug screening protocol in place from November 2015

There are health practitioners with a history of substance misuse who have restrictions placed on their registration. These restrictions are generally designed to keep the public safe while the practitioner remains in practice.

When restrictions are placed on a health practitioner's registration, AHPRA monitors the practitioner to make sure they are complying with the restrictions. This process is referred to as 'monitoring and compliance'.

From November 2015, all health practitioners who have restrictions placed on their registration by the Board as a result of past substance misuse will have routine quarterly hair testing, in addition to random urine testing. Routine hair testing provides



additional information about the use of a wide range of drugs, over a longer time period. It therefore provides greater assurance to the Board that the practitioner is not impaired as a result of ongoing substance misuse.

More information is available in the AHPRA news item.

State and territory summaries and profession summaries now available – annual report 2014/15

State and territory summaries of the annual report are now available on the <u>AHPRA website</u>. The summaries provide a view of national data about our work to keep the public safe through a state or territory lens. We provide national comparisons to show how the state or territory compares with the national average and where possible, we provide two years of data, to identify and track trends over time.

More comprehensive data are in the <u>2014/15 annual report</u> of AHPRA and the National Boards which was published in November 2015. The annual report also includes more detailed profession-specific information.

The 14 National Boards have also published individual profession profiles. To read the dental <u>profession profile</u> go to the Board's website.

Dangers of button battery ingestion

From time to time the National Boards are asked to publicise important public health messages for health practitioners.

The Queensland Coroner's recent report into the death of a four-year-old girl, who died after swallowing a two-centimetre button battery, has highlighted the need for health practitioners to be aware of the dangers these products present to patients if ingested, and to be better equipped to handle suspected cases.

When swallowed, lithium button batteries (also known as 'disc batteries') can become lodged in the oesophagus and the residual charge can cause electrolysis. This burns through tissue causing severe, irreversible damage.

Recognising battery ingestion can be difficult if the ingestion is not witnessed, as the child may present with non-specific symptoms such as poor feeding, irritability, fever, vomiting, drooling or cough. The ingestion of disc batteries requires urgent intervention.

Further information is available from the <u>ACCC</u> or advice can be obtained by ringing the Poisons Information Centre in Australia on 13 11 26.

Are your contact details up to date?

Throughout the year we need to send you important information related to your registration. So that you receive this information you need to check that we have your correct contact details.

You can check your details via the login icon at the top right of the AHPRA website.

Email accounts need to be set to receive communications from AHPRA and the Board to avoid misdirection to an account junk box.

Keep in touch with the Board

As always, we encourage you to regularly check the <u>Dental</u> <u>Board website</u> for information and updates relating to the dental profession.

- Visit our website for information on the National Scheme and for the mandatory registration standards, codes, guidelines, policies and fact sheets. Board communiqués and consultation papers are published on the site under News.
- Lodge an online enquiry form.
- For registration enquiries call 1300 419 495 (from within Australia) or +61 3 9275 9009 (for overseas callers).
- Address mail correspondence to: Executive Officer, Dental Board of Australia, GPO Box 9958, Melbourne VIC 3001.
- AHPRA state and territory office locations are listed on the AHPRA website.

