

Draft Professional competencies of the newly qualified dental practitioner

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1. Introduction

This document assumes that a dental practitioner in Australia is:

a scientifically grounded, technically skilled, socially responsible, 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 healthcare team from the point of registration and throughout their professional career.

1.1. Divisions of dental practitioners

Under the Health Practitioner Regulation National Law Act 2009 (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 divisions of dental practitioner under the category of general registration as defined by the National Law are:

- Dentists
- Dental hygienists
- Dental prosthetists
- Dental therapists
- Oral health therapists

A dentist with specialist training may also be registered under the category of specialist registration as a dental specialist.

1.2. Scope of practice

This document is **NOT** a scope of practice for dental practitioners and should not be read as such. The scope of practice for dental practitioners is defined by the DBA as the regulator of the dental professions.

1.3. This document

This document describes the competencies expected of the newly qualified dental practitioner to be eligible for registration in Australia. The competencies are outlined in Section 4 of the document and present a framework of statements that are interconnected. Newly qualified dental practitioners are expected to have been assessed as possessing all of the competencies relevant to their division of registration.

The Australian Dental Council (ADC) has co-designed this document in consultation with and on behalf of the professions and other stakeholders, including community representatives. The ADC has adopted the same structure and format for the competencies for all divisions of dental practitioners. Consequently, the competencies may be worded the same or in a similar manner, although the knowledge, skills and their application may vary between the different divisions of dental practitioner.

It is recognised that once registered, the newly qualified dental practitioner must only perform dental treatment for which they have been educated and trained and in which they are competent. Individuals seeking to register must apply to the DBA and comply with the DBA's registration standards, associated guidelines, and codes. For further details please refer to the DBA's website at www.dentalboard.gov.au.

Dental practitioners must also comply with Commonwealth, State and Territory legislation and regulations (refer to the DBA's website for further links to relevant legislation).

This document will be reviewed and updated as required to ensure it remains reflective of what is expected of a newly qualified dental practitioner.

2. Use of the Competencies

The ADC will use this document as a reference point in carrying out its key functions of:

- accreditation of education and training programs for dental practitioners
- developing accreditation standards for the approval of the DBA, and
- assessing overseas qualified dental practitioners to ensure they possess the professional qualities, knowledge, judgement, and clinical skills required for practice in Australia.

Since 1 January 2016, education providers seeking to have their education and training programs accredited by the ADC have been required to demonstrate that the program enables students to achieve the required professional competencies.

While this document does not prescribe the curricula of dental practitioner programs, for a program to be accredited it must demonstrate that the learning outcomes address the competencies as outlined in section 4. The program must also demonstrate that there is a clear relationship between those learning outcomes and the assessment tools and strategies used. This does not restrict a program from providing its students with other competencies.

In the ADC's role of assessing overseas trained dental practitioners, the competencies are an important reference point for mapping and blueprinting examinations. The ADC's written and practical examinations are standardised to ensure overseas trained practitioners meet the same threshold competence expected of a newly qualified graduate of an Australian program.

Other organisations will use the competencies in different ways and for different purposes.

3. Terminology

The concepts described in section 4 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 relationship 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.¹

For the purposes of this document the following **definitions of key concepts** are assumed and should be considered when interpreting the individual 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. ² The term covers the complex combination of knowledge and understanding, skills and attitudes needed by the graduate. 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 competency statements embody complex ideas and need to be defined:

At-risk groups or populations	<p>the demonstration of all professional competencies must take account of people who are at an increased risk of developing poor oral health and face greater challenges in accessing oral health care. These population groups are likely to include:</p> <ul style="list-style-type: none"> • those who are socially disadvantaged or on low incomes; • people with sensory, psycho-social, progressive, physical, and intellectual disability, and people with Acquired Brain Injury (ABI); • autistic and neurodiverse people; • those living in regional and remote areas; • Aboriginal and Torres Strait Islander people; • people with Culturally and Linguistically Diverse Backgrounds • Lesbian, Gay, Bisexual+, Transgender and gender diverse, Intersex, Queer, and Asexual+ people • people who are aging • children and adolescents
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¹ Adapted from Universities Australia’s response to A Healthier Future for All Australian’s report (March 2009)

² Adapted from the ADEA Competencies for the New General Dentist (2008)

	<ul style="list-style-type: none"> • people who have experienced trauma, and • people who have experienced violence and abuse including sexual abuse.
Critical thinking	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, biases, and assumptions and to search for evidence that supports the acceptance, rejection or suspension of those beliefs, biases, and assumptions, and the ability to distinguish between fact and opinion.
Cultural safety for Aboriginal and Torres Strait Islander people	<p>cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities.</p> <p>culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism.³</p>
Evidence-based dentistry	an approach to oral health care that requires judicious integration of systematic assessments of clinically relevant scientific evidence relating to the person's oral and medical condition, history, oral health literacy, and integrated with the practitioner's clinical expertise and the person's treatment needs and preferences.
Financial consent	is part of informed consent and requires a person being made aware of and agreeing to all the fees and charges involved in a course of treatment, preferably before the health service is provided. ⁴ If consent cannot be obtained before care is provided, information should be provided as soon as practicably possible after the service is provided. ⁵
Health promotion	the process of enabling people to increase control over the determinants of health and thereby improve their health. Health promotion not only embraces actions directed at strengthening the skills and capabilities of individuals but also actions directed towards changing social, environmental, political and economic conditions to alleviate their impact on populations and individual health. ⁶
Informed consent	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. ⁷
Interprofessional collaborative practice	is when multiple health workers from different professional backgrounds work together with patients, families, carers, and communities to deliver the highest quality of care across settings ⁸

³ Ahpra. The National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025. Page 9. Accessed from <https://www.ahpra.gov.au/About-AHPRA/Aboriginal-and-Torres-Strait-Islander-Health-Strategy.aspx>

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

⁵ Victorian Government. Private Health Insurance Ombudsmen. *Informed financial consent in emergency situations*. Accessed on 13 September 2021 from <https://www.ombudsman.gov.au/How-we-can-help/private-health-insurance/private-health-insurance/informed-financial-consent>

⁶ Adapted from the Australian Health Promotion Association's definition of health promotion (2015)

⁷ Adapted from the Dental Board of Australia document Code of conduct for registered health practitioners (2014, p11)

⁸ Adapted from Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice: 2016 update. Washington, DC: Interprofessional Education Collaborative.

Leadership	requires reflection and improvement of self, fostering growth in and influencing others, and communicating a vision for the future and enabling decisions to align with the goal. To achieve outcomes, leaders embrace the spirit of change and innovation and strategically understand and align complex systems with the goal. ⁹
Manage	to “manage” the oral health care needs of a patient includes all actions performed by practitioners within their abilities, competence and experience 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 planning
Patient	is the person receiving health care and also those assisting or supporting the individual to make decisions about their care. Those assisting may include parents, guardians, family, carers, support workers, or substitute decision makers for a person that has been assessed as not having the capacity to make their own decisions. A substitute decision maker may be a parent or carer or a legally appointed decision maker.
Person-centred care	is recognised as a foundation to safe, high-quality healthcare. It is care that is respectful of, and responsive to, the preferences, needs and values of the individual patient. It involves seeking out, and understanding, what is important to the individual receiving care, fostering trust, establishing mutual respect and working together to share decisions and plan care. Key dimensions of person-centred care include respect, dignity, emotional support, physical comfort, open and honest communication, continuity and transition, care coordination, involvement of carers and family, and access to care. ¹⁰

⁹ Adapted from Health LEADS Australia: the Australian health leadership framework (2013, p5)

¹⁰ Adapted from Australian Commission on Safety and Quality in Health Care definition of person-centre care. Accessed on 28 July 2021 from <https://www.safetyandquality.gov.au/our-work/partnering-consumers/person-centred-care>.

The structure of the statements

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

Competencies for all divisions of general registration

1. Social responsibility and professionalism
2. Communication and leadership
3. Critical thinking

Competencies specific to each division of general registration

4. Health promotion
5. Scientific and clinical knowledge
6. Person-centred care*

* 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 practice of dentistry. As indicated above, there is a degree of artificiality in the classification, as effective professional performance requires the integration of multiple competencies.

Each domain contains descriptions of competencies. The descriptions are presented in one of two formats:

- Those descriptions for “a **dental practitioner**” are where the application of the knowledge and skills are the same for all divisions of registration.
- Those descriptions for specific dental practitioners that may be worded the same or in a similar manner, although the application of the knowledge and skills may vary between the different divisions of dental practitioner under the category of general registration.

4. The competency statements

Dental practitioners must have an understanding of, and be responsive to, the oral health needs of Australian communities and individual citizens and apply dental knowledge, clinical and technical skills and professional attitudes to provide safe and effective person-centred care. The term “competencies” covers the complex combination of knowledge, understanding, skills and attitudes needed by the newly qualified dental practitioner.

The Competency Statements below must be read in the context of the Introduction, Purpose and Terminology provided on the previous pages.

Continued on next page.

4.1. Competencies for all divisions of general registration

Domain	Competencies
1. Social responsibility and professionalism	
<p>covers personal values, attitudes and behaviours</p>	<p>A newly qualified dental practitioner must be able to:</p> <ol style="list-style-type: none"> 1. demonstrate that the interests of the person receiving care is paramount in all decisions and actions 2. acknowledge colonisation and systemic racism, social, cultural, behavioural and economic factors which impact individual and community health 3. acknowledge and address individual racism, your own biases, assumptions, stereotypes and prejudices and provide care that is holistic, free of bias and racism 4. recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community 5. foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues 6. provide culturally safe care to diverse groups and populations, recognising barriers to accessing care and responding to the distinct needs of those at greatest risk of poor oral health 7. recognise professional and individual scopes of practice and work to one's own abilities and competency 8. incorporate a self-reflexive approach to dental practice that recognises and supports life-long learning for all members of the dental team 9. practise in an ethical and professional manner consistent with the Dental Board of Australia's <i>Code of conduct</i> 10. comply with Commonwealth, State and Territory legislation and regulatory requirements relevant to the dental practitioner and the provision of dental care 11. understand the environmental impacts of health care provision and use resources responsibly, making decisions that support environmentally sustainable healthcare

2. Communication and leadership

covers the ability to work cooperatively and to communicate in a manner appropriate to the individual receiving care

A newly qualified **dental practitioner** must be able to:

1. engage respectfully with the person receiving care, their families, carers, and communities in relation to oral health
2. present information in a manner that enables the person to understand the care and treatment options available, the risks and benefits, and to be involved in decision making about their care
3. engage in interprofessional collaborative practice to provide person-centred care
4. recognise, assess, and respond to domestic and family violence risk, prioritise safety, provide information, and refer as required
5. engage in mentor/mentee activities and leadership within a healthcare team
6. maintain one's own health and wellbeing and help colleagues and team members to maintain good health
7. utilise digital technologies and informatics to manage health information and inform person-centred care
8. apply the principles of open disclosure in incident management, review adverse events, and implement changes to reduce the risk of reoccurrence
9. identify opportunities for improvement in care delivery and advocate for improved oral health outcomes, including for at-risk groups or populations

3. Critical thinking

covers the acquisition and application of knowledge

A newly qualified **dental practitioner** must be able to:

1. locate and evaluate evidence in a critical manner to support and deliver oral health care
2. apply clinical reasoning and judgement in a reflective practice approach to oral health care
3. demonstrate an understanding of research processes and the role of research in advancing knowledge and clinical practice

4.2. Competencies specific to each division of general registration

4. Health Promotion

covers health education and the promotion of health in the community

A newly qualified **dentist** must be able to:

1. understand the determinants of health, risk factors and behaviours that influence health
2. understand the connection between health promotion and health policy development
3. apply the theories and principles of health promotion to improve oral and general health
4. design, implement and evaluate evidence-based health promotion strategies and programs

A newly qualified **dental hygienist** must be able to:

1. understand the determinants of health, risk factors and behaviours that influence health
2. understand the connection between health promotion and health policy development
3. apply the theories and principles of health promotion to improve oral and general health
4. design, implement and evaluate evidence-based health promotion strategies and programs

A newly qualified **dental prosthetist** must be able to:

1. understand the determinants of health, risk factors and behaviours that influence health
2. understand the connection between health promotion and health policy development
3. apply the theories and principles of health promotion to improve oral and general health
4. understand the design, implementation and evaluation of evidence-based health promotion

A newly qualified **dental therapist** must be able to:

1. understand the determinants of health, risk factors and behaviours that influence health
2. understand the connection between health promotion and health policy development
3. apply the theories and principles of health promotion to improve oral and general health
4. design, implement and evaluate evidence-based health promotion strategies and programs

A newly qualified **oral health therapist** must be able to:

1. understand the determinants of health, risk factors and behaviours that influence health
2. understand the connection between health promotion and health policy development
3. apply the theories and principles of health promotion to improve oral and general health
4. design, implement and evaluate evidence-based health promotion strategies and programs

5. Scientific and clinical knowledge

covers the application of the underlying knowledge required by dental practitioners

A newly qualified **dentist** must be able to:

1. apply the social, cultural, biomedical, physical and behavioural sciences in relation to oral health care provision and disease prevention
2. apply the theories and principles of population oral health
3. apply the scientific principles of infection prevention and control
4. understand the scientific basis, risks, and demonstrate the use of ionising radiation
5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use

A newly qualified **dental hygienist** must be able to:

1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention
2. apply the theories and principles of population oral health
3. apply the scientific principles of infection prevention and control
4. understand the scientific basis, risks, and demonstrate the use of ionising radiation
5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use

A newly qualified **dental prosthetist** must be able to:

1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention
2. apply the theories and principles of population oral health
3. apply the scientific principles of infection prevention and control
4. understand the scientific basis, limitation and risks of dental materials and demonstrate their use
5. apply the principles of pharmacology, understanding the risks of using therapeutic agents

A newly qualified **dental therapist** must be able to:

1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention
2. apply the theories and principles of population oral health
3. apply the scientific principles of infection prevention and control
4. understand the scientific basis, risks, and demonstrate the use of ionising radiation
5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use

A newly qualified **oral health therapist** must be able to:

1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention
2. apply the theories and principles of population oral health
3. apply the scientific principles of infection prevention and control
4. understand the scientific basis, risks and demonstrate the use of ionising radiation
5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use

5. Scientific and clinical knowledge (continued)

covers the application of the underlying knowledge required by dental practitioners

A newly qualified **dentist** must be able to:

6. apply the principles of pharmacology, understanding the limitations and risks of using therapeutic agents, including polypharmacy and overuse, and the implication of the Prescribing Competencies Framework on dental practice
7. apply the principles of risk management and quality improvement
8. recognise and comply with local clinical governance and health and safety processes and policies

A newly qualified **dental hygienist** must be able to:

6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse
7. apply the principles of risk management and quality improvement
8. recognise and comply with local clinical governance and health and safety processes and policies

A newly qualified **dental prosthetist** must be able to:

6. apply the principles of risk management and quality improvement
7. recognise and comply with local clinical governance and health and safety processes and policies

A newly qualified **dental therapist** must be able to:

6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse
7. apply the principles of risk management and quality improvement
8. recognise and comply with local clinical governance and health and safety processes and policies

A newly qualified **oral health therapist** must be able to:

6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse
7. apply the principles of risk management and quality improvement
8. recognise and comply with local clinical governance and health and safety processes and policies

6. Person-centred care

6.1 Clinical information gathering

covers the collection and recording of information that is necessary and relevant

A newly qualified **dentist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, consistent, legible and contemporaneous records of patient management and protect patient privacy

A newly qualified **dental hygienist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

A newly qualified **dental prosthetist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical and other diagnostic procedures and interpret results
4. evaluate individual patient risk factors for oral disease
5. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

A newly qualified **dental therapist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

A newly qualified **oral health therapist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6. Person-centred care (continued)

6.2 Diagnosis and management planning

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **dentist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a comprehensive, person-centred, evidence-based oral health treatment plan

A newly qualified **dental hygienist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan

A newly qualified **dental prosthetist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan

A newly qualified **dental therapist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan

A newly qualified **oral health therapist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan

6. Person-centred care (continued)

6.2 Diagnosis and management planning (continued)

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **dentist** must be able to:

5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

A newly qualified **dental hygienist** must be able to:

5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

A newly qualified **dental prosthetist** must be able to:

5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

A newly qualified **dental therapist** must be able to:

5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

A newly qualified **oral health therapist** must be able to:

5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

6. Person-centred care (continued)

6.3 Clinical treatment and evaluation

covers the provision of evidence-based person-centred care

A newly qualified **dentist** must be able to

1. apply the principles of disease and trauma prevention and early intervention in the management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage the individual's anxiety and pain related to the dentition, mouth and associated structures
4. manage diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements

A newly qualified **dental hygienist** must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures

A newly qualified **dental prosthetist** must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. apply pharmaceutical agents
4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures

A newly qualified **dental therapist** must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage non-surgical treatment of gingival diseases
4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
5. manage pulpal diseases and conditions

A newly qualified **oral health therapist** must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
4. manage pulpal diseases and conditions

6. Person-centred care (continued)

6.3 Clinical treatment and evaluation (continued)

covers the provision of evidence-based person-centred care

A newly qualified **dentist** must be able to

5. manage diseases and conditions of the pulp, root canal and peri-radicular tissues
6. manage the loss of tooth structure by restoring the dentition with direct and indirect restorations
7. utilise removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion
8. utilise fixed prostheses to rehabilitate, restore appearance and function and stabilise the occlusion

A newly qualified **dental hygienist** must be able to:

5. perform orthodontic procedures as directed by the treating dentist or orthodontist
6. administer pharmaceutical agents
7. evaluate and monitor the progress of treatment and oral health outcomes
8. manage dental emergencies
9. manage medical emergencies

A newly qualified **dental prosthetist** must be able to:

5. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion
6. evaluate and monitor the progress of treatment and oral health outcomes
7. manage medical emergencies
8. manage dental emergencies

A newly qualified **dental therapist** must be able to:

6. manage the loss of tooth structure by restoring the dentition with direct restorations
7. manage the non-surgical removal of teeth
8. perform orthodontic procedures as directed by the treating dentist or orthodontist
9. administer pharmaceutical agents
10. evaluate and monitor the progress of treatment and oral health outcomes
11. manage dental emergencies
12. manage medical emergencies

A newly qualified **oral health therapist** must be able to:

5. manage the loss of tooth structure by restoring the dentition with direct restorations
6. manage the non-surgical removal of teeth
7. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
8. perform orthodontic procedures as directed by the treating dentist or orthodontist
9. administer pharmaceutical agents

6. Person-centred care (continued)

6.3 Clinical treatment and evaluation (continued)

[covers the provision of evidence-based person-centred care](#)

A newly qualified **dentist** must be able to

9. manage oral conditions, pathology and medically related disorders and diseases associated with the dentition, mouth and associated structures
10. manage skeletal and dental occlusal discrepancies
11. manage the removal of teeth and oral surgical procedures
12. administer, apply and/or prescribe medicines
13. evaluate and monitor the progress of treatment and oral health outcomes
14. manage dental emergencies
15. manage medical emergencies

A newly qualified **oral health therapist** must be able to:

10. evaluate and monitor the progress of treatment and oral health outcomes
11. manage dental emergencies
12. manage medical emergencies

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Appendix 1. Competencies of the newly qualified dentist

Domain	Competencies
4. Health promotion	
covers health education and the promotion of health in the community	<p>A newly qualified dentist must be able to:</p> <ol style="list-style-type: none"> 1. understand the determinants of health, risk factors and behaviours that influence health 2. understand the connection between health promotion and health policy development 3. apply the theories and principles of health promotion to improve oral and general health 4. design, implement and evaluate evidence-based health promotion strategies and programs
5. Scientific and clinical knowledge	
covers the application of the underlying knowledge required by dental practitioners	<p>A newly qualified dentist must be able to:</p> <ol style="list-style-type: none"> 1. apply the social, cultural, biomedical, physical and behavioural sciences in relation to oral health care provision and disease prevention 2. apply the theories and principles of population oral health 3. apply the scientific principles of infection prevention and control 4. understand the scientific basis, risks, and demonstrate the use of ionising radiation 5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use 6. apply the principles of pharmacology, understanding the limitations and risks of using therapeutic agents, including polypharmacy and overuse, and the implication of the Prescribing Competencies Framework on dental practice 7. apply the principles of risk management and quality improvement 8. recognise and comply with local clinical governance and health and safety processes and policies

6. Person-centred care

6.1 Clinical information gathering

covers the collection and recording of information that is necessary and relevant

A newly qualified **dentist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, consistent, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **dentist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a comprehensive, person-centred, evidence-based oral health treatment plan
5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

covers the provision of evidence-based person-centred care

A newly qualified **dentist** must be able to:

1. apply the principles of disease and trauma prevention and early intervention in the management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage the individual's anxiety and pain related to the dentition, mouth and associated structures
4. manage diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
5. manage diseases and conditions of the pulp, root canal and peri-radicular tissues
6. manage the loss of tooth structure by restoring the dentition with direct and indirect restorations
7. utilise removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion
8. utilise fixed prostheses to rehabilitate, restore appearance and function and stabilise the occlusion
9. manage oral conditions, pathology and medically related disorders and diseases associated with the dentition, mouth and associated structures
10. manage skeletal and dental occlusal discrepancies
11. manage the removal of teeth and oral surgical procedures
12. administer, apply and/or prescribe medicines
13. evaluate and monitor the progress of treatment and oral health outcomes
14. manage dental emergencies
15. manage medical emergencies

Appendix 2. Competencies of the newly qualified dental hygienist

Domain	Competencies
4. Health promotion	
covers health education and the promotion of health in the community	<p>A newly qualified dental hygienist must be able to:</p> <ol style="list-style-type: none"> 1. understand the determinants of health, risk factors and behaviours that influence health 2. understand the connection between health promotion and health policy development 3. apply the theories and principles of health promotion to improve oral and general health 4. design, implement and evaluate evidence-based health promotion strategies and programs
5. Scientific and clinical knowledge	
covers the application of the underlying knowledge required by dental practitioners	<p>A newly qualified dental hygienist must be able to:</p> <ol style="list-style-type: none"> 1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention 2. apply the theories and principles of population oral health 3. apply the scientific principles of infection prevention and control 4. understand the scientific basis, risks, and demonstrate the use of ionising radiation 5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use 6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse 7. apply the principles of risk management and quality improvement 8. recognise and comply with local clinical governance and health and safety processes and policies

6. Person-centred care

6.1 Clinical information gathering

covers the collection and recording of information that is necessary and relevant

A newly qualified **dental hygienist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **dental hygienist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan
5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

covers the provision of evidence-based person-centred care

A newly qualified dental hygienist must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
5. perform orthodontic procedures as directed by the treating dentist or orthodontist
6. administer pharmaceutical agents
7. evaluate and monitor the progress of treatment and oral health outcomes
8. manage dental emergencies
9. manage medical emergencies

Appendix 3. Competencies of the newly qualified dental prosthetist

Domain	Competencies
4. Health promotion	
covers health education and the promotion of health in the community	<p>A newly qualified dental prosthetist must be able to:</p> <ol style="list-style-type: none"> 1. understand the determinants of health, risk factors and behaviours that influence health 2. understand the connection between health promotion and health policy development 3. apply the theories and principles of health promotion to improve oral and general health 4. understand the design, implementation and evaluation of evidence-based health promotion
5. Scientific and clinical knowledge	
covers the application of the underlying knowledge required by dental practitioners	<p>A newly qualified dental prosthetist must be able to:</p> <ol style="list-style-type: none"> 1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention 2. apply the theories and principles of population oral health 3. apply the scientific principles of infection prevention and control 4. understand the scientific basis, limitation and risks of dental materials and demonstrate their use 5. apply the principles of pharmacology, understanding the risks of using therapeutic agents 6. apply the principles of risk management and quality improvement 7. recognise and comply with local clinical governance and health and safety processes and policies

6. Person-centred care

6.1 Clinical information gathering

covers the collection and recording of information that is necessary and relevant

A newly qualified **dental prosthetist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical and other diagnostic procedures and interpret results
4. evaluate individual patient risk factors for oral disease
5. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **dental prosthetist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan
5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

covers the provision of evidence-based person-centred care

A newly qualified dental prosthetist must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. apply pharmaceutical agents
4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
5. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion
6. evaluate and monitor the progress of treatment and oral health outcomes
7. manage medical emergencies
8. manage dental emergencies

Appendix 4. Competencies of the newly qualified dental therapist

Domain	Competencies
4. Health promotion	
covers health education and the promotion of health in the community	<p>A newly qualified dental therapist must be able to:</p> <ol style="list-style-type: none"> 1. understand the determinants of health, risk factors and behaviours that influence health 2. understand the connection between health promotion and health policy development 3. apply the theories and principles of health promotion to improve oral and general health 4. design, implement and evaluate evidence-based health promotion strategies and programs
5. Scientific and clinical knowledge	
covers the application of the underlying knowledge required by dental practitioners	<p>A newly qualified dental therapist must be able to:</p> <ol style="list-style-type: none"> 1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention 2. apply the theories and principles of population oral health 3. apply the scientific principles of infection prevention and control 4. understand the scientific basis, risks, and demonstrate the use of ionising radiation 5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use 6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse 7. apply the principles of risk management and quality improvement 8. recognise and comply with local clinical governance and health and safety processes and policies
6. Person-centred care	

<p>6.1 Clinical information gathering</p> <p>covers the collection and recording of information that is necessary and relevant</p>	<p>A newly qualified dental therapist must be able to:</p> <ol style="list-style-type: none"> 1. obtain and record a relevant history of the individual's medical, social and oral health status 2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures 3. select necessary clinical, pathology and other diagnostic procedures and interpret results 4. take radiographs relevant to dental practice 5. evaluate individual patient risk factors for oral disease 6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy
<p>6.2 Diagnosis and management planning</p> <p>covers the identification of disease or abnormalities that require treatment or investigation</p>	<p>A newly qualified dental therapist must be able to:</p> <ol style="list-style-type: none"> 1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts 2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management 3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning 4. formulate and record a person-centred evidence-based oral health treatment plan 5. determine when and how to refer to the appropriate health and or care professional 6. obtain and record informed consent and financial consent for treatment
<p>6.3 Clinical treatment and evaluation</p> <p>covers the provision of evidence-based person-centred care</p>	<p>A newly qualified dental therapist must be able to:</p> <ol style="list-style-type: none"> 1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures 2. apply the principles of positive behaviour support to provide person-centred care 3. manage non-surgical treatment of gingival diseases 4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures 5. manage pulpal diseases and conditions 6. manage the loss of tooth structure by restoring the dentition with direct restorations 7. manage the non-surgical removal of teeth 8. perform orthodontic procedures as directed by the treating dentist or orthodontist 9. administer pharmaceutical agents 10. evaluate and monitor the progress of treatment and oral health outcomes 11. manage dental emergencies 12. manage medical emergencies

Appendix 5. Competencies of the newly qualified oral health therapist

Domain	Competencies
4. Health promotion	
covers health education and the promotion of health in the community	<p>A newly qualified oral health therapist must be able to:</p> <ol style="list-style-type: none"> 1. understand the determinants of health, risk factors and behaviours that influence health 2. understand the connection between health promotion and health policy development 3. apply the theories and principles of health promotion to improve oral and general health 4. design, implement and evaluate evidence-based health promotion strategies and programs
5. Scientific and clinical knowledge	
covers the application of the underlying knowledge required by dental practitioners	<p>A newly qualified oral health therapist must be able to:</p> <ol style="list-style-type: none"> 1. apply the social, cultural, biological, physical and behavioural sciences in relation to oral health care provision and disease prevention 2. apply the theories and principles of population oral health 3. apply the scientific principles of infection prevention and control 4. understand the scientific basis, risks and demonstrate the use of ionising radiation 5. understand the scientific basis, limitations, risks of dental materials and demonstrate their use 6. apply the principles of pharmacology, understanding the risks of using therapeutic agents, including polypharmacy and overuse 7. apply the principles of risk management and quality improvement 8. recognise and comply with local clinical governance and health and safety processes and policies

6. Person-centred care

6.1 Clinical information gathering

covers the collection and recording of information that is necessary and relevant

A newly qualified **oral health therapist** must be able to:

1. obtain and record a relevant history of the individual's medical, social and oral health status
2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures
3. select necessary clinical, pathology and other diagnostic procedures and interpret results
4. take radiographs relevant to dental practice
5. evaluate individual patient risk factors for oral disease
6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

covers the identification of disease or abnormalities that require treatment or investigation

A newly qualified **oral health therapist** must be able to:

1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
4. formulate and record a person-centred evidence-based oral health treatment plan
5. determine when and how to refer to the appropriate health and or care professional
6. obtain and record informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

covers the provision of evidence-based person-centred care

A newly qualified **oral health therapist** must be able to:

1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
2. apply the principles of positive behaviour support to provide person-centred care
3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
4. manage pulpal diseases and conditions
5. manage the loss of tooth structure by restoring the dentition with direct restorations
6. manage the non-surgical removal of teeth
7. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
8. perform orthodontic procedures as directed by the treating dentist or orthodontist
9. administer pharmaceutical agents
10. evaluate and monitor the progress of treatment and oral health outcomes
11. manage dental emergencies
12. manage medical emergencies

Attachment 1 - Summary of proposed changes to the Professional competencies of the newly qualified dental practitioner

This attachment highlights the changes proposed to the Professional competencies of the newly qualified dental practitioner in detail. This attachment should be read in conjunction with the *Consultation paper – Proposed changes to the Professional competencies of the newly qualified dental practitioner*.

When reading this document please note that text crossed out (e.g. ~~striketrough~~) is proposed to be deleted from the Competencies. Text that appears as **bold** is proposed to be added to the Competencies.

This document is provided as an aide to understand the proposed changes.

Please note that the Competencies of the newly qualified dental practitioner are split across three separate documents currently, however Domains 1 – 3 and the introduction are common to all divisions of registration.

Introduction

Section	Status	Current wording	Proposed wording
1. Introduction	Change	This document assumes that a dental practitioner in Australia is: a scientifically grounded, 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.	This document assumes that a dental practitioner in Australia is: a scientifically grounded, technically skilled, socially sensitive responsible , 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 healthcare team from the point of registration and throughout their professional career.
1.2 Scope of practice	No change		

Section	Status	Current wording	Proposed wording
1.3 This document	<p>Change</p> <p>Wording has been revised reflecting the broader application of the Competencies, as well as other regulatory changes.</p>	<p>This document describes the competencies expected of the newly graduated dentist to be eligible for registration. This document supports the scope of practice and should be read in the context of the Scope of Practice Registration Standard (June 2014) and the associated Guidelines for Scope of Practice (June 2014).</p> <p>Section D presents a framework of statements that are interconnected. Newly graduated dental practitioners are expected to have been assessed as possessing all of these competencies.</p> <p>It is recognised that after registration the newly graduated dentist may practise all parts of dentistry within their competency and training and in accordance with Commonwealth, State and Territory legislation and regulations (refer to the DBA's website for further links to relevant legislation).</p> <p>The Australian Dental Council (ADC) has developed this document in consultation with and on behalf of the profession. The ADC has adopted the same structure and format for the competencies documents for all divisions of dental practitioners. Consequently, the descriptions of competencies may be worded the same or in a similar manner, although the knowledge, skills and their application may vary between the different divisions of dental practitioner.</p>	<p>This document describes the competencies expected of the newly qualified dental practitioner to be eligible for registration in Australia. This document supports the scope of practice and should be read in the context of the Scope of Practice Registration Standard (June 2014) and the associated Guidelines for Scope of Practice (June 2014). The competencies are outlined in Section 4 of the document and present a framework of statements that are interconnected.</p> <p>Section D presents a framework of statements that are interconnected.</p> <p>Newly qualified dental practitioners are expected to have been assessed as possessing all of these the competencies relevant to their division of registration.</p> <p>It is recognised that after registration the newly graduated dentist may practise all parts of dentistry within their competency and training and in accordance with Commonwealth, State and Territory legislation and regulations (refer to the DBA's website for further links to relevant legislation).</p> <p>The Australian Dental Council (ADC) has developed this document in consultation with and on behalf of the profession co-designed this document in consultation with and on behalf of the professions and other stakeholders, including community</p>

Section	Status	Current wording	Proposed wording
		<p>For example the descriptions in Domain 5 Scientific and Clinical Knowledge should be cross referenced with the descriptions in Domain 6.3 Clinical Treatment and Evaluation.</p> <p>Given the varying Australian Qualifications Framework (AQF) levels at which education programs that lead to a registerable qualification are based, the competencies document aims to articulate the expectations of the profession while not restricting the ways in which education providers achieve these outcomes.</p>	<p>representatives. The ADC has adopted the same structure and format for the competencies for all divisions of dental practitioners. Consequently, the competencies may be worded the same or in a similar manner, although the knowledge, skills and their application may vary between the different divisions of dental practitioner.</p> <p>It is recognised that once registered, the newly qualified dental practitioner must only perform dental treatment for which they have been educated and trained and in which they are competent. Individuals seeking to register must apply to the DBA and comply with the DBA's registration standards, associated guidelines, and codes. For further details please refer to the DBA's website at www.dentalboard.gov.au.</p> <p>Dental practitioners must also comply with Commonwealth, State and Territory legislation and regulations (refer to the DBA's website for further links to relevant legislation).</p> <p>This document will be reviewed and updated as required to ensure it remains reflective of what is expected of a newly qualified dental practitioner.</p>

Section	Status	Current wording	Proposed wording
1.4 Accreditation Standards	<p>Deleted</p> <p>This section has been deleted as the Competencies have a broader use than solely in the accreditation of programs.</p>	<p>The DBA approved the Accreditation Standards for Dental Practitioner Programs (December 2014) which came into effect on 1 January 2016. In the process of accreditation of education and training programs for dental practitioners these Standards must be used in conjunction with the relevant dental practitioner's competencies.</p>	<p><i>Deleted</i></p>
2. Purpose of the document	<p>Change</p> <p>This section has been revised to reflect the broader application of the Competencies.</p>	<p>The ADC will use this document as a reference point in carrying out its key functions of:</p> <ul style="list-style-type: none"> • accreditation of education and training programs for < dental profession >; • developing accreditation standards for the approval of the DBA; and • the assessment of international dental graduates for practice in Australia. <p>From 1 January 2016 education providers seeking to have their education and training programs accredited by the ADC will need to demonstrate that the program enables students to achieve the required professional competencies.</p> <p>While the document does not prescribe the curriculum of a training program, providers seeking accreditation of a program will need to demonstrate that the learning outcomes address the competencies as outlined in section D, and also that there is a clear</p>	<p>The ADC will use this document as a reference point in carrying out its key functions of:</p> <ul style="list-style-type: none"> • accreditation of education and training programs for < dental profession > dental practitioners • developing accreditation standards for the approval of the DBA, and • the assessment of international dental graduates assessing overseas qualified dental practitioners to ensure they possess the professional qualities, knowledge, judgement, and clinical skills required for practice in Australia. <p>From Since 1 January 2016, education providers seeking to have their education and training programs accredited by the ADC will need to have been required to demonstrate that the program enables students to achieve the required professional competencies.</p>

Section	Status	Current wording	Proposed wording
		<p>relationship between those learning outcomes and the student assessment used. This does not restrict a program from providing its students with other competencies. The document will be reviewed as appropriate and not more than five years following its adoption.</p>	<p>While this document does not prescribe the curricula of a training program dental practitioner programs, providers seeking accreditation of a program will need to for a program to be accredited it must demonstrate that the learning outcomes address the competencies as outlined in section D 4, and also that there is and also that there is a clear relationship between these learning outcomes and the student assessment used. The program must also demonstrate that there is a clear relationship between those learning outcomes and the assessment tools and strategies used. This does not restrict a program from providing its students with other competencies.</p> <p>In the ADC's role of assessing overseas trained dental practitioners, the competencies are an important reference point for mapping and blueprinting examinations. The ADC's written and practical examinations are standardised to ensure overseas trained practitioners meet the same threshold competence expected of a newly qualified graduate of an Australian program.</p> <p>Other organisations will use the competencies in different ways and for different purposes.</p>

Terminology

Section/Definition	Status	Current wording	Proposed wording
Introductory text	No change		
Competency	No change		
Competent	No change		
At-risk groups or populations	<p>Added</p> <p>New definition added to the Competencies, developed from the priority populations identified in Healthy Mouths Healthy Lives - Australia's National Oral Health Plan 2015 – 2024.</p>	No current definition	<p>the demonstration of all professional competencies must take account of people who are at an increased risk of developing poor oral health and face greater challenges in accessing oral health care. These population groups are likely to include:</p> <ul style="list-style-type: none"> • those who are socially disadvantaged or on low incomes; • people with sensory, psycho-social, progressive, physical, and intellectual disability, and people with Acquired Brain Injury (ABI); • autistic and neurodiverse people; • those living in regional and remote areas; • Aboriginal and Torres Strait Islander people; • people with Culturally and Linguistically Diverse • Backgrounds • Lesbian, Gay, Bisexual+, Transgender and gender diverse, Intersex, Queer, and Asexual+ people • people who are aging

Section/Definition	Status	Current wording	Proposed wording
			<ul style="list-style-type: none"> • children and adolescents • people who have experienced trauma, and • people who have experienced violence and abuse including sexual abuse
Critical Thinking	Change	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	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, biases , and assumptions and to search for evidence that supports the acceptance, rejection or suspension of those beliefs, biases , and assumptions, and the ability to distinguish between fact and opinion
Culturally safe and culturally competent practice	Change Updated definition is taken from <i>Cultural safety identified in the National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025</i>	Culturally safe and culturally competent practice 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 backgrounds 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	Cultural safety for Aboriginal and Torres Strait Islander people cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism

Section/Definition	Status	Current wording	Proposed wording
		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	
Evidence-based dentistry	Change	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, history, oral health literacy, and integrated with the practitioner's clinical expertise and the patient's treatment needs and preferences	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, history, oral health literacy, and integrated with the practitioner's clinical expertise and the patient's person's treatment needs and preferences
Financial consent	Change	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	is part of informed consent and requires a person being made aware of and agreeing to all the fees and charges involved in a course of treatment, preferably before the health service is provided. If consent cannot be obtained before care is provided, information should be provided as soon as practicably possible after the service is provided.
Health promotion	No change		
Information management	Deleted The term is no longer used in the	Information management concerns the acquisition of information from one or more sources, the custodianship and the distribution of that information to those who	

Section/Definition	Status	Current wording	Proposed wording
	Competency statements	need it, and its ultimate disposition through archiving or deletion	
Informed consent	No change		
Interprofessional collaborative practice	Added	<i>No current definition</i>	is when multiple health workers from different professional backgrounds work together with patients, families, carers, and communities to deliver the highest quality of care across settings
Leadership	No change		
Manage	Change	to “manage” the oral health care needs of a patient includes all actions performed by practitioners within their areas of education, training and experience 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 planning	to “manage” the oral health care needs of a patient includes all actions performed by practitioners within their areas of education, training abilities , competence and experience 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 planning
Media	Deleted	includes all forms of mass communication methods including but not limited to	

Section/Definition	Status	Current wording	Proposed wording
	The term is no longer used in the Competency statements	television, radio, newspapers and electronic media (eg. social networking sites such as Facebook, Twitter, LinkedIn, e-mails and Short Message Services (SMS)) and its use for advertising, communicating with and connecting to other individuals or organisations	
Patient	Change	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	Includes the person is the person receiving health care and also those assisting or supporting the individual to make decisions about their care. Those assisting may include parents, guardians, family, carers, support workers, or substitute decision makers for a person that has been assessed as not having the capacity to make their own decisions. A substitute decision maker may be a parent or carer or a legally appointed decision maker
Patient-centred care	Replaced	Patient-centred care Displays 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 by a holistic approach to the individual patient as well as the community	Person-centred care is recognised as a foundation to safe, high-quality healthcare. It is care that is respectful of, and responsive to, the preferences, needs and values of the individual patient. It involves seeking out, and understanding, what is important to the individual receiving care, fostering trust, establishing mutual respect and working together to share decisions and plan care. Key dimensions of person centred care include respect, dignity, emotional support, physical comfort, open and honest

Section/Definition	Status	Current wording	Proposed wording
			communication, continuity and transition, care coordination, involvement of carers and family, and access to care
Referral	No change		
Structure of the statements	<p>Change</p> <p>The wording has been revised to recognise that three different documents have been combined into one and to reflect the proposed change to the name of Domain 1 and Domain 6.</p>	<ol style="list-style-type: none"> 1. Professionalism 2. Communication and Leadership 3. Critical Thinking 4. Health Promotion 5. Scientific and Clinical Knowledge 6. Patient Care (which has sub-domains of Clinical Information Gathering, Diagnosis and Management Planning, Clinical Treatment and Evaluation). 	<p>Competencies for all divisions of general registration</p> <ol style="list-style-type: none"> 1. Social responsibility and professionalism 2. Communication and leadership 3. Critical thinking <p>Competencies specific to each division of general registration</p> <ol style="list-style-type: none"> 4. Health promotion 5. Scientific and clinical knowledge 6. Patient Person-centred care (which has sub-domains of Clinical information gathering, Diagnosis and management planning, Clinical treatment and evaluation).

Competencies of the newly qualified dental practitioner- Domain 1. Professionalism

Section	Status	Current wording	Proposed wording
Domain name	Change	1. Professionalism	1. Social responsibility and professionalism
Domain description	No change		
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified dental practitioner must be able to:
Competency statements	Change	1. demonstrate that patient safety is paramount in all decisions and actions	1. demonstrate that patient safety the interests of the person receiving care is paramount in all decisions and actions
	Deleted	2. demonstrate appropriate caring behaviour towards patients and respect professional boundaries between themselves and patients, patient's families and members of the community	2. demonstrate appropriate caring behaviour towards patients and respect professional boundaries between themselves and patients, patient's families and members of the community
	Added		2. acknowledge colonisation and systemic racism, social, cultural, behavioural, and economic factors which impact individual and community health

Section	Status	Current wording	Proposed wording
	Deleted	3. demonstrate that all interactions focus on the patient's best interests and provide patient-centred care. Respect patient's dignity, rights, and choices	3. demonstrate that all interactions focus on the patient's best interests and provide patient-centred care, respect patients' dignity, rights, and choices
	Added		3. acknowledge and address individual racism, your own biases, assumptions, stereotypes and prejudices and provide care that is holistic, free of bias and racism
	Moved and changed	4. recognise professional and individual scopes of practice	4. recognise professional and individual scopes of practice 7. recognise professional and individual scopes of practice and work to one's own abilities and competency
	Added		4. recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community
	Added		5. foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues
	Moved and changed	5. recognise the importance of continuing professional	5. recognise the importance of continuing professional

Section	Status	Current wording	Proposed wording
		development for all members of the dental team	development for all members of the dental team 8. incorporate a self-reflexive approach to dental practice that recognises and supports life-long learning for all members of the dental team
	Deleted	6. understand the ethical principles and their application underpinning the provision of dental care	6. understand the ethical principles and their application underpinning the provision of dental care
	Added		6. provide culturally safe care to diverse groups and populations, recognising barriers to accessing care and responding to the distinct needs of those at greatest risk of poor oral health
	Moved and changed	7. understand Commonwealth, State and Territory legislation relevant to practise as a dental practitioner	7. understand Commonwealth, State and Territory legislation relevant to practise as a dental practitioner 10. understand-comply with Commonwealth, State and Territory legislation and regulatory requirements relevant to practise as a the dental practitioner and the provision of dental care
	Change	8. understand the principles of efficient, effective and equitable utilisation of resources, and recognise local and national needs	7. understand the principles of efficient, effective and equitable utilisation of resources, and recognise local and national needs

Section	Status	Current wording	Proposed wording
		in health care and service delivery across Australia's geographical areas	in health care and service delivery across Australia's geographical areas
	Deleted	9. provide culturally safe and culturally competent practice that includes recognition of the distinct needs of Aboriginal and Torres Strait Islander peoples in relation to oral health care provision	8. provide culturally safe and culturally competent practice that includes recognition of the distinct needs of Aboriginal and Torres Strait Islander peoples in relation to oral health care provision
	Added		9. practise in an ethical and professional manner consistent with the Dental Board of Australia's Code of conduct
	Added		11. understand the environmental impacts of health care provision and use resources responsibly, making decisions that support environmentally sustainable healthcare

Competencies of the newly qualified dental practitioner - Domain 2. Communication and leadership

Section	Status	Current wording	Proposed wording
Domain name	No change	2. Communication and Leadership	2. Communication and Leadership
Domain description	Change	covers the ability to work cooperatively and to communicate effectively	covers the ability to work cooperatively and to communicate effectively in a manner appropriate to the individual receiving care
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified dental practitioner must be able to:
Competency statements	Change	1. communicate and engage with the patients, patient's families, and communities in relation to oral health	1. communicate and engage with the patients engage respectfully with the patient's person receiving care , their families, carers , and communities in relation to oral health
	Change	2. present clear information in a timely manner that ensures patients are advised of and understand care and treatment options to be provided	2. present clear information in a timely manner that ensures patients are advised of enables the person and to understand the care and treatment options to be provided available, the risks and benefits, and to be involved in decision making about their care
	Deleted	3. communicate with other health professionals involved in patient's care	3. communicate with other health professionals involved in patient's care

Section	Status	Current wording	Proposed wording
	Added		3. engage in interprofessional collaborative practice to provide person-centred care
	Moved	4. engage in mentor/mentee activities and leadership within a health care team	5. engage in mentor/mentee activities and leadership within a health care team
	Added		4. recognise, assess, and respond to domestic and family violence risk, prioritise safety, provide information, and refer as required
	Moved and changed	5. recognise the importance of one's own, colleagues' and team members' health to occupational risks and its impact on the ability to practise	<p>4. recognise the importance of one's own, colleagues' and team members' health to occupational risks and its impact on the ability to practise</p> <p>6. maintain one's own health and wellbeing and help colleagues' and team members to maintain good health</p>
	Deleted	6. understand the importance of intra and interprofessional approaches to health care	6. understand the importance of intra and interprofessional approaches to health care
	Deleted	7. understand effective information management	6. understand effective information management
	Added		7. utilise digital technologies and informatics to manage health

Section	Status	Current wording	Proposed wording
			information and inform person-centred care
	Deleted	8. understand the principles of dispute resolution	7. understand the principles of dispute resolution
	Added		8. apply the principles of open disclosure in incident management, review adverse events, and implement changes to reduce the risk of reoccurrence
	Deleted	9. communicate responsibly and professionally when using media	9. communicate responsibly and professionally when using media
	Added		9. identify opportunities for improvement in care delivery and advocate for improved oral health outcomes, including for at-risk groups or population

Competencies of the newly qualified dental practitioner- Domain 3. Critical thinking

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified dental practitioner must be able to:
Competency statements	No change	1. locate and evaluate evidence in a critical and scientific manner to support oral health care	1. locate and evaluate evidence in a critical and scientific manner to support oral health care
	No change	2. apply clinical reasoning and judgement in a reflective practice approach to oral health care	2. apply clinical reasoning and judgement in a reflective practice approach to oral health care
	Change	3. understand scientific method and the role of research in advancing knowledge and clinical practice	3. understand scientific method demonstrate and an understanding of the role of research process and the role of research in advancing knowledge and clinical practice

Competencies of the newly qualified dentist

Domain 4. Health promotion

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dentist must be able to:	On graduation a A newly qualified dentist must be able to:
Competency statements	No change	1. understand the determinants of health, risk factors and behaviours that influence health	1. understand the determinants of health, risk factors and behaviours that influence health
	Change	2. understand the theories and principles of health promotion	2. understand the theories and principles of connection between health promotion and health policy development
	Change	3. understand health promotion strategies to promote oral and general health	3. Understand apply the theories and principles of health promotion strategies to promote to improve oral and general health
	Change	4. understand the design, implementation and evaluation of evidence-based health promotion	4. Understand the design, implementation and evaluation of design, implementation implement and evaluate of evaluate evidence-based health promotion strategies and programs

Competencies of the newly qualified dentist

Domain 5. Scientific and clinical knowledge

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	Change	covers the underlying knowledge base required by dental practitioners	covers the application of the underlying knowledge base required by dental practitioners
Introductory sentence	Change	On graduation a dentist must be able to:	On graduation a A newly qualified dentist must be able to:
Competency statements	Change	1. understand the biomedical, physical, and behavioural sciences in relation to oral health and disease	1. understand apply the social, cultural, biomedical, physical, and behavioural sciences in relation to oral health and disease care provision and disease prevention
	Change	2. understand the theories and principles of population oral health	2. Understand apply the theories and principles of population oral health
	Change	3. understand the scientific principles and application of infection prevention and control	3. understand apply the scientific principles and application of infection prevention and control
	Change	4. understand the scientific basis, application, and risks of using ionising radiation	4. understand the scientific basis, application, and risks and demonstrate the use of using ionising radiation

Section	Status	Current wording	Proposed wording
	Change	5. understand the scientific basis, application, limitations and risks of using dental materials	5. understand the scientific basis, application , limitations, and risks, of using dental materials and demonstrate their use
	Change	6. understand the principles of pharmacology, the risks and limitations in using therapeutic agents and the implication of the Prescribing Competencies Framework on dental practice	6. understand apply the principles of pharmacology, understanding the limitations and risks and limitations in of using use of therapeutic agents, including polypharmacy and overuse , and the implication of the Prescribing Competencies Framework on dental practice
	Change	7. understand the principles of risk management and quality improvement	7. understand apply the principles of risk management and quality improvement
	Added		8. recognise and comply with local clinical governance and health and safety processes and policies

Competencies of the newly qualified dentist

Domain 6. Person-centred care

Section	Status	Current wording	Proposed wording
Domain name	Change	6. Patient Care	6. Patient Person-centred care

6.1 Clinical information gathering

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.1 Clinical information gathering	6.1 Clinical information gathering
Domain description	No change	covers the collection and recording of information that is necessary and relevant	covers the collection and recording of information that is necessary and relevant
Introductory sentence	Change	On graduation a dentist must be able to:	On graduation a A newly qualified dentist must be able to:
Competency statements	Change	1. obtain and record a relevant history of the patient's medical, social and oral health status	1. obtain and record a relevant history of the patient's individual's medical, social and oral health status
	No change	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures

Section	Status	Current wording	Proposed wording
	No change	3. select necessary clinical, pathology and other diagnostic procedures and interpret results	3. select necessary clinical, pathology and other diagnostic procedures and interpret results
	No change	4. take radiographs relevant to dental practice	4. take radiographs relevant to dental practice
	No change	5. evaluate individual patient risk factors for oral disease	5. evaluate individual patient risk factors for oral disease
	No change	6. maintain accurate, consistent, legible and contemporaneous records of patient management and protect patient privacy	6. maintain accurate, consistent, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.2 Diagnosis and management planning	6.2 Diagnosis and management planning
Domain description	No change	covers the identification of disease or abnormalities that require treatment or investigation	covers the identification of disease or abnormalities that require treatment or investigation
Introductory sentence	Change	On graduation a dentist must be able to:	On graduation a A newly qualified dentist must be able to:

Section	Status	Current wording	Proposed wording
Competency statements	Change	1. recognise health as it relates to the individual	1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
	No change	2. Diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management	2. Diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
		3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
	Change	4. formulate and record a comprehensive, patient-centred, evidence-based oral health treatment plan	4. formulate and record a comprehensive, patient-centred person-centred , evidence-based oral health treatment plan
	Change	5. determine when and how to refer patients to the appropriate health professional	5. determine when and how to refer patients and or care professional
	Change	6. obtain and record patient informed consent and financial consent for treatment	6. obtain and record patient informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

Domain	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.3 Clinical treatment and evaluation	6.3 Clinical treatment and evaluation
Domain description	Change	Covers the provision of evidence-based patient-centred care	Covers the provision of evidence-based patient person -centred care
Introductory sentence	Change	On graduation a dentist must be able to:	On graduation a A newly qualified dentist must be able to:
Competency statements	No change	1. apply the principles of disease and trauma prevention and early intervention in the management of the dentition, mouth and associated structures	1. apply the principles of disease and trauma prevention and early intervention in the management of the dentition, mouth and associated structures
	Change	2. apply the principles of behaviour management	2. apply the principles of positive behaviour management support to provide person-centred care
	Change	3. manage a patient's anxiety and pain related to the dentition, mouth and associated structures	3. manage a patient's the individual's anxiety and pain related to the dentition, mouth and associated structures
	Change	4. manage surgical and non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth and their replacements	4. manage surgical and non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth and their replacements
	Change	5. manage surgical and non-surgical treatment of pulp and periapical	5. manage surgical and non-surgical treatment diseases and conditions

Domain	Status	Current wording	Proposed wording
		disease and conditions with endodontic treatment	of the pulp, root canal and periapical disease and conditions with endodontic treatment and peri-radicular tissues
	No change	6. manage the loss of tooth structure by restoring the dentition with direct and indirect restorations	6. manage the loss of tooth structure by restoring the dentition with direct and indirect restorations
	Change	7. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise occlusion	7. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise occlusion
	No change	8. utilise fixed prostheses to rehabilitate, restore appearance and function and stabilise the occlusion	8. utilise fixed prostheses to rehabilitate, restore appearance and function and stabilise the occlusion
	No change	9. manage oral conditions, pathology and medically related disorders and diseases associated with the dentition, mouth and associated structures	9. manage oral conditions, pathology and medically related disorders and diseases associated with the dentition, mouth and associated structures
	No change	10. manage skeletal and dental occlusal discrepancies	10. manage skeletal and dental occlusal discrepancies
	No change	11. manage the removal of teeth and oral surgical procedures	11. manage the removal of teeth and oral surgical procedures
	Change	12. administer, apply and prescribe pharmaceutical agents	12. administer, apply and prescribe pharmaceutical agents medicines

Domain	Status	Current wording	Proposed wording
	No change	13. evaluate and monitor the progress of treatment and oral health outcomes	13. evaluate and monitor the progress of treatment and oral health outcomes
	No change	14. manage dental emergencies	14. manage dental emergencies
	No change	15. manage medical emergencies	15. manage medical emergencies

Competencies of the newly qualified dental hygienist

Domain 4. Health promotion

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified dental hygienist must be able to:
Competency statements	No change	1. understand the determinants of health, risk factors and behaviours that influence health	1. understand the determinants of health, risk factors and behaviours that influence health
	Change	2. understand the theories and principles of health promotion	2. understand the theories and principles of connection between health promotion and health policy development
	Change	3. understand health promotion strategies to promote oral and general health	3. Understand apply the theories and principles of health promotion strategies to promote to improve oral and general health
	Change	4. understand the design, implementation and evaluation of evidence-based health promotion	4. Understand the design, implementation and evaluation of design, implementation implement and evaluate of evaluated evidence-based health promotion strategies and programs

Competencies of the newly qualified dental hygienist

Domain 5. Scientific and clinical knowledge

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	Change	covers the underlying knowledge base required by dental practitioners	covers the application of the underlying knowledge base required by dental practitioners
Introductory sentence	Change	On graduation a dental hygienist must be able to:	On graduation a A newly qualified dental hygienist must be able to:
Competency statements	Change	1. understand the biological, physical, and behavioural sciences in relation to oral health and disease	1. understand apply the social, cultural, biological, physical, and behavioural sciences in relation to oral health and disease care provision and disease prevention
	Change	2. understand the theories and principles of population oral health	2. Understand apply the theories and principles of population oral health
	Change	3. understand the scientific principles and application of infection prevention and control	3. understand apply the scientific principles and application of infection prevention and control
	Change	4. understand the scientific basis, application, and risks of using ionising radiation	4. understand the scientific basis, application, and risks and demonstrate the use of using ionising radiation

Section	Status	Current wording	Proposed wording
	Change	5. understand the scientific basis, application, limitations and risks of using dental materials	5. understand the scientific basis, application , limitations, and risks, of using dental materials and demonstrate their use
	Change	6. understand the principles of pharmacology and the risks in using therapeutic agents	6. understand apply the principles of pharmacology, understanding the risks and limitations in of using therapeutic agents, including polypharmacy and overuse
	Change	7. understand the principles of risk management and quality improvement	7. understand apply the principles of risk management and quality improvement
	Added		8. recognise and comply with local clinical governance and health and safety processes and policies

Competencies of the newly qualified dental hygienist

Domain 6. Person-centred care

Section	Status	Current wording	Proposed wording
Domain name	Change	6. Patient Care	6. Patient Person-centred care

6.1 Clinical information gathering

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.1 Clinical information gathering	6.1 Clinical information gathering
Domain description	No change	covers the collection and recording of information that is necessary and relevant	covers the collection and recording of information that is necessary and relevant
Introductory sentence	Change	On graduation a dental hygienist must be able to:	On graduation a A newly qualified dental hygienist must be able to:
Competency statements	Change	1. obtain and record a relevant history of the patient's medical, social and oral health status	1. obtain and record a relevant history of the patient's individual's medical, social and oral health status
	No change	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures

Section	Status	Current wording	Proposed wording
	No change	3. select necessary clinical, pathology and other diagnostic procedures and interpret results	3. select necessary clinical, pathology and other diagnostic procedures and interpret results
	No change	4. take radiographs relevant to dental practice	4. take radiographs relevant to dental practice
	No change	5. evaluate individual patient risk factors for oral disease	5. evaluate individual patient risk factors for oral disease
	No change	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.2 Diagnosis and management planning	6.2 Diagnosis and management planning
Domain description	No change	covers the identification of disease or abnormalities that require treatment or investigation	covers the identification of disease or abnormalities that require treatment or investigation
Introductory sentence	Change	On graduation a dental hygienist must be able to:	On graduation a A newly qualified dental hygienist must be able to:

Section	Status	Current wording	Proposed wording
Competency statements	Change	1. recognise health as it relates to the individual	1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
		2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
	No change	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
	Change	4. formulate and record a patient-centred evidence-based oral health treatment plan	4. formulate and record a patient person -centred evidence-based oral health treatment plan
	Change	5. determine when and how to refer patients to the appropriate health professional	5. determine when and how to refer patients to the appropriate health and or care professional
	Change	6. obtain and record patient informed consent and financial consent for treatment	6. obtain and record patient informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

Domain	Status	Current wording	Proposed wording
Sub-domain name	No change	6.3 Clinical treatment and evaluation	6.3 Clinical treatment and evaluation
Domain description	Change	Covers the provision of evidence-based patient-centred care	Covers the provision of evidence-based patient person -centred care
Introductory sentence	Change	On graduation a dental hygienist must be able to:	On graduation a A newly qualified dental hygienist must be able to:
Competency statements	No change	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
	Change	2. apply the principles of behaviour management	2. apply the principles of positive behaviour management support to provide person-centred care
	No change	3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth and their replacements	3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth and their replacements
	No change	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures

Domain	Status	Current wording	Proposed wording
		5. perform orthodontic procedures as directed by the treating dentist and orthodontist	5. perform orthodontic procedures as directed by the treating dentist and orthodontist
	No change	6. administer pharmaceutical agents	6. administer pharmaceutical agents
	No change	7. evaluate and monitor the progress of treatment and oral health outcomes	7. evaluate and monitor the progress of treatment and oral health outcomes
	No change	8. manage dental emergencies	8. manage dental emergencies
	No change	9. manage medical emergencies	9. monitor medical emergencies

Competencies of the newly qualified dental prosthetist

Domain 4. Health promotion

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dental prosthetist must be able to:	On graduation a A newly qualified dental prosthetist must be able to:
Competency statements	No change	1. understand the determinants of health, risk factors and behaviours that influence health	1. understand the determinants of health, risk factors and behaviours that influence health
	Change	2. understand the theories and principles of health promotion	2. understand the theories and principles of connection between health promotion and health policy development
	Change	3. understand health promotion strategies to promote oral and general health	3. Understand apply the theories and principles of health promotion strategies to promote to improve oral and general health
	No change	4. understand the design, implementation and evaluation of evidence-based health promotion	4. understand the design, implementation and evaluation of evidence based health promotion

Competencies of the newly qualified dental prosthetist

Domain 5. Scientific and clinical knowledge

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	Change	covers the underlying knowledge base required by dental practitioners	covers the application of the underlying knowledge base required by dental practitioners
Introductory sentence	Change	On graduation a dental prosthetist must be able to:	On graduation a A newly qualified dental hygienist must be able to:
Competency statements	Change	1. understand the biological, physical, and behavioural sciences in relation to oral health and disease	1. understand apply the social, cultural , biological, physical, and behavioural sciences in relation to oral health and disease care provision and disease prevention
	Change	2. understanding the theories and principles of population oral health	2. understanding apply the theories and principles of population oral health
	Change	3. understand the scientific principles and application of infection prevention and control	3. understand apply the scientific principles and application of infection prevention and control
	Change	4. understand the scientific basis, application, limitation and risks of dental materials	4. understand the scientific basis, application limitation and risks of dental materials and demonstrate their use

Section	Status	Current wording	Proposed wording
	Change	5. understand the principles of pharmacology and the risks in using therapeutic agents	5. understand the scientific basis, application, limitations apply the principles of pharmacology, understanding the and risks of using therapeutic agents
	Change	6. understand the and application of risk management and quality improvement	6. understand apply the principles of risk management and quality improvement
	Added		7. recognise and comply with local clinical governance and health and safety processes and policies

Competencies of the newly qualified dental prosthetist

Domain 6. Person-centred care

Section	Status	Current wording	Proposed wording
Domain name	Change	6. Patient Care	6. Patient Person-centred care

6.1 Clinical information gathering

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.1 Clinical information gathering	6.1 Clinical information gathering
Domain description	No change	covers the collection and recording of information that is necessary and relevant	covers the collection and recording of information that is necessary and relevant
Introductory sentence	Change	On graduation a dental prosthetist must be able to:	On graduation a A newly qualified dental prosthetist must be able to:
Competency statements	Change	1. obtain and record a relevant history of the patient's medical, social and oral health status	1. obtain and record a relevant history of the patient's individual's medical, social and oral health status
	No change	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures

Section	Status	Current wording	Proposed wording
		3. select necessary clinical and other diagnostic procedures and interpret results	3. select necessary clinical and other diagnostic procedures and interpret results
	No change	4. evaluate individual patient risk factors for oral disease	4. evaluate individual patient risk factors for oral disease
	No change	5. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy	5. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.2 Diagnosis and management planning	6.2 Diagnosis and management planning
Domain description	No change	covers the identification of disease or abnormalities that require treatment or investigation	covers the identification of disease or abnormalities that require treatment or investigation
Introductory sentence	Change	On graduation a dental prosthetist must be able to:	On graduation a A newly qualified dental prosthetist must be able to:
Competency statements	Change	1. recognise health as it relates to the individual	1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts

Section	Status	Current wording	Proposed wording
	No change	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
	No change	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
	Change	4. formulate and record a patient-centred evidence-based oral health treatment plan	4. formulate and record a patient- person -centred evidence-based oral health treatment plan
	Change	5. determine when and how to refer patients to the appropriate health professional	5. determine when and how to refer patients to the appropriate health and or care professional
	Change	6. obtain and record patient informed consent and financial consent for treatment	6. obtain and record patient informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

Domain	Status	Current wording	Proposed wording
Sub-domain name	No change	6.3 Clinical treatment and evaluation	6.3 Clinical treatment and evaluation
Domain description	Change	Covers the provision of evidence-based patient-centred care	Covers the provision of evidence-based patient person -centred care

Domain	Status	Current wording	Proposed wording
Introductory sentence	Change	On graduation a dental prosthetist must be able to:	On graduation a A newly qualified dental prosthetist must be able to:
Competency statements	No change	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
	Change	2. apply the principles of behaviour management	2. apply the principles of positive behaviour management support to provide person-centred care
	No change	3. apply pharmaceutical agents	3. apply pharmaceutical agents
	No change	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
	Moved – No change	5. evaluate and monitor the progress of treatment and oral health outcomes	6. evaluate and monitor the progress of treatment and oral health outcomes
	Moved – No change	6. manage medical emergencies	7. manage medical emergency
	Moved – No change	7. manage dental emergencies	8. manage dental emergencies
	Moved – No change	8. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion	5. utilise patient removable prostheses to rehabilitate, restore appearance and function, prevent injury and stabilise the occlusion

Competencies of the newly qualified dental therapist

Domain 4. Health promotion

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified dental therapist must be able to:
Competency statements	No change	1. understand the determinants of health, risk factors and behaviours that influence health	1. understand the determinants of health, risk factors and behaviours that influence health
	Change	2. understand the theories and principles of health promotion	2. understand the theories and principles of connection between health promotion and health policy development
	Change	3. understand health promotion strategies to promote oral and general health	3. Understand apply the theories and principles of health promotion strategies to promote to improve oral and general health
	Change	4. understand the design, implementation and evaluation of evidence-based health promotion	4. Understand the design, implementation and evaluation of design, implementation implement and evaluate of evaluated evidence-based health promotion strategies and programs

Competencies of the newly qualified dental therapist

Domain 5. Scientific and clinical knowledge

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	Change	covers the underlying knowledge base required by dental practitioners	covers the application of the underlying knowledge base required by dental practitioners
Introductory sentence	Change	On graduation a dental therapist must be able to:	On graduation a A newly qualified dental therapist must be able to:
Competency statements	Change	1. understand the biological, physical, and behavioural sciences in relation to oral health and disease	1. understand apply the social, cultural, biological, physical, and behavioural sciences in relation to oral health and disease care provision and disease prevention
	Change	2. understand the theories and principles of population oral health	2. Understand apply the theories and principles of population oral health
	Change	3. understand the scientific principles and application of infection prevention and control	3. understand apply the scientific principles and application of infection prevention and control
	Change	4. understand the scientific basis, application, and risks of using ionising radiation	4. understand the scientific basis, application, and risks and demonstrate the use of using ionising radiation

Section	Status	Current wording	Proposed wording
	Change	5. understand the scientific basis, application, limitations and risks of using dental materials	5. understand the scientific basis, application , limitations, and risks, of using dental materials and demonstrate their use
	Change	6. understand the principles of pharmacology and the risks in using therapeutic agents	6. understand apply the principles of pharmacology, understanding the risks and limitations in of using therapeutic agents, including polypharmacy and overuse
	Change	7. understand the principles of risk management and quality improvement	7. understand apply the principles of risk management and quality improvement
	Added		8. recognise and comply with local clinical governance and health and safety processes and policies

Competencies of the newly qualified dental therapist

Domain 6. Person-centred care

Section	Status	Current wording	Proposed wording
Domain name	Change	6. Patient Care	6. Patient Person-centred care

6.1 Clinical information gathering

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.1 Clinical information gathering	6.1 Clinical information gathering
Domain description	No change	covers the collection and recording of information that is necessary and relevant	covers the collection and recording of information that is necessary and relevant
Introductory sentence	Change	On graduation a dental therapist must be able to:	On graduation a A newly qualified dental therapist must be able to:
Competency statements	Change	1. obtain and record a relevant history of the patient's medical, social and oral health status	1. obtain and record a relevant history of the patient's individual's medical, social and oral health status
	No change	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures

Section	Status	Current wording	Proposed wording
	No change	3. select necessary clinical, pathology and other diagnostic procedures and interpret results	3. select necessary clinical, pathology and other diagnostic procedures and interpret results
	No change	4. take radiographs relevant to dental practice	4. take radiographs relevant to dental practice
	No change	5. evaluate individual patient risk factors for oral disease	5. evaluate individual patient risk factors for oral disease
	No change	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.2 Diagnosis and management planning	6.2 Diagnosis and management planning
Domain description	No change	covers the identification of disease or abnormalities that require treatment or investigation	covers the identification of disease or abnormalities that require treatment or investigation
Introductory sentence	Change	On graduation a dental therapist must be able to:	On graduation a A newly qualified dental therapist must be able to:

Section	Status	Current wording	Proposed wording
Competency statements	Change	1. recognise health as it relates to the individual	1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
	No change	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
	No change	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
	Change	4. formulate and record a patient-centred evidence-based oral health treatment plan	4. formulate and record a patient person -centred evidence-based oral health treatment plan
	Change	5. determine when and how to refer patients to the appropriate health professional	5. determine when and how to refer patients and or care professional
	Change	6. obtain and record patient informed consent and financial consent for treatment	6. obtain and record patient informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

Domain	Status	Current wording	Proposed wording
Sub-domain name	No change	6.3 Clinical treatment and evaluation	6.3 Clinical treatment and evaluation
Domain description	Change	Covers the provision of evidence-based patient-centred care	Covers the provision of evidence-based patient person -centred care
Introductory sentence	Change	On graduation a dental therapist must be able to:	On graduation a A newly qualified dental therapist must be able to:
Competency statements	No change	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
	Change	2. apply the principles of behaviour management	2. apply the principles of positive behaviour management support to provide person-centred care
	No change	3. manage non-surgical treatment of gingival diseases	3. manage non-surgical treatment of gingival diseases
	No change	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures
	Moved - No change	5. perform orthodontic procedures as directed by the treating dentist and orthodontist	8. perform orthodontic procedures as directed by the treating dentist and orthodontist
	Moved – No change	6. administer pharmaceutical agents	9. administer pharmaceutical agents

Domain	Status	Current wording	Proposed wording
	Moved – No change	7. evaluate and monitor the progress of treatment and oral health outcomes	10. evaluate and monitor the progress of treatment and oral health outcomes
	Moved - No change	8. manage dental emergencies	11. manage dental emergencies
	Moved – No change	9. manage medical emergencies	12. manage medical emergencies
	Moved and changed	10. manage pulpal diseases and conditions by direct and indirect pulp capping and pulpotomies	5. manage pulpal disease and conditions by direct and indirect pulp capping and pulpotomies
	Moved – No change	11. manage the loss of tooth structure by restoring the dentition with direct restorations	6. manage the loss of tooth structure by restoring the dentition with direct restorations
	Moved and changed	12. manage the non-surgical removal of deciduous teeth	7. manage the non-surgical removal of deciduous teeth

Competencies of the newly qualified oral health therapist

Domain 4. Health promotion

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	No change		
Introductory sentence	Change	On graduation a dental practitioner must be able to:	On graduation a A newly qualified oral health therapist must be able to:
Competency statements	No change	1. understand the determinants of health, risk factors and behaviours that influence health	1. understand the determinants of health, risk factors and behaviours that influence health
	Change	2. understand the theories and principles of health promotion	2. understand the theories and principles of connection between health promotion and health policy development
	Change	3. understand health promotion strategies to promote oral and general health	3. Understand apply the theories and principles of health promotion strategies to promote to improve oral and general health
	Change	4. understand the design, implementation and evaluation of evidence-based health promotion	4. Understand the design, implementation and evaluation of implement and evaluate evidence-based health promotion strategies and programs

Competencies of the newly qualified oral health therapist

Domain 5. Scientific and clinical knowledge

Section	Status	Current wording	Proposed wording
Domain name	No change		
Domain description	Change	covers the underlying knowledge base required by dental practitioners	covers the application of the underlying knowledge base required by dental practitioners
Introductory sentence	Change	On graduation an oral health therapist must be able to:	On graduation an A newly qualified oral health therapist must be able to:
Competency statements	Change	1. understand the biological, physical, and behavioural sciences in relation to oral health and disease	1. understand apply the social, cultural, biological, physical, and behavioural sciences in relation to oral health and disease care provision and disease prevention
	Change	2. understand the theories and principles of population oral health	2. Understand apply the theories and principles of population oral health
	Change	3. understand the scientific principles and application of infection prevention and control	3. understand apply the scientific principles and application of infection prevention and control
	Change	4. understand the scientific basis, application, and risks of using ionising radiation	4. understand the scientific basis, application, and risks and demonstrate the use of using ionising radiation

Section	Status	Current wording	Proposed wording
	Change	5. understand the scientific basis, application, limitations and risks of using dental materials	5. understand the scientific basis, application , limitations, and risks of using dental materials and demonstrate their use
	Change	6. understand the principles of pharmacology and the risks in using therapeutic agents	6. understand apply the principles of pharmacology, understanding the risks and limitations in of using therapeutic agents, including polypharmacy and overuse
	Change	7. understand the principles of risk management and quality improvement	7. understand apply the principles of risk management and quality improvement
	Added		8. recognise and comply with local clinical governance and health and safety processes and policies

Competencies of the newly qualified oral health therapist

Domain 6. Person-centred care

Section	Status	Current wording	Proposed wording
Domain name	Change	6. Patient Care	6. Patient Person-centred care

6.1 Clinical information gathering

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.1 Clinical information gathering	6.1 Clinical information gathering
Domain description	No change	covers the collection and recording of information that is necessary and relevant	covers the collection and recording of information that is necessary and relevant
Introductory sentence	Change	On graduation an oral health therapist must be able to:	On graduation an A newly qualified oral health therapist must be able to:
Competency statements	Change	1. obtain and record a relevant history of the patient's medical, social and oral health status	1. obtain and record a relevant history of the patient's individual's medical, social and oral health status
	No change	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures	2. perform an examination for health, disease and abnormalities of the dentition, mouth and associated structures

Section	Status	Current wording	Proposed wording
	No change	3. select necessary clinical, pathology and other diagnostic procedures and interpret results	3. select necessary clinical, pathology and other diagnostic procedures and interpret results
	No change	4. take radiographs relevant to dental practice	4. take radiographs relevant to dental practice
	No change	5. evaluate individual patient risk factors for oral disease	5. evaluate individual patient risk factors for oral disease
	No change	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy	6. maintain accurate, objective, legible and contemporaneous records of patient management and protect patient privacy

6.2 Diagnosis and management planning

Section	Status	Current wording	Proposed wording
Sub-Domain name	No change	6.2 Diagnosis and management planning	6.2 Diagnosis and management planning
Domain description	No change	covers the identification of disease or abnormalities that require treatment or investigation	covers the identification of disease or abnormalities that require treatment or investigation
Introductory sentence	Change	On graduation an oral health therapist must be able to:	On graduation a A newly qualified oral health therapist must be able to:

Section	Status	Current wording	Proposed wording
Competency statements	Change	1. recognise health as it relates to the individual	1. recognise health as it relates to the individual, taking into consideration medical, social and cultural contexts
	No change	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management	2. diagnose disease or abnormalities of the dentition, mouth and associated structures and identify conditions which require management
	No change	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning	3. determine the impact of risk factors, systemic disease and medications on oral health and treatment planning
	Change	4. formulate and record a patient-centred evidence-based oral health treatment plan	4. formulate and record a patient person -centred evidence-based oral health treatment plan
	Change	5. determine when and how to refer patients to the appropriate health professional	5. determine when and how to refer patients and or care professional
	Change	6. obtain and record patient informed consent and financial consent for treatment	6. obtain and record patient informed consent and financial consent for treatment

6.3 Clinical treatment and evaluation

Domain	Status	Current wording	Proposed wording
Sub-domain name	No change	6.3 Clinical treatment and evaluation	6.3 Clinical treatment and evaluation
Domain description	Change	Covers the provision of evidence-based patient-centred care	Covers the provision of evidence-based patient person -centred care
Introductory sentence	Change	On graduation an oral health therapist must be able to:	On graduation a A newly qualified oral health therapist must be able to:
Competency statements	No change	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures	1. apply the principles of disease and trauma prevention in management of the dentition, mouth and associated structures
	Change	2. apply the principles of behaviour management	2. apply the principles of positive behaviour management support to provide person-centred care
	No change	3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements	3. manage non-surgical treatment of diseases and conditions of the periodontium and supporting tissues of the teeth or their replacements
	Moved – No changed	4. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures	7. manage oral conditions and diseases, pain and pathology of the dentition, mouth and associated structures

Domain	Status	Current wording	Proposed wording
	Moved - No change	5. perform orthodontic procedures as directed by the treating dentist and orthodontist	8. perform orthodontic procedures as directed by the treating dentist and orthodontist
	Moved - No change	6. administer pharmaceutical agents	9. administer pharmaceutical agents
	Moved - No change	7. evaluate and monitor the progress of treatment and oral health outcomes	10. evaluate and monitor the progress of treatment and oral health outcomes
	Moved - No change	8. manage dental emergencies	11. manage dental emergencies
	Moved - No change	9. manage medical emergencies	12. manage medical emergencies
	Moved and changed	10. manage pulpal diseases and conditions by direct and indirect pulp capping and pulpotomies	4. manage pulpal disease and conditions by direct and indirect pulp capping and pulpotomies
	Moved - No change	11. manage the loss of tooth structure by restoring the dentition with direct restorations	5. manage the loss of tooth structure by restoring the dentition with direct restorations
	Moved and changed	12. manage the non-surgical removal of deciduous teeth	6. manage the non-surgical removal of deciduous teeth