AHPRA

Review of stakeholder perceptions of AHPRA and the National Boards

A Social Research Project

November 2018

Supplementary report prepared for:

The Dental Board of Australia





Introduction

- Truly Deeply has been engaged by the Australian Health Practitioner Agency (AHPRA) to test the
 perception of sentiment towards AHPRA and the National Boards. This review is intended to help AHPRA
 and National Boards better understand what stakeholders think and feel about the organisation and to
 identify how to facilitate ongoing confidence and trust in the work performed by AHPRA and National
 Boards.
- The study has used a combination of both qualitative and quantitative approaches, specifically extended interviews (face to face and via the telephone), focus groups and online surveys.
- A single, integrated report has been provided to AHPRA documenting the key themes and results.
- A separate summary has been provided for each of the National Boards based on the results of the online survey with practitioners.
- The purpose of this report is to present a subset of findings specifically for the **Dental Board of Australia**.

An overview of the methodology

A **four stage** approach that combined both qualitative and quantitative research approaches has been used.

Stage 1 comprised a total of 53 qualitative interviews. This consisted of interviews with the Chair of every National Board (15); the Executive Officer of almost every National Board (13), Government health providers (3); major health employers (3); Aboriginal and Torres Strait Islander Health Strategy group representatives (5); Co-regulatory partners (4); Professions Reference Group members (3); representatives from CALD communities (2) and 'Other' various stakeholders (5).

These interviews were conducted between August 10 and September 26, 2018.

Stage 2 involved three focus groups. The three groups were conducted with i) Members of the Community Reference Group; ii) Members of the Professions Reference Group and iii) Accreditation Authority representatives.

These groups were conducted between August 14 - 22, 2018.

Stage 3 consisted of an online survey with practitioners from all 15 registered professions.

This survey was conducted between September 17 - 25, 2018.

Stage 4 consisted of an online survey with a representative sample of the Australian general public.

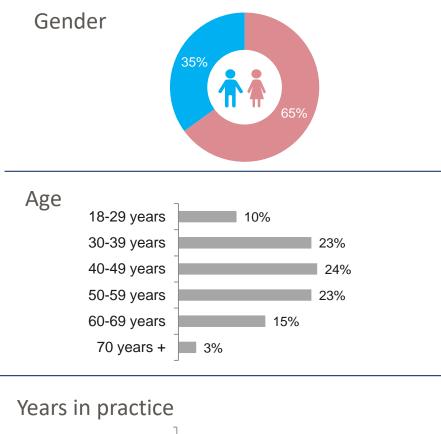
This survey was conducted between September 17 - 25, 2018.

Quantitative approach

- Online surveys were conducted with practitioners as well as the broader community following the qualitative investigation. Truly Deeply developed the questionnaires in consultation with AHPRA.
- The questionnaires were developed to allow initial findings in the qualitative to be further explored and validated.
 Additional pre-codes and lists of words and statements were included in the survey following feedback from interviews and discussion with stakeholders.
- Respondents to the Community Survey were sourced using an external panel provider.
- Participants in the Practitioner Survey were sourced by AHPRA (using software that allowed the survey to be deployed to a random sample of practitioners in each profession).
- The practitioner sample has been weighted to ensure an equal 'voice' within the total sample of registered health practitioners (with the sample of 'nurses' and 'midwives' further separated). This has been to done to ensure that the views of (for example) of 'psychologists', which accounted for 14% of responses to the survey, does not distort the views of other professions, which accounted for a much smaller response overall to the survey.
- Once the surveys were closed, statistical analysis was conducted by Truly Deeply to summarise and compare the quantitative findings.

	Community Survey	Practitioner Survey
Fieldwork dates	September 19 - 25	September 19 - 27
Responses	1,020	5,694
Email invitations sent	na	100,257
Response rate	na	6.0%

Sample of registered practitioners (n = 5,694)

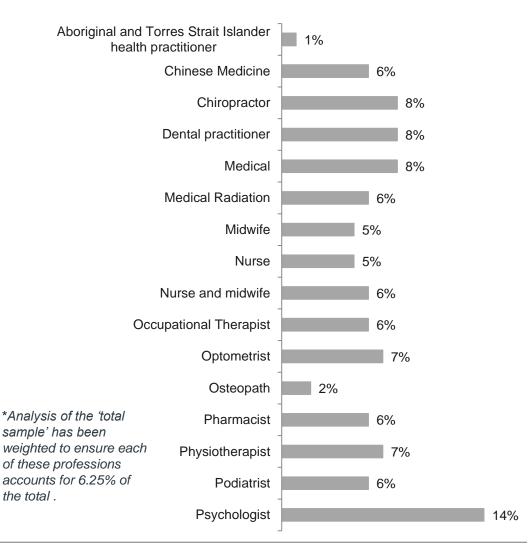


Less than 2 years 6% 3-5 years 13% 6-9 years 14% 10-14 years 14%

11%

42%

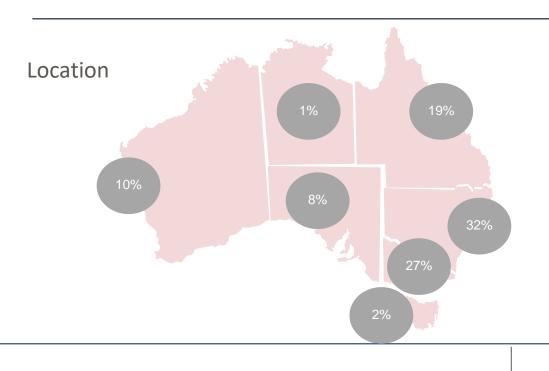
Practitioner type*



15-19 years

20 years or more

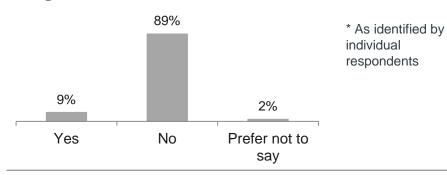
Sample of registered practitioners (n = 5,694)



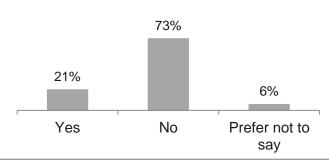
Metro: 66%

Regional: 34%

% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



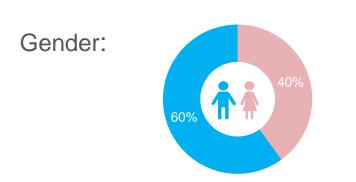
* As identified by individual respondents

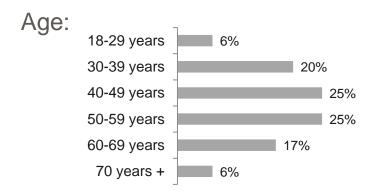
Summary of results of the online survey with registered health practitioners.

Specific insights into the responses from: dental practitioners

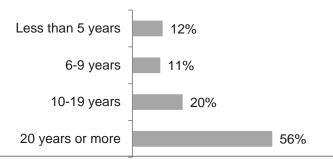


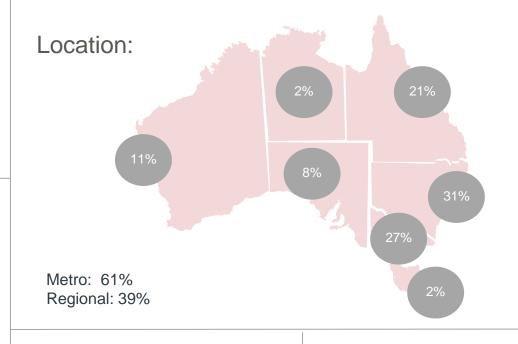
Sample of dental practitioners (n=356)



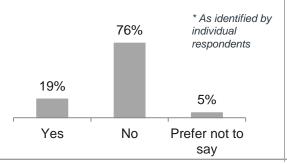


Years in practice:

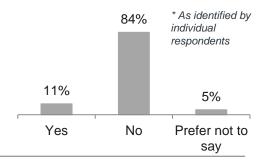




% who have had a complaint ever made against them to AHPRA or their Board as a registered Health Practitioner*



% who have ever been audited to check their compliance with the mandatory registration standards*



Perceptions of the Dental Board of Australia (Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with the (National Board)? Base: Total sample of practitioners registered with this specific Board (n=356)

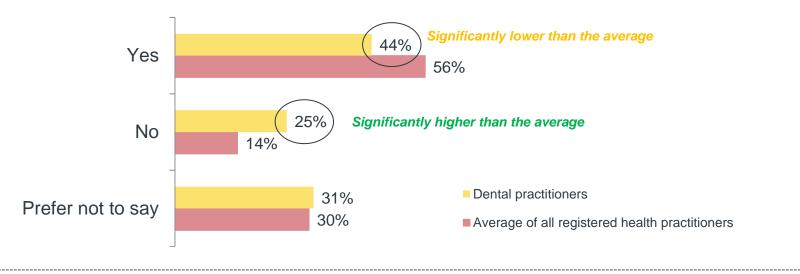
Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Rigid	39%	(-)
Necessary	35%	(-1%)
Bureaucratic	32%	(+4%)
Administrators	32%	(-4%)
For practitioners	25%	(-9%)
For the public	24%	(+1%)
Decision-makers	23%	(-3%)
Out of touch	20%	(+6%)
Intimidating	18%	(+7%)
Controlling	17%	(+5%)

Perception	% of practitioners with that perception of the Board	Difference compared to the average across all professions
Rigid	15%	(+3%)
Competent	14%	(+3%)
Poor communicators	11%	(-)
Fair	11%	(-)
Antiquated	11%	(+5%)
Secretive	10%	(+2%)
Trustworthy	10%	(-1%)
Aloof	9%	(+1%)
Antiquated	8%	(-8%)
Shows leadership	7%	(-5%)

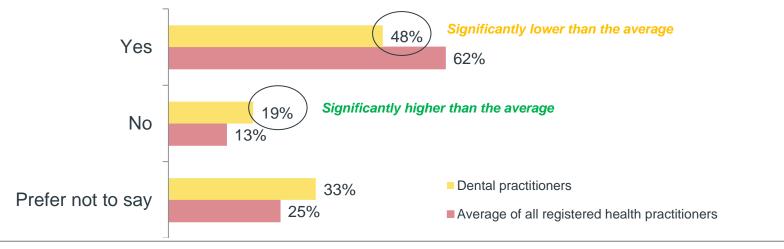
Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in the Dental Board of Australia

Q. Do you feel confident that your National Board is doing everything it can to keep the public safe?



Q. Do you trust your National Board?



What are the indicators of trust and barriers to trust in the Dental Board of Australia

Indicators of trust: 48% trust the Board

Sensible people doing their best

I have no reason to distrust them

Competent body run by ethical practitioners

I believe they have a balanced approach to spurious claims from the public . No one is guilty first Investigators are balanced in their approach

I have read their Guidelines and policies and seen a number of their decisions and I agree with most of them

Run by a Noble profession and does the right thing, with proper investigation and uses mitigation in its decision making.

They are more accessible and have been for many years Another necessary bureaucracy.

I know local representatives and I know they are honest and fair

I think they maintain good professional guidance for dentists and the safety of the public

Barriers to trust: 19% DO NOT trust the Board

Finding to many guidelines and regulations has lots of grey areas. Not set standard national regulations. Also sometimes feel like it is govern by the "boys club" and members of the board is out of touch with the day to day work experience of a dental professional. Very traditional and not catching up with the rest of international standards

Standards not being maintained. Health insurance company's have to much say in the running of dentistry and are stronger influence. Do not enforce the guidelines. not to sure of their agenda.

Respond only to complaints. Not pro-active. Underfunded.

It seems to now be a political organisation. Vested interests within the board seem to be pushing agendas that are not necessarily in the public interest.

Skewed to the public's favour

Presumption of guilt of practitioner on receipt of a complaint

Completely out of touch with what is happening. A national board is far too removed from each state and the actual "goings on".

Full list of responses provided separately

Perceptions of AHPRA amongst dental practitioners

(Top 20 associations)

Q. Which of the following words or statements, if any, do you strongly associate with AHPRA?

Base: Total sample of practitioners registered with this specific Board (n=356)

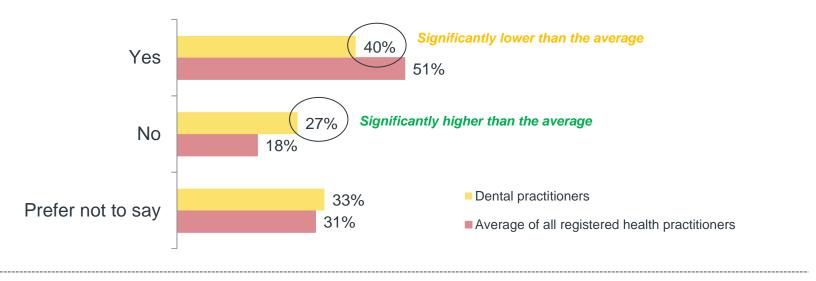
Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Administrators	48%	-5%
Bureaucratic	45%	+2%
Regulators	45%	-10%
For the public	39%	+1%
Necessary	33%	-7%
Intimidating	23%	+5%
Controlling	22%	+4%
Out of touch	21%	+7%
For practitioners	20%	-7%
Decision-makers	17%	-6%

Perception	% of practitioners with that perception of AHPRA	Difference compared to the average across all professions
Rigid	17%	-2%
Poor communicators	15%	-1%
Accessible	13%	+1%
Competent	11%	-3%
Fair	11%	+2%
Secretive	10%	+1%
Aloof	9%	-
Approachable	8%	+1%
Trustworthy	7%	-1%
Responsive	7%	-

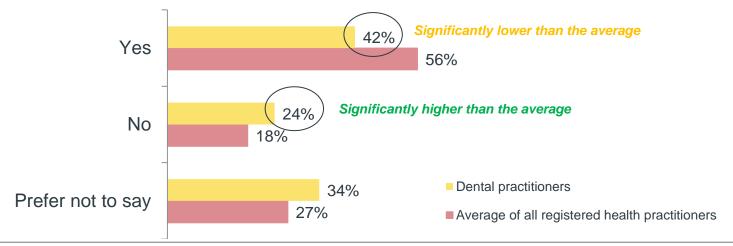
Green indicates a result *significantly higher* than the average across all professions. **Orange** indicates a result *significantly lower* than the average across all professions.

Levels of confidence and trust in AHPRA amongst dental practitioners

Q. Do you feel confident that **AHPRA** is doing everything it can to keep the public safe?



Q. Do you trust AHPRA?



What are the indicators of trust and barriers to trust in AHPRA amongst Dental practitioners

Indicators of trust: 42% trust AHPRA

Most Australian registration bureaucracies are reliable.

Because it monitors and maintains our registration amongst other things.

Because I was audited.

it is a professional trust that they are doing the right thing as an authority figure.

They do what they've got to do.

Haven't heard, seen or experienced anything negative so far.

My dealings with APRHA have been positive.

They do a good job of being the governing body for registration of healthcare.

Due to the "low rate of incidence" experienced by the public.

It provides a framework and governing body for practitioners to adhere to and practice safely and this in turn supports and protects the public.

Barriers to trust: 24% DO NOT trust AHPRA

Insufficient screening of immigrant dentists. Not enough consideration to distribution of dentists. Immigrants are not forced to go to regional areas where they are needed.

it is entirely bureaucratic and toothless in matters of genuine importance.

I have heard of cases where they give too much credit to complainants often not having justifiable complaint or evidence prolonging suffering to the professionals involved.

it is separated from the profession and is just a group pf Gov. workers with no idea of what is required placing blanket requirements which are of no real benefit but are just window dressing.

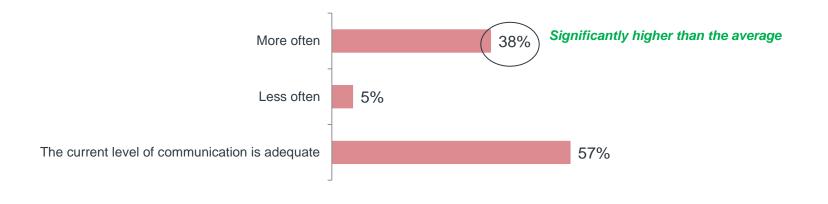
Based on my experience and dealings with them, they seem to be bureaucratic and difficult to deal with if you have an issue that is not routine for them.

Seems to be heavily skewed against practitioners. I have never had a complaint made against me but know a few whom have had unfair complaints against them with a lot of stress caused. Seems to be a "Guilty until proven Innocent" system.

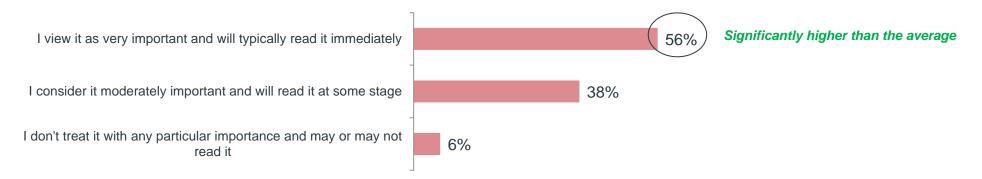
Full list of responses provided separately

Response to communication by the Dental Board of Australia

Q. Would you like (National Board) to communicate with you....?



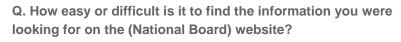
Q. How do you typically respond to communication you receive from (National Board)?



Base: Total sample of practitioners registered with this specific Board (n-356)

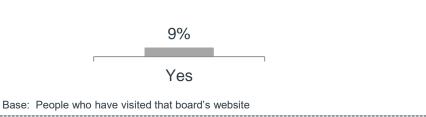
Use of the Dental Board of Australia website







Q. Is there any information you have looked for on the website of (National Board) but not been able to find?



Reasons for visiting the National Board website



Additional information sought by practitioners include (but not limited to)...

- If you don't get the location correct then you will be told that a certain practitioner doesn't exist when you know that they do exist
- · Break down of where my fees are being spent
- Specific maintenance of dental records- how long to keep them
- What happens if you don't practice dentistry for 5 years... what do you do to get back in the workplace?
- The email link for committee vacancies was returned as not the correct email.



Additional feedback from dental practitioners

Sample of open ended responses (full list of responses provided separately)

'Commercialisation' of Dental Practice is undesirable and often not conducive to high standard of practice. Insurer owned practice equally can lead to lower levels and standards of care.

I feel the Board / AHPRA should be more pro-active and respond to breaches (e.g. acting outside scope of practise, misleading advertising) before waiting for a complaint to come in.

Necessary national regulatory associations better than separate state-based ones. Keep it simple.

I am hoping AHPRA can justify its fees. How much is it wasting? Why are the annual fees so high?

AHPRA is fine. Dental board needs to be more proactive in controlling the unethical practice of dentists who not only operate outside their area of competence and training but also promote unproven and controversial treatment modalities.

Organisation is too broad to cater for individual professions specific issues Works fine as an entity for registration.

Need to ensure better distribution of dentists to regional areas. Need to examine immigrant dentists and insist they work for 5 years in regional areas. Need to deregister repeat offenders.

I think registration each year is expensive. CPD hours are unreasonable for certain practitioners with a limited scope of practice. The hours required should not be the same as practitioners with a much broader scope and this should be addressed.

The board was better when it was smaller, state based and those in charge knew the practitioners. That way people would be professionally shamed and have harsher punishments, rather then the monstrosity it has become where many practitioners don't even care what AHPRA does because they are just an annoying loud toothless tiger.

Unfortunately compliance is time consuming but a necessary evil that takes you away from your core practice adding to the cost of running a business that is passed on to the consumer and private health funds who often complain about the ever increasing costs to protect the public.

It should not be so easy for patients to complain, as many patients complain just to get free treatment.



More information

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