

About respondent

Name	Kanchan Marcus
What is your interaction with the ADC and/or DC(NZ)?	Community / Consumer representative, PhD student Population Oral Health

Feedback on draft Accreditation standards

	Partly.
Do you consider that the draft Standards are at the threshold level required for public safety? (Yes, no, partly, do not know)	I agree that cultural competency and patient safety is vital. Further inclusions to cultural competency skills should include culturally and linguistically diverse groups, including migrants. The migrant population of Australia is growing and the median a
Do you consider that the draft Standards are applicable across all types of education providers delivering accredited programs? (Yes, no, partly, do not know)	Yes.

Do you agree with the following specific proposals as incorporated in the draft Standards?

In New Zealand: A dedicated domain in the Standards on cultural competence for Māori and Pacific peoples, and its criteria (Domain 6a in the draft Standards). (Yes, no, partly, do not know)	Yes. It's important to include these groups as they experience greater health disparities compared to the rest of the population. Providing culturally appropriate care is important for patient safety and sensitivity.
In Australia: A dedicated domain in the Standards on cultural safety for Aboriginal and Torres Strait Islander Peoples and its criteria (Domain 6b in the draft Standards). (Yes, no, partly, do not know)	Yes. It's important to include Aboriginal and Torres Strait Islander Peoples as they experience greater health disparities compared to the rest of the population. Providing culturally appropriate care is important for patient safety and sensitivity.
The introduction of a preamble explaining the purpose of the Standards and how they will be used. (Yes, no, partly, do not know)	Yes. Great to understand the context.
An additional criterion requiring programs to ensure students understand the legal, ethical and professional responsibilities of a registered dental practitioner (criterion 1.8 in the draft Standards). (Yes, no, partly, do not know)	Yes. Ethics and governance of practices will provide greater patient safety for consumers.

Amended criteria to require the involvement of dental consumers in accredited program design, management and quality improvement (criterion 2.2 in the draft Standards).

(Yes, no, partly, do not know)

Yes.

Consumers can provide insights from their experiences. This can help improve the delivery of oral health care to the Australian population.

For internal, external, professional and academic input into program design and development to be combined into one criterion (criterion 2.2 in the draft Standards).

(Yes, no, partly, do not know)

Do not know.

The revision of the criteria in Domain 2 – Academic governance and quality assurance to clarify that the focus of the Standards is at the program level.

(Yes, no, partly, do not know)

Do not know.

A revised criterion regarding intra- and inter-professional education, replacing criterion 3.6 in the existing Standards.

(Yes, no, partly, do not know)

Do not know.

Amendments to the domain on assessment, including changes to the standard statement and to the criteria underneath (Domain 5 in the draft Standards).

(Yes, no, partly, do not know)

Do not know.

Additional comments

Are there any additional Standards that should be added?

(Yes, no, partly, do not know)

Yes.

To include culturally and linguistically diverse migrants under domain 4.8 Cultural safety and cultural competence. Cultural competence is articulated clearly, integrated in the program and assessed, to ensure students are equipped to provide care to diverse groups, migrants and populations.

Are there any Standards that should be deleted or reworded?

(Yes, no, partly, do not know)

Do not know.

Do you have any other comments on the Standards?

Thank you for the opportunity to contribute.