

**PROFESSIONAL ATTRIBUTES AND COMPETENCIES  
OF THE NEWLY QUALIFIED DENTAL PROSTHETIST**

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Version 1

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## A. Introduction

This document assumes that a dental practitioner in Australia should be:

a scientifically oriented, technically skilled, socially sensitive, professionally minded practitioner who adheres to high standards of professional conduct and ethics and who can function safely and effectively as a member of the health care team on graduation and throughout their professional career.<sup>1</sup>

Under the Health Practitioner Regulation National Law as in force in each state and territory the **Dental Board of Australia** [DBA] registers dental practitioners so that they may practise dentistry in Australia. The categories of dental practitioner registration are:

General registration - Divisions:

- Dentists
- Dental Hygienists
- Dental Prosthetists
- Dental Therapists
- Oral Health Therapists

Specialist registration (dentists only)

Limited registration:

- postgraduate training or supervised practice
- teaching or research
- in the public interest

Non-practising registration

Under general registration the profession's scope of practice for dentists is defined by the DBA to be all parts of dentistry. For the other dental practitioners who practice subsets of dentistry, their profession's scope of practice is as described in the standards and guidelines of the DBA.

It is the intention that attributes and competencies for graduates will be defined for all dental practitioner categories under the general and specialist registers. This document describes the minimum attributes and competencies for the newly graduated dental prosthetist to be able to be registered. It is recognised that after registration the newly graduated dental prosthetist must understand and practise within the regulatory limits that are prescribed on independent and unsupervised practice.

This document does not describe the profession scope of practice for dental prosthetists. However, it does reflect this scope of practice and so should be read in the context of the *Scope of practice registration standard* and the associated *Guidelines – Scope of practice registration standard* published by the DBA. Under the current DBA *Scope of practice* and *Guidelines* (that apply from 30 June 2014) dental prosthetists 'are members of the dental team...[they] work as independent practitioners in the assessment, treatment, management and provision of removable dentures; and flexible, removable mouthguards used for sporting activities'.<sup>2</sup>

The ADC has adopted the same structure and format for the attributes and competencies documents that it has published for all divisions of registered dental practitioner. Consequently, the statements of attributes

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<sup>1</sup> A number of publications from Australian and international dental and regulatory organisations have been drawn on in preparing this document. This has included material from Canada, New Zealand and United Kingdom. The ADC acknowledges the work of these organisations. There is benefit to the dental profession to have appropriate consistency and comparability between countries in competencies statements such as these. (See the Bibliography at the end of the document for details of the material used.)

<sup>2</sup> Taken from the Dental Board of Australia documents *Scope of practice registration standard* [2014, p1] and *Guidelines – Scope of practice registration standard* [2014, p3]. (see Bibliography for details)

and competencies may be worded in a similar manner, although the knowledge base within them may vary between the different divisions of dental practitioner.

This document will be reviewed as required and within five years of the date it is adopted.

## B. Purpose of this Document

The **Australian Dental Council** [ADC] will use this document as a reference point in carrying out its key functions of:

- ▶ accreditation of education and training programs for dental prosthetists; and
- ▶ assessment of internationally qualified dental prosthetists (by whatever title) for practice in Australia.

It is anticipated that **educational institutions** seeking to have their education and training programs accredited by the ADC will use the document to assist them in the self-assessment stage of the accreditation process and to assess a program's effectiveness. The document does not prescribe the curriculum of a training program, nor is it intended to be read as a set of learning objectives.

## C. Terminology

The concepts described in section D below refer to the achievement of attributes, knowledge and skill capabilities; the term "competency" has been used in this document as a shorthand way to refer to these concepts.

The term "competency" has traditionally been associated with technical training. It is important therefore to clarify how it is being used in this document and to caution against reducing the framework to a checklist of competencies, each of which is dealt with in isolation from the others as this does not do justice to the holistic interactions required between knowledge, skills, attitudes and experience in the hands of a practising dental practitioner. Problem-solving skills, professionalism, empathy, ethics and other higher order attributes are just as important to professional clinical practice as technical abilities. While challenging to measure, these attributes are a vital component of current dental education curricula.<sup>3</sup>

Consequently, for the purposes of this document the following **definitions of key concepts** are assumed and should be taken into account when interpreting the individual attributes and competencies.

**Competency** includes knowledge, experience, critical thinking and problem-solving skills, professionalism, ethical values, diagnostic and technical and procedural skills. These components become an integrated whole during the delivery of patient care by the competent practitioner. Competency assumes that all behaviours are performed with a degree of quality consistent with patient well-being and that the practitioner self-evaluates treatment effectiveness. The term covers the complex combination of knowledge and understanding, skills and attitudes needed by the graduate practitioner. Competencies are outcomes of clinical training and experience.

**Competent** the behaviour expected of the beginning practitioner. This behaviour incorporates understanding, skill and values in an integrated response to the full range of requirements presented in practice.

The following terms which appear in the domain descriptions embody complex ideas and also need to be defined:

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<sup>3</sup> Adapted from Universities Australia's response (p3) to the National Health and Hospitals Reform Committee's *A Healthier Future for All Australians – Interim Report* (March 2009). (see Bibliography for details)

<b>Critical thinking</b>	the process of assimilating and analysing information, encompassing an interest in finding new solutions, a professional curiosity with an ability to admit to any lack of understanding, a willingness to examine beliefs and assumptions and to search for evidence that supports the acceptance, rejection or suspension of those beliefs and assumptions, and the ability to distinguish between fact and opinion.
<b>Culturally safe and sensitive practice</b>	involves an awareness of the cultural needs and contexts of all patients to obtain good health outcomes. This includes: having knowledge of, respect for and sensitivity towards the cultural needs and background of the community practitioners serve, including those of Aboriginal and/or Torres Strait Islander Australians and those from culturally and linguistically diverse backgrounds; acknowledging the social, economic, cultural, historic and behavioural factors influencing health, both at individual and population levels; understanding that a practitioner's own culture and beliefs influence his or her interactions with patients; and adapting practice to improve engagement with patients and health care outcomes. <sup>4</sup>
<b>Delegation</b>	involves one practitioner asking another person or member of staff to provide care on behalf of the delegating practitioner while that practitioner retains overall responsibility for the care of the patient or client. <sup>5</sup>
<b>Diagnosis</b>	the identification by the dental prosthetist of the presenting clinical condition of the patient in relation to potential removable dental prosthetic treatment.
<b>Evidence-based dentistry</b>	an approach to oral health care that requires judicious integration of systematic assessments of clinically relevant scientific evidence relating to the patient's oral and medical condition and history and oral health literacy, and integrated with the practitioner's clinical expertise and the patient's treatment needs and preferences.
<b>Examination</b>	the process by which a dental prosthetist inspects a patient's intra-oral and extra-oral features and any existing denture in relation to potential removable dental prosthetic treatment or referral. It generally follows the taking of the medical history — an account of the symptoms as experienced by the patient. Together with the medical history, the physical examination aids in determining the correct diagnosis and devising the treatment plan. This data then becomes part of the dental record.
<b>Financial consent</b>	is part of informed consent and is a patient being made aware of all the fees and charges involved in a course of treatment, preferably before the health service is provided. <sup>4</sup>
<b>Health promotion</b>	the process of enabling individuals and communities to increase control over the determinants of health and thereby improve their health; includes education of patients and the public to prevent disease and maintain health, public health actions to protect or improve oral health and promote oral well-being through

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<sup>4</sup> Adapted from the Dental Board of Australia document *Code of conduct for registered health practitioners* (2014, p12)

<sup>5</sup> Taken from the Dental Board of Australia document *Code of conduct for registered health practitioners* (2014, p15)

behavioural, educational and enabling socioeconomic, legal, fiscal, environmental and social measures.

<b>Informed consent</b>	a person's voluntary decision about health care that is made with knowledge and understanding of the benefits and risks involved and of the treatment options available, including the potential financial costs. <sup>6</sup>
<b>Manage</b>	to 'manage' the oral health care needs of a patient includes all actions performed by a practitioner that are designed to alter the course of a patient's condition. Such actions may include providing education, advice, diagnosis, treatment by the practitioner, treatment by the practitioner after consultation with another health care professional, referral of a patient to another health care professional, monitoring treatment provided and evaluating oral health outcomes; it may also include observation or providing no treatment. 'Manage' assumes the use of appropriate diagnostic processes and the least invasive therapy necessary to gain a successful outcome in accordance with patient wishes.
<b>Patient</b>	includes the person receiving health care and also any substitute decision makers for patients who do not have the capacity to make their own decisions. A substitute decision maker may be a parent or carer or a legally appointed decision maker.
<b>Patient-centred care</b>	to display cultural and social sensitivity, respect for patients' differences and autonomy, to diagnose, relieve pain and suffering in an empathic and kind manner, to coordinate continuous care, advocate disease prevention and promote a healthy lifestyle in a holistic approach to the individual patient as well as the community.
<b>Referral</b>	involves one practitioner sending a patient or client to obtain an opinion or treatment from another practitioner. Referral usually involves the transfer (in part) of responsibility for the care of the patient or client, usually for a defined time and a particular purpose, such as care that is outside the referring practitioner's expertise or scope of practice. <sup>5</sup>
<b>Removable dental prostheses/prosthetic treatment</b>	in the context of this document, includes patient removable dentures for dentate and edentulous patients; flexible, removable mouthguards used for sporting activities; and other procedures that may be described in the DBA <i>Scope of Practice</i> and its associated <i>Guidelines</i> . <sup>2</sup>

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<sup>6</sup> Adapted from the Dental Board of Australia document *Code of conduct for registered health practitioners* (2014, p11)

## The Structure of the Statements

The range of personal qualities, cognitive abilities and applied knowledge and skills expected of the newly qualified practitioner have been clustered into the following six domains:

- ▶ **Professionalism**
- ▶ **Communication and Social Skills**
- ▶ **Critical Thinking**
- ▶ **Health Promotion and Education**
- ▶ **Scientific and Clinical Knowledge**
- ▶ **Patient Care** (which has sub-domains of Clinical Information Gathering, Diagnosis and Management Planning, Clinical Treatment and Evaluation).

The domains represent the broad categories of professional activity and concerns that occur in the general practice of dental prosthetics. As indicated above, there is a degree of artificiality in the classification, as effective professional performance requires the integration of multiple competencies.

The Competencies Statements below must be read in the context of the matters outlined above and the definitions provided.

## D. The Competencies Statements

The goal of dental prosthetist education in Australia is to develop dental prosthetists who are competent to practise safely and effectively within the profession's and their individual scope of practice, and who have an appropriate foundation for professional growth and development so that they can respond to diverse and changing health needs throughout their professional lives. Dental prosthetists must have an understanding of, and be responsive to, the oral health needs of Australian communities and individual citizens and apply knowledge, clinical and technical skills and professional attitudes to provide safe and effective patient-centred care. The term "competencies" covers the complex combination of knowledge and understanding, skills and attitudes needed by the graduate.

Domain	Description
<b>1. Professionalism</b>	
covers personal values, attitudes and behaviours	<p data-bbox="440 725 1046 759"><i>On graduation a <b>dental prosthetist</b> will be able to:</i></p> <ol data-bbox="440 790 1453 2069" style="list-style-type: none"> <li data-bbox="440 790 1453 904">1. demonstrate appropriate caring behaviour towards patients and respect professional boundaries in relationships between themselves and patients and members of the community</li> <li data-bbox="440 925 1453 1039">2. provide patient-centred care, respect patients' dignity and choices; acknowledge that all interactions, including history taking, diagnosis, treatment planning and treatment, must focus on the patient's best interests</li> <li data-bbox="440 1059 1453 1240">3. demonstrate a commitment to providing culturally safe and culturally competent practice that recognises the distinct needs of Aboriginal and Torres Strait Islander peoples in relation to oral health care provision; and that facilitates access to services and embeds cultural perspectives through joint decision-making with awareness of the impact of own cultural assumptions</li> <li data-bbox="440 1261 1453 1330">4. recognise and respect patients' rights, particularly with regard to confidentiality, privacy, informed consent and financial consent</li> <li data-bbox="440 1350 1453 1397">5. practise evidence-based dentistry within their scope of practice</li> <li data-bbox="440 1417 1453 1487">6. achieve optimal patient care within the limitations of patient consent and dental prosthetists' scope of practice</li> <li data-bbox="440 1507 1453 1621">7. recognise professional and personal limitations, including the impact of own cultural background, assumptions, values and attitudes on patient care, and know when to refer or seek advice appropriately</li> <li data-bbox="440 1641 1453 1756">8. employ a critically reflective approach to practice which involves learning from experience and participating in and contributing to peer review as part of broader continuing professional development</li> <li data-bbox="440 1776 1453 1890">9. demonstrate an ethos of lifelong professional growth and development, and support continuing professional development for all members of the dental team</li> <li data-bbox="440 1910 1453 2069">10. understand the ethical principles and legal responsibilities involved in the provision of oral health care to individual patients, to communities and populations, practising with personal and professional integrity, honesty and trustworthiness</li> </ol>

Domain	Description
	<p>11. understand and apply Commonwealth, State and Territory legislation relevant to practice as a dental prosthetist and, in particular, work within the scope of practice<sup>7</sup> of a dental prosthetist under the <i>Health Practitioner Regulation National Law</i>, as in force in each state and territory, and the registration standards, guidelines and codes issued by the Dental Board of Australia</p> <p>12. use contemporary information technology for documentation, continuing education, continuing professional development, communication, management of information and applications related to health care</p> <p>13. in accordance with the relevant workplace health and safety legislation, manage and maintain a safe working environment; have an appreciation of the systems approach to quality health care and safety, and the need to adopt and practise health care that maximises the safety of patients, staff and members of the dental team</p> <p>14. understand systems of health care provision in a culturally diverse society including their advantages and limitations, the principles of efficient and equitable allocation and use of finite resources, and recognition of local and national needs in health care and service delivery</p> <p>15. understand how to manage the provision of oral health care including planning, organising and delivering oral health care in public or private practice settings to achieve better health outcomes</p> <p>16. understand basic principles of practice administration, financial and personnel management in a dental practice</p> <p>17. appreciate the personal responsibility to contribute to the generation of knowledge, to foster interprofessional learning opportunities, and to engage in mentoring processes</p> <p>18. understand the inter-related competencies that are the basis for effective collaboration and team-based practice and contribute appropriately to the interdisciplinary healthcare team to provide comprehensive dental and general health care</p>

## 2. Communication and Social Skills

covers interpersonal skills, ability to work cooperatively and to communicate effectively with a range of people

*On graduation a **dental prosthetist** will be able to:*

1. communicate effectively, interactively, respectfully and reflectively with patients in a manner that takes into account factors such as their age, intellectual development, social and cultural background
2. provide open, complete and timely communication throughout the period of care
3. establish a patient–practitioner relationship that allows the effective delivery of dental treatment

<sup>7</sup> The term ‘scope of practice’ is used in the manner defined by the Dental Board of Australia in its documents *Scope of practice registration standard* [2014] and *Guidelines – Scope of practice registration standard* [2014]. (see Bibliography for details).

Domain	Description
	<p>4. integrate and inform patients' expectations, desires and attitudes when planning and delivering patient-centred health care</p> <p>5. understand and apply the principles of culturally safe and sensitive practice and provide care in an empathic way that ensures all people, patients and co-workers, are treated with dignity and respect, including Aboriginal and/or Torres Strait Islander Australians and those from culturally and linguistically diverse backgrounds</p> <p>6. provide information in a manner that ensures patients are advised of options including referral and expected outcomes to enable them to make informed decisions when consenting to any treatment</p> <p>7. communicate effectively with the dental team and other health professionals involved in patients' care and convey written and spoken information clearly and in a timely manner</p> <p>8. communicate responsibly in all communication media, including compliance with relevant codes as promulgated by the Dental Board of Australia</p> <p>9. ensure the personal health information of patients is treated in confidence and shared only for their healthcare while remaining consistent with professional guidelines, the Dental Board of Australia's <i>Code of Conduct</i> and in compliance with privacy legislation</p> <p>10. work effectively as a member of dental and wider healthcare teams, acknowledging and respecting own and others' contributions and displaying appropriate professional behaviour and effective communication and collaboration with other team members while demonstrating personal accountability to patients and the team</p> <p>11. recognise the range of skills and knowledge that contribute to effective leadership of dental and wider healthcare teams and contribute to teams, including leading and being led as appropriate to the model of care, recognising the importance of clear delineation of roles and responsibilities and the value of distributed leadership in influencing health outcomes</p>

### 3. Critical Thinking

<p>covers matters relating to the acquisition of knowledge and its application to identify and solve real-life problems</p>	<p><i>On graduation a <b>dental prosthetist</b> will be able to:</i></p> <p>1. utilise critical thinking, diagnostic and treatment planning and problem-solving skills</p> <p>2. apply decision-making, clinical reasoning and judgment to develop a differential, provisional or definitive diagnosis, as relevant to the practice of removable dental prosthetics and within scope of practice, by interpreting and correlating findings from the patient's personal, medical and dental history, diagnostic material and clinical examination, taking into account the social and cultural background of the patient and the longer term consequences on the patient's oral and general health</p> <p>3. evaluate and integrate emerging trends in health care as appropriate</p>
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Domain	Description
	<ol style="list-style-type: none"> <li>4. formulate treatment plans based on the patient assessment and diagnosis and evidence-based practice, and incorporating clinical expertise and patient views</li> <li>5. locate and evaluate evidence in a critical and scientific manner to support professional practice and use information technology appropriately</li> <li>6. evaluate the validity of claims related to the risks/benefits of products and techniques</li> </ol>

#### 4. Health Promotion and Education

<p>covers educating about oral health, its relationship to general health and enabling individuals to assume responsibility for their oral health</p>	<p><i>On graduation a <b>dental prosthetist</b> will be able to:</i></p> <ol style="list-style-type: none"> <li>1. promote and improve the oral health of individuals and the community by understanding and applying the principles of health promotion and disease prevention which benefit oral health and/or general health and, in particular, explain how removable dental prosthetic treatment can contribute to long term oral health, safety and well-being</li> <li>2. appreciate the determinants of health and healthy behaviours and encourage and support patients to take interest in, and responsibility for, the management of their health</li> <li>3. provide advice to patients across the life span about the aetiology and prevention of oral disease, including self-care strategies and home management, using effective and evidence-based education and communication strategies</li> <li>4. recognise and appreciate the need to contribute to the improvement of oral health beyond those served in traditional practice settings</li> <li>5. maintain own health and understand its importance in relation to occupational hazards and its impact on the ability to practise</li> <li>6. promote health maintenance of colleagues</li> </ol>
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#### 5. Scientific and Clinical Knowledge

<p>covers knowledge, clinical and technical skills used in dentistry</p>	<p><i>On graduation a <b>dental prosthetist</b> will be able to:</i></p> <ol style="list-style-type: none"> <li>1. understand and apply knowledge of the scientific basis of dentistry, including the relevant biomedical, physiological, psychosocial, engineering and materials sciences, the mechanisms of knowledge acquisition, scientific method and evaluation of evidence</li> <li>2. apply knowledge and understanding of the basic biological, medical, technical and clinical sciences in order to recognise the difference between normal and pathological conditions relevant to clinical dental practice, and to refer appropriately</li> <li>3. understand how to prevent and recognise anomalies and diseases of the teeth, mouth, jaws and associated structures, and to refer appropriately</li> <li>4. select treatment options based on the best available information to achieve the most appropriate and favourable outcome for the patient</li> </ol>
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Domain	Description
	5. understand and apply the scientific principles of sterilisation, disinfection and antisepsis, and cross infection control 6. design and fabricate, repair and modify various types of dental appliances in the laboratory environment 7. recognise the impact of pharmacology and therapeutics relevant to the clinical treatment of patients and refer as appropriate to other relevant health practitioners 8. appreciate the relevance of medical conditions and medications that can impact on oral health or make the provision of dental treatment unsafe and refer appropriately
<b>6. Patient Care</b>	
<b>6.1 Clinical Information Gathering</b>	<i>On graduation a <b>dental prosthetist</b> will be able to:</i>
	1. obtain and record a relevant history of the patient’s psychosocial, medical, oral health status 2. confirm the identity of the patient and perform an appropriate examination, interpret and record the findings and organise further investigations when necessary in order to arrive at an appropriate treatment plan 3. recognise own limitations and know when and how to refer a patient for an appropriate opinion and/or treatment, where the diagnosis and/or treatments are beyond own skills or scope of practice or to confirm prescribed treatment, or where an oral pathological condition or the patient’s general health would be detrimental to successful treatment 4. recognise and select when appropriate clinical, laboratory and other diagnostic procedures are required, and understand their diagnostic reliability and validity 5. maintain an accurate, consistent and legible contemporaneous record of patient management including referral, delegation or handover <sup>8</sup>
<b>6.2 Diagnosis and Management Planning</b>	<i>On graduation a <b>dental prosthetist</b> will be able to:</i>
	1. perform a systematic intra- and extra-oral clinical examination appropriate to the patient, and record the findings 2. formulate and record a diagnosis, management and/or referral plan which meets the needs of patients and which is within scope of practice 3. propose, discuss and agree treatment options, including referral, with the patient, including the extent and duration of treatment, that are sensitive to each patient’s individual needs, goals and values, compatible with contemporary methods of treatment, and congruent with an appropriate oral health care

<sup>8</sup> Using these terms in the manner defined in the Dental Board of Australia document *Code of conduct for registered health practitioners* (2014, p15)

Domain	Description
	<p>philosophy</p> <p>4. understand the processes underlying the common diseases of the oral mucosa and other associated structures, as well as oral manifestations of systemic diseases</p> <p>5. recognise abnormalities of the oral tissues and make appropriate referral arrangements for their management where relevant</p> <p>6. screen the dentition for pathology and abnormalities including dental caries, attrition, wear, abrasion and erosion, and other damage to dental hard tissues that may impact on removable dental prosthetic treatment and the need to refer as appropriate</p> <p>7. identify the location and contributing factors of dental caries, periodontal disease, tooth wear and other structural or traumatic anomalies that may impact on removable dental prosthetic treatment and overall oral health, and integrate into treatment planning and appropriate referral</p> <p>8. recognise the presence of systemic disease and know how the disease and its treatment, including current medication, affect the delivery of dental care</p> <p>9. recognise abnormalities in dental or periodontal anatomical form that compromise periodontal health, function or aesthetics and identify conditions which require referral</p> <p>10. recognise deterioration and breakdown of existing restorations and integrate appropriately into a referral protocol</p> <p>11. conduct, explain and discuss the planning of removable dental prosthetic treatment as part of a health team approach to comprehensive oral rehabilitation</p> <p>12. understand and communicate to patients the common impairments of function as a consequence of tooth loss</p> <p>13. apply the knowledge of relevant dental materials to select and use them appropriately in removable dental prosthetic treatment planning</p> <p>14. recognise and communicate to patients the properties and risks and benefits of dental materials and related tissue responses</p> <p>15. obtain and record informed consent for all forms of treatment and in relation to financial consent in accordance with the Dental Board of Australia's <i>Code of Conduct</i></p> <p>16. know when and how to refer patients to the appropriate health professional for consultation or treatment, where treatments are outside scope of practice or beyond own skills or require collaborative care</p> <p>17. understand and protect patients' rights to privacy and confidentiality of information collected and appropriately shared, consistent with relevant privacy legislation</p>

Domain	Description
<b>6.3 Clinical Treatment and Evaluation</b>	<i>On graduation a <b>dental prosthetist</b> will be able to:</i>
	<ol style="list-style-type: none"> <li data-bbox="443 353 1458 432">1. identify, select and prepare instruments, equipment, materials and medicaments appropriate to implementation of the patient's treatment plan</li> <li data-bbox="443 454 1458 495">2. take impressions and produce diagnostic models</li> <li data-bbox="443 517 1458 622">3. design, fabricate, assess and provide appropriate biomechanically sound removable dental prostheses for dentate and edentulous patients in accordance with the patient's treatment plan</li> <li data-bbox="443 645 1458 790">4. monitor treatment progress for a removable dental prosthesis, identifying and rectifying problems arising during a course of treatment and proposing further treatment options as required, including preventative and associated treatment and seeking advice or referring where appropriate</li> <li data-bbox="443 813 1458 969">5. assess and perform maintenance treatment for patients with removable dental prostheses to meet the needs of the patient, including adjusting and maintaining new and existing removable dental prostheses for dentate and edentulous patients</li> <li data-bbox="443 992 1458 1104">6. fabricate and insert an implant retained overdenture in accordance with the scope of practice for dental prosthetists as defined by the Dental Board of Australia</li> <li data-bbox="443 1126 1458 1193">7. recognise evidence of common oral mucosal diseases and disorders related to removable dental prostheses, manage and/or refer appropriately</li> <li data-bbox="443 1216 1458 1256">8. produce diagnostic casts, mounted with inter-occlusal records</li> <li data-bbox="443 1279 1458 1357">9. prevent, manage and refer where necessary medical and dental emergency situations encountered in clinical dental practice</li> <li data-bbox="443 1379 1458 1525">10. evaluate systematically all treatment outcomes, including information on a patient's satisfaction/dissatisfaction with treatment and providing and/or recommending additional action and planning for the maintenance of oral health</li> <li data-bbox="443 1547 1458 1693">11. assess the patient's level of discomfort and utilise techniques appropriate to the patient's level of development, understanding and compliance to optimise patient management and minimise patient anxiety, including psychosocial and behavioural principles, and referring where appropriate</li> </ol>

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