



Australian
Dental
Council

19 June 2013

Executive Officer
Dental Board of Australia
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dentalboardconsultation@ahpra.gov.au

Re: Comments on Scope of Practice Registration Standards and Guidelines

The Australian Dental Council (ADC) is an independent national accreditation authority. The main activities of the ADC are:

- **accreditation** of programs of study that lead to general or specialist registration as a dental practitioner in Australia;
- overseeing the **assessment** of the knowledge, clinical skills and professional attributes of overseas qualified dental practitioners who are seeking registration to practise in Australia; and,
- developing **accreditation standards** to be applied to programs of study leading to general or specialist registration.

The ADC is pleased to provide comment on the Dental Board of Australia's Scope of Practice Review. The ADC believes that the Draft Scope of practice registration standard is a workable and well-crafted document. The ADC considers that the proposed changes identified under Option 2 continue to reflect the current practice of dental practitioners practising within their education, training and competence. The ADC also believes that it would be able to undertake its accreditation functions if this practice registration were in place.

The ADC therefore supports the preferred option, viz, Option 2.

Responses to specific questions

1. Do you agree that the revision to the standard will provide greater clarity and certainty for dental practitioners to work within their scope of practice?

The ADC agrees that greater clarity is provided in the standard. The ADC also recognises that scope of practice is an evolving process which must reflect current practice. Scopes of practice will continue to evolve in the health arena and future reviews may decide to revisit, for example, the issue of independent practice.

2. Do you agree that the introduction of the guidelines further supports this clarity for dental practitioners and the public?

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The ADC considers that the guidelines are helpful in assisting an understanding of the standard. In general they are clear and appropriately concise. The ADC notes some inconsistency between the educational qualifications required for the different types of practitioner. On page 16 Oral Health Therapists are required to have attained “a three year full time bachelor degree formal education program”. It is not clear why the term “bachelor” is identified when for Dental Hygienists, Dental Prosthetists and Dental Therapists, the requirement is either a two or three year “formal education program”. While the trend is for BOH programs to be three year bachelor programs, the reasons for the apparent inconsistency in qualification level identified in the guidelines is not clear and may make ADC accreditation decisions difficult.

Under “2. Education and training requirements for the treatment of patients of all ages”, the ADC notes the inclusion of modalities “to be taught and assessed for dental therapists and oral health therapists when practicing dental therapy on persons of all ages”. The ADC would argue that the inclusion of such modalities more appropriately belongs with the ADC accreditation processes. However the ADC does not object to these remaining within the document as it appears to provide an appropriate series of activities, albeit somewhat difficult to enforce in practice.

3. Are there additional factors which could be included in the guidelines to support the standard?

The ADC has no further suggestions for inclusion.

4. Do you agree with the list of skills in the guidelines relating to programs to extend scope? Are there additional skills which the National Board should consider adding to the list?

The ADC has no further comment regarding the list and believes that they provide appropriate guidance for accreditation duties to be fulfilled. However the ADC notes some inconsistencies in the table presented. It is not clear why a number of the skills identified as extending scope are listed. For example it could be argued that “Local anaesthesia / analgesia” are skills that already exist for Dental Hygienist practice.

5. Does the preferred proposal balance the need for protect the public with the needs of regulating the profession?

The ADC considers that the standard balances issues of access to care with public safety by those providing dental services in Australia.

Yours sincerely



Lyn LeBlanc
Chief Executive Officer
Australian Dental Council