

### About respondent

**I am responding on behalf of:**

An organisation (e.g. education provider, professional association, health authority)

**Please tell us about yourself:**

Respondent skipped this question

**What is your interaction with the ADC? Check all that apply.**

Respondent skipped this question

**Please tell us about yourself:**

**Name:**

Mark Hutton

**Organisation:**

Australian Dental Association

### Consultation questions

**Do you consider the draft Competencies outline what is required of a newly qualified dental practitioner to practice safely and ethically?**

Yes

**(Yes, No, Partly, Do not know)**

**Please give a reason for your answer:**

Respondent skipped this question

**Do you agree with the proposal to combine the Competencies for all five divisions of registration into one document?**

Yes

**(Yes, No, Partly, Do not know)**

**Please give a reason for your answer:**

Respondent skipped this question

**Do you have any comments on the format or structure of the draft Competencies?**

The majority of competencies listed are identical for dentists, dental prosthetists, dental hygienists/therapists and oral health therapists. It would make more sense to have a single list of shared competencies and then highlight the differences for the sake of brevity.

**(Yes, No, Partly, Do not know)**

### Proposed changes to the Competencies

**A change of name to Domain 1 from 'Professionalism' to 'Social responsibility and professionalism'** Yes  
(Yes, No, Partly, Do not know)

**Please give a reason for your answer:** It reflects the changes in the profession, widening the scope from performing merely clinical procedures and being polite.

**The introduction of a definition of 'Cultural safety for Aboriginal and Torres Strait Islander people' into the Terminology section consistent with the National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025.** Yes  
(Yes, No, Partly, Do not know)

**Please give a reason for your answer:** This is much needed. There are many studies that show First Nations people's oral health to be worse than average in Australia, and distrust of the system is always stated as a factor in the under-utilisation of services.

**The introduction of a definition for At-risk groups or populations into the Terminology section of the introduction and the use of the term 'at-risk' within the Competency statements.** Partly  
(Yes, No, Partly, Do not know)

**Please give a reason for your answer:** The definition does not reference these groups as 'at-risk' but instead as 'at an increased risk'. Consideration should be given to aligning the key concept terminology with the definition supplied. Individuals may be at increased risk due to personal circumstances but does not mean they are part of an at-risk population.

Comments on the following groups: - 'People who are ageing', suggest rewording to 'ageing persons requiring additional care or residing in residential and aged care facilities'. - 'Children and adolescents', suggest focusing on 'early childhood'. Early childhood development is considered by the WHO as a SDH; an important life stage that can shape lifelong health and development.[i] Environmental exposures at this age can affect lifetime health with evidence suggesting that dental caries in primary teeth can be an indicator for increased caries experience in later life.[ii] [i] World Health Organization

[Internet]. [place unknown]. About social determinants of health; 2019 [2019 Jan 24]. Available from: [https://www.who.int/social\\_determinants/sdh\\_definition/en/](https://www.who.int/social_determinants/sdh_definition/en/)  
(ii) Li Y, Wang W. Predicting Caries in Permanent Teeth from Caries in Primary teeth: An Eight-year Cohort Study. J Dent Res [Internet]. 2002 [cited 2019 Jan 24];81(8):561-566. Available from: <https://search-proquest-com.elibrary.jcu.edu.au/docview/209465615/fulltextPDF>

**The introduction of a definition of interprofessional collaborative practice and the use of the term within Competency statements.**

Yes

**(Yes, No, Partly, Do not know)**

**Please give a reason for your answer:**

Respondent skipped this question

**The change of terminology from 'patient-centred care' to 'person-centred care', including the updated definition and the use of the terms 'person' or 'individual' within the Competency statements.**

Partly

**(Yes, No, Partly, Do not know)**

**Please give a reason for your answer:**

The term "patient" implies a special relationship with the professional, very different from "customer" or even "client." There is an added level of responsibility and care implicit in this term. In a world where dentistry is becoming increasingly commoditised, it is important to maintain a professional, caring medical relationship, and to change the term from patient to person could weaken this relationship. The term 'patient' may imply a unidirectional relationship, but the relationship is bidirectional by nature

**The revisions to Competency statements in Domain 1, which are consistent with the National Scheme's definition of cultural safety for Aboriginal and Torres Strait Islander Peoples, specifically Competency statements 2 to 5.**

Yes

**(Yes, No, Partly, Do not know)**

**Please give a reason for your answer:**

Respondent skipped this question

**The inclusion in Domain 1 of Competency 11 which requires the**

Yes

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practitioner to 'understand the environmental impacts of health care provision and use resources responsibly, making decisions that support environmentally sustainable healthcare.'

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** Respondent skipped this question

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The revision of communication related Competencies in Domain 2 and Domain 6, which aim to better reflect the needs of those receiving care.

Partly

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** As part of communication competencies, consideration for the newly qualified practitioner's ability to understand and account for the persons level of comprehension to ensure effective communication is necessary.

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The inclusion in Domain 2 of Competency 4 which requires the practitioner to be able to 'recognise, assess, and respond to domestic and family violence risk, prioritise safety, provide information, and refer as required'.

Yes

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** Respondent skipped this question

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The inclusion in Domain 2 of identifying opportunities for improvement and advocating for improved oral health outcomes.

Yes

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** Respondent skipped this question

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The revision of terminology used in Domain 5 to require the application and demonstration of knowledge'

Yes

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** Respondent skipped this question

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### Other changes to the Competencies

**Are there any additional Competencies that should be added?** Do not know

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer:** Respondent skipped this question

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**Are there any Competencies that should be deleted or reworded?** No

(Yes, No, Partly, Do not know)

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**Please give a reason for your answer** Respondent skipped this question

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### Other comments

**Do you have any other comments on the Competencies?** No

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