

**From:** [REDACTED]  
**To:** [dentalboardconsultation](mailto:dentalboardconsultation@ahpra.gov.au)  
**Subject:** RE: Dental Board of Australia - Draft Scope of practice registration standard and guidelines - Further feedback  
**Date:** Wednesday, 19 June 2013 6:21:41 PM

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Dear AHPRA feedback officer,

I would like to further like to express my indignation about the HWA's deliberate misrepresentation of information, and lack of quantitative evidence in supporting its claims.

Graham Middleton provides a better breakdown than what I would be capable of:

<http://www.synstrat.com.au/PDFs/dentistarticles/Dental%20Reform%20Agenda%20article%20Graham%20Middleton.pdf>

At my level as a second year dental student, I can already identify that the HWA's Scope of Practice report proposals would breach points 8 and 9 of CDC's public health principles, that is

- 8) Assurance of **competent** public and personal health care workforce
- 9) Evaluate effectiveness, accessibility, **quality** of personal and population-based health services

Obviously, this relates to the aforementioned lack of evidence base supporting such a measure. The CDC principles of assessment-policy development-assurance are from <http://www.cdc.gov/nphpsp/essentialservices.html>

We are fortunate that in this age, exchange of information occurs rapidly, and through social media, the public can readily access counter-arguments to such unprofessional publications.

I sincerely hope that feedback like this is taken seriously. It would be a great tragedy to public oral health if highly intelligent and competent dentists and dentistry students were to walk away from the profession due to the combination of government-engineered dentist workforce surplus, irresponsible scope of practice changes and disillusionment at overall federal government oral health policy.

Yours faithfully,

Stephen Do

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**From:** dentalboardconsultation [dentalboardconsultation@ahpra.gov.au]  
**Sent:** Wednesday, 12 June 2013 2:06 PM  
**To:** STEPHEN DO  
**Subject:** RE: Dental Board of Australia - Draft Scope of practice registration standard and guidelines

Thank you for your feedback to the Scope of practice registration standard consultation paper.

Australian Health Practitioner Regulation Agency  
G.P.O. Box 9958 | Melbourne VIC 3001 | [www.ahpra.gov.au](http://www.ahpra.gov.au)

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**From:** STEPHEN DO [REDACTED]  
**Sent:** Sunday, 9 June 2013 9:07 PM  
**To:** dentalboardconsultation  
**Subject:** Dental Board of Australia - Draft Scope of practice registration standard and guidelines

Dear Sir/Madam

The National Board has proposed key changes to the Scope of practice registration standard. I write to express my concern with a number of proposed changes.

The first is to "support the team approach to dental care".

It should not be necessary to consider this to be a key change. During the years of study to be awarded a degree in dentistry, the team approach was, and is a significant component of that education, and following graduation is a vital factor in the routine performance of dentistry.

The second key change is a proposal to "remove supervision requirements in recognition of the team approach".

This proposal is seriously flawed as it undermines public safety. As the most qualified member of the dental team, it is the dentist who must retain the responsibility of the supervision of patient management. To allow less qualified persons to make potentially irreversible treatment decisions is irresponsible. As the leader of the dental team, it is the role of the registered dentist to supervise patient management and delegate tasks to appropriately qualified personnel.

The third key change proposed is to “reduce the prescriptive nature of the standard”.

As in the second proposal, any reduction in the supervision of the members of the dental team has the potential to also undermine public safety. For this reason, the existing prescriptive nature must be retained.

The fourth proposal is to “provide further clarification on the standard”.

The National Board proposes that “The guidelines are intended to provide greater certainty and clarity to dental practitioners and the public...”

The definition of dentistry for a dentist is overly restrictive. A dentist's degree provides a core skill set which allows further evaluation and integration of additional skills. There is no need for an all-inclusive definition of what constitutes dentistry to exist, to then be applied to a dentist. However, dental therapists, dental hygienists, oral health therapists and dental prosthetists, all of whom offer a restricted scope of practice, need to have all the elements of their scope of practice defined.

Dental therapist, dental hygienist, oral health therapist and dental prosthetist degrees do not provide the necessary foundation to allow the addition of a wide ranging skill set. Complete and accurate diagnosis of adult patients requires a variety of skill sets, which is achieved based on 5-7 years of education through a dental degree. Without this foundation the complete skill set necessary for accurate diagnosis is not possible.

The current and proposed guidelines essentially dictate that all ‘dental practitioners’ should be self-regulating in the ‘dentistry’ they practise. However, only those with the highest level of training should have the capacity to self regulate. Those with limited skill sets need to have their skills well defined and matched to the community need, and must ensure public safety is maintained. The only formal education and training which would allow an extension of the scope of practice for dental therapists, dental hygienists, oral health therapists and dental prosthetists would be that which is equivalent to a undertaking a dental degree.

In summary, the Dental Board of Australia should reject the proposed changes.

Yours faithfully

**Stephen Do**

Dated 9th June 2013