



**Australian Dental Council report of an evaluation of
The University of Queensland's Doctor of Clinical
Dentistry in Dento-Maxillofacial Radiology,
Orthodontics & Prosthodontics**

September 2021

Executive summary

Program provider	The University of Queensland
Program/qualification name	Doctor of Clinical Dentistry in Dento-Maxillofacial Radiology Doctor of Clinical Dentistry in Orthodontics Doctor of Clinical Dentistry in Prosthodontics
Program/qualification abbreviation	DClinDent
Program/qualification code	5404
Head office address, including State	288 Herston Road, Herston, QLD 4006
Campus	Herston Campus
Program length	3 Years
Registration division	Specialist dentist
Registration specialty	Dento-Maxillofacial Radiology, Orthodontics, Prosthodontics.
Qualification type	HE
Australian Qualifications Framework level	9
Accreditation standards version	Accreditation standards for dental practitioner programs (Approved August 2020)
Date of site evaluation	8 -9 September 2021
Date of ADC decision	4 March 2022
Type of accreditation	Re-Accreditation
Accreditation start date	1 January 2022
Accreditation end date	31 December 2026

Background

The University of Queensland offers seven Doctor of Clinical Dentistry (DClinDent) programs, each enabling graduates to apply for registration in different specialisations with the Dental Board of Australia (DBA). The programs are on differing cycles of accreditation, due in part to differences in timing of their introduction.

The University of Queensland offers specialist programs in Dento-Maxillofacial Radiology (DMFR), Endodontics, Oral Medicine, Orthodontics, Periodontics, Prosthodontics and Special Needs Dentistry (SND), but only the DMFR, Orthodontics and Prosthodontics program were reviewed on this occasion.

The ADC last reviewed the DMR, Orthodontics and Prosthodontics programs in 2016. At this point in time each program was accredited for a period of five years, with conditions. The Prosthodontics program was also subject to an additional monitoring visit in 2017 to ensure the program was being implemented as outlined.

All conditions and monitoring requirements for these programs were subsequently addressed within the stipulated time frames. At the time of the 2016 review, the University was in discussion with the Metro North Health Service to enter into an alliance aimed at increasing patient numbers within the newly constructed Oral Health Centre (OHC) at Herston. The Oral Health Alliance (OHA) commenced in January 2017 and integrated the activities of the Metro North Hospital and Health Service Oral Health Alliance (MNH HS OHS) with The University of Queensland's School of Dentistry. The OHA has been in operation since this time, with MNHHS OHS taking responsibility for the day-to-day operation of the OHC at Herston.

Overview of evaluation

An Accreditation Team (AT) received the School of Dentistry's 65-page submission against the Accreditation Standards and various appendices. The AT requested additional information and clarification prior to the visit following its teleconference held on 23 July 2021.

The AT was scheduled to undertake a site visit to the OHC on 9 and 10 September 2021, but due to COVID-19 travel restrictions, the review was undertaken virtually. Meetings were held over Zoom with the following:

- Head of School
- Doctor of Clinical Dentistry Program Director
- Director: Learning and Teaching
- Oral Health Alliance Academic Director
- Oral Health Centre Clinical Director
- Academic Lead, Curriculum Design and Integration
- Discipline leads for each specialisation
- Academic and clinical staff teaching into each specialisation
- Current students for all disciplines
- Recent graduates for all disciplines
- Employers
- Academic staff coordinating research teaching within the DCLinDent program
- Professional staff, including the School Manager, Team Leader and Senior Administration Officer
- Student support staff

The AT was provided videos of the facilities within the OHC.

The findings of this report are based on the AT's assessment of the material outlined above and interview evidence.

Key findings

The provider is well placed to deliver the program. The program is financially well resourced and there is an adequate staffing profile to support each specialisation. The clinical facilities are very good, with all students undertaking clinical activities at the OHC, with access to new teaching and research facilities, including expanded simulation labs and new equipment. However, the AT did hear that the small field cone beam system has been offline for approximately 16 months and the provider is still negotiating with the Metro North Health Service to resolve this issue so that students have access to report on this modality within the OHC.

Access to the clinical facilities and a ready supply of patients is assured through an agreement with Metro North Hospital.

All three programs are clearly structured, and each has a clear philosophy and objectives. There is scaffolding of student learning across the program and ample opportunity for interdisciplinary interaction.

Whilst evidence was provided of mechanisms for student, staff and industry feedback into the programs, it was not clear how the provider formally seeks or utilises feedback from dental consumers. The integration of such feedback into the governance structure is needed.

There is a reliance in the DMR program on reporting of historical or archival cases, with limited access to live reporting. This does raise concerns for the AT, since live reporting is a core component of the role of a specialist in DMR and a lack of extensive experience in this space leads the AT to question the readiness of graduates in this specialisation to practise. A broadening of experience for reporting soft tissue changes in multi-detector CT and MRI studies would enhance the students learning and readiness for practice.

The AT identified the lack of digital workflow as an area of concern, especially in the Prosthodontics program. There is one chairside intraoral scanner (Trios) for use by students and one wet milling unit (VHF N4), which is underutilised due to lack of trained technical staff. The equipment is at least five years old. Whilst the software for both scanners has recently been updated and students do have access to this, but there is no on-site laboratory support

It was not clear to the AT that Prosthodontics students are provided opportunities to provide clinical treatment of patients referred for maxillofacial prosthodontics or orofacial pain and this is deemed to be a deficiency.

In terms of assessment, the AT saw evidence that a range of both formative and summative assessment tools are used in the program.

Whilst cultural awareness and safety relating to Aboriginal and Torres Strait Islander peoples is well documented in the submission limited information was provided about other diverse groups and populations. At the site visit the AT was informed that a cultural safety training module is being implemented and the providers is requested to provide an update about the progress in doing so.

A number of further recommendations have been made where areas were identified for potential improvement.

ADC accreditation decision

The ADC has determined that the following programs offered by The University of Queensland are reaccredited for a period of five (5) years until **31 December 2026**:

- Doctor of Clinical Dentistry in Dento-Maxillofacial Radiology
- Doctor of Clinical Dentistry in Orthodontics
- Doctor of Clinical Dentistry in Prosthodontics

subject to the following conditions:

1. To meet Standard 2 – Academic governance and quality assurance, the provider is requested to submit a report to the ADC by **30 June 2022** advising how stakeholder evaluation and wide input by a range of dental stakeholders including dental consumers is incorporated into quality improvement processes.

For the Doctor of Clinical Dentistry in Dento-Maxillofacial Radiology program:

2. To fully meet Standard 3 – Program of study, the School of Dentistry is required to provide evidence by **30 June 2022** of the opportunities available to students to provide live case reporting during the program.

For the Doctor of Clinical Dentistry in Prosthodontic program:

3. To fully meet Standard 3 – Program of study, the School of Dentistry is required to provide evidence by **30 June 2022** of:
 - a. the formalisation of the didactic teaching of orofacial pain and demonstrate that students are provided opportunities to provide clinical treatment of patients referred for the management of orofacial pain.
 - b. the formalisation of the didactic teaching of maxillofacial prosthodontics and demonstrate that students are provided opportunities to provide clinical treatment of patients referred for this treatment.

As a monitoring requirement for the Doctor of Clinical Dentistry programs in Dento-Maxillofacial Radiology, Orthodontics and Prosthodontics, the School of Dentistry is required to provide an update regarding the implementation of cultural safety training as advised to the AT during the visit. A report is to be provided by **30 June 2022** detailing the actions taken.