

Helen Submission to ADC Draft Accreditation Standards Consultation**Respondent details****Name:** Helen**Organisation:** Yie**Role/capacity:** Dentist**Location:** Metro**Do you identify as
Aboriginal and/or Torres
Strait Islander?** No**Response to consultation questions****Do you consider that the draft Standards
are at the threshold level to deliver
competent graduates who are safe to
practise?**

(Yes, Somewhat, No, Unsure)

Additional comments:**Do you agree with the specific
proposals as incorporated in the draft
Standards?**

(Yes, Somewhat, No, Unsure)

Additional comments:**Are there any additional Standards or
Criteria that should be added?**

(Yes, No, Unsure)

Additional comments:**Are there any Standards or Criteria that
should be deleted or reworded?**

(Yes, No, Unsure)

**Additional comments related to your
response, and clearly reference the**

specific criteria you are referring to for refinement.

Do you have any other questions or comments on the Standards?