AUSTRALIAN DENTAL COUNCIL

Dental Council
Te Kaunihera Tiaki Niho

Kriti Gupta Submission to ADC Draft Accreditation Standards Consultation

Respondent details	
Name:	Kriti Gupta
Organisation:	Australian Physiotherapy Council
Role/capacity:	Accreditation Manager
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)	Yes
Additional comments:	Overall, the draft Standards meet the threshold for competence and public safety. Noted that "standard statement" is now referred as "Standard" only
Do you agree with the specific proposals as incorporated in the draft Standards? (Yes, Somewhat, No, Unsure)	Somewhat
Additional comments:	Please refer to the comments in next sections
Are there any additional Standards or Criteria that should be added? (Yes, No, Unsure)	No
Additional comments:	Overall, no additional standards/criteria are required. However, the revised clinical education criterion removes explicit reference to quality of clinical education, focusing instead on complexity, quantity, duration and variety of clinical education.

	While these elements are important, removing an explicit focus on quality risks placing greater emphasis on volume and structure over the learning experience. Reference to the quality of clinical education would strengthen assurance that graduates are supported to achieve competence, not just exposed to sufficient clinical experiences.
Are there any Standards or Criteria that should be deleted or reworded? (Yes, No, Unsure)	Yes
Additional comments related to your response, and clearly reference the specific criteria you are referring to for refinement.	Requiring all students to complete culturally responsive clinical placements (to provide culturally safe care) may create feasibility challenges and place additional cultural load on communities and specific placement sites. Cultural responsiveness competence can be developed through a range of community-endorsed learning approaches, not just clinical placements alone. Perhaps, an outcomes-based approach, requiring demonstrable competence through community-endorsed learning pathways (placements and/or equivalent experiences), would support more sustainable implementation.
Do you have any other questions or comments on the Standards?	Nil