

13 May 2018

Dental Board of Australia

Dear Board Members,

RE: SCOPE OF PRACTICE PUBLIC CONSULTATION

I have worked with hygienists and oral health therapists throughout my dental career. While I recognize their role in overall patient care, I in no way support the Dental Board's proposed changes to their scope of practice.

Dentists utilize the full scope of their training in order to diagnose and manage the oral health of patients. We base treatment decisions on a multitude of factors at a patient and site level after consideration of all the relevant options and limitations. It is not straightforward. It is a difficult job. That said, we are trained from the first day of university as a clinician who can operate independently. Our knowledge and training positions us to be able to appropriately decide whether we can manage a case ourselves or if we need to refer. We are also trained to be able to refer a patient to an auxiliary staff member, like a hygienist or therapist, if the procedure is within their scope of training. I have taught in both a pre-clinical and clinical setting for the University of Sydney since 2010, and I would argue that a dental degree is the minimum requirement for one to be able to make such referrals and decisions independently.

The current role of the dentist within the dental team help to facilitate an excellent standard of care for every person that sits in the dental chair. My question is: what is the driving force behind this proposed scope of practice change? Who does it benefit? It clearly devalues the dentist and puts the Australian public at significant risk. Retroactively opening up the scope of practice to a cohort of graduates who were never taught to provide healthcare outside of a structured professional relationship with a dentist sets a scary precedent.

I wholeheartedly support the positions of the Australian Dental Association in its submission and believe where a structured professional relationship is not in place between a dentist and a therapist there is a risk of adverse or unfavourable outcomes to patients.

I trust the board sees clear for retention of the structured professional relationship and retention of the requirements of 'independent practitioner'. This will ensure that the best, quality dental care is provided safely to the Australian public. I strongly support maintaining the status quo (Option One) as laid out in the consultation.

Regards,

Dr. Meredith Owen

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