

Australian Dental Council report of an evaluation of The University of Western Australia's Doctor of Dental Medicine

April 2025

[Updated November 2025]

Executive summary

Program provider	The University of Western Australia
Program/qualification name	Doctor of Dental Medicine
Program/qualification abbreviation	DMD
Program/qualification code	90860
Head office address, including State	17 Monash Avenue, Nedlands WA 6009
Campus	Oral Health Centre of WA
Program length	4 Years
Registration division	Dentist
Registration specialty	N/A
Qualification type	HE
Australian Qualifications Framework level	9
Accreditation standards version	Accreditation standards for dental practitioner programs (Approved August 2020)
Date of site evaluation	8 – 9 April 2025
Date of ADC decision	8 August 2025
Type of accreditation	Reaccreditation
Accreditation start date	1 January 2026
Accreditation end date	31 December 2032

Background

The University of Western Australia's (UWA's) Doctor of Dental Medicine (DMD) program was reviewed at a site visit in May 2018. The program was accredited without conditions until 31 December 2025.

In August 2021 the Australian Dental Council (ADC) was informed of a curriculum rewrite of the Medical Sciences major in the Bachelor of Medical Sciences, which provides a pathway for students who have successfully completed the Medical Sciences major to proceed straight into Year 2 of the DMD program. The curriculum was due to expire in late 2021 with the new curriculum being implemented from January 2022.

At its meeting on 10 August 2021 the Accreditation Committee resolved that the revised curriculum was a material change and that a limited paper-based review of the change was to be undertaken against Standards 3, 4 and 5.

Two teleconferences were held on 25 October 2021 and 24 November 2021 to consider the documentation provided by UWA. The Accreditation Team (AT) found that the program produces competent entry-level general dentists. However, the AT raised concerns about the lack of clarity regarding orientation for external clinical supervisors, formal agreements with clinical placement providers, and interdisciplinary collaboration. Additionally, the AT noted insufficient details on student admission processes, academic support, and student involvement in decision-making. The ADC determined that the DMD program maintain accreditation until 31 December 2025 subject to two conditions and a monitoring requirement to be imposed on the program, which have subsequently been met.

Overview of evaluation

An ADC AT conducted a site visit on 8 and 9 April 2025 to The University of Western Australia's campus. The AT reviewed the School's additional information requested following the AT's teleconference on 11 February 2025.

The AT interviewed a range of individuals, including:

- Dean and Head of Dental School
- DMD course coordinator
- Vice-Chancellor
- DMD year coordinators
- DMD, Oral Health Centre of Western Australia (OHCWA), Bunbury and Mount Henry clinical supervisors
- Academic and clinical staff
- Professional staff
- Student support staff
- Current students
- Recent graduates
- Learning and teaching committee
- Assessment/moderation committee
- Employers from private practice and local area health authorities
- Representatives of professional associations
- Equity and diversity staff
- Individuals providing interprofessional input or other program input

The AT toured the OHCWA and Mount Henry clinical facilities, learning spaces and simulation clinics, as well as a virtual tour of the Bunbury clinic. The AT were also provided with a PebblePad demonstration.

The findings of this report are based on the AT's assessment of the material outlined above and interview evidence.

Key findings

The evidence considered by the Accreditation Team (AT) indicates that the University of Western Australia's Doctor of Dental Medicine program produces graduates competent to practice as entry level general dentists.

The program has the right staffing mix and qualifications to deliver the program, the enthusiasm and dedication of staff and students was evident throughout the site visit. The support and mentorship provided to students, and through the addition of the new clinical coordinators, is to be commended.

The program has undergone significant changes to the curriculum, with continual improvements being implemented. At the site visit, the School provided the AT with a report from an internal review that was recently conducted by external parties. The AT commends the School for their proactive approach to reviewing the program and encourages the School to continue with the implementation of the recommendations. The AT found that the students have the opportunity to provide formal and informal feedback into the program and was particularly impressed with the way the Head of School (HoS) interacts with the student representatives to gain their feedback. This interaction was highly valued by students. To further improve feedback mechanisms, the AT recommends that the School explore opportunities for more formalised mechanisms for staff and external stakeholders to provide feedback, and ways to evaluate the effectiveness of these changes.

The AT were impressed with the learning space, clinical facilities, and equipment at OHCWA which are well-equipped to provide students with opportunities to develop the skills and knowledge needed to meet the professional competencies. The AT heard that the Western Australian Department of Health is currently in negotiations to continue the formalised agreement with OHCWA, which is expected to be finalised in July 2025.

Interview evidence from stakeholders demonstrated that there is an apparent disconnect between some elements of the didactic and clinical components of the program. However, the School has plans in place to address this and has completed an exercise to map the curriculum and overall structure of the program to ensure there is better alignment. The AT recommends that the School evaluates the effectiveness of the changes that are made to the design and delivery of the program to ensure the changes are meeting their intended goals.

The AT commends the School for the implementation of the clinical coordinator role and heard that this has helped to improve the triaging of patients to students which helps to ensure all students have sufficient and equitable access to patients. The AT had concerns about the diversity of patients that attend the OHCWA and Mount Henry clinics, however, commends the School for the implementation of rural placements that have expanded student access to diverse patients. The AT recommends the School continues to expand these placements so that all students have access to these opportunities.

While the School is commended for providing students with opportunities to work with and learn from Dental Specialists, as well as access to other health professionals within tertiary hospitals, the AT recommends the School explores opportunities to collaborate with Oral Health Therapists.

The AT found that students' experiences with research literacy varied significantly due to several factors, including the availability of resources, the level of support from faculty and individual student engagement. The AT recommends the School explores mechanisms to improve the standardisation and consistency of research.

The introduction of the e-portfolio application pebble pad has increased the consistency and transparency of assessment feedback to students in the clinical setting. However, the AT heard that while a process for calibration is in place the application of calibration is still a work in progress and that feedback from supervisors varied. The AT recommends the School evaluates the effectiveness of supervisor calibration.

The AT found that students lacked sufficient preparation to effectively discuss financial consent with patients. The AT recommends that the School explore opportunities for students to apply the principles of financial consent within the clinical setting.

The School has made progress in promoting cultural safety for Aboriginal and Torres Strait Islander peoples. Initiatives such as implementing the 'Joining the Dots' the dental Aboriginal and Torres Strait Islander cultural safety curriculum that was developed by the Australasian Council of Dental Schools (ACODS) and the rural placements for students have been instrumental in this advancement. The AT found that the School has excellent allies within its staffing profile who are dedicated to facilitating learning about Aboriginal and Torres Strait Islander health. These allies play a crucial role in ensuring that students gain a deep understanding of cultural safety and are well-prepared to provide culturally safe care. The AT noted that at the time of the visit, there were no Aboriginal or Torres Strait Islanders students enrolled in the program. The School must explore new pathways for actively recruiting Aboriginal and Torres Strait Islander students. Additionally, the School is encouraged to explore opportunities for the recruitment of Aboriginal and Torres Strait Islander staff.

ADC Accreditation decision

The ADC has determined that the University of Western Australia's Doctor of Dental Medicine program is reaccredited for a period of seven (7) years from **1 January 2026** until **31 December 2032** subject to the following condition:

1. To meet Standard 6 – Cultural safety, the School is required to provide a report by **5 September 2025** that shows a plan for how the School is promoting and supporting the recruitment of Aboriginal and Torres Strait Islander students.

The ADC has determined that this Condition has been met

In addition, the following monitoring requirements are imposed on the Doctor of Dental Medicine (DMD) program:

1. The School is required to provide by **5 September 2025** a signed copy of the updated agreement between Western Australian Department of Health and OHCWA.

The ADC has determined that this Monitoring requirement has been met

2. The School is required to provide by **15 October 2025** an update on the rollout of the revised curriculum and any changes to the delivery and design of the program that have been implemented.

The ADC has determined that this Monitoring requirement has been met

3. The School is required to provide by **15 October 2025** an evaluation of the effectiveness of the supervisor calibration process and activities that have been implemented to determine the consistency in feedback provided to students.

The ADC has determined that this Monitoring requirement has been met

4. The School is required to provide by **15 October 2025** an update on the progress of providing rural or diverse placement opportunities for all students.

The ADC has determined that this Monitoring requirement has been met

5. The School is required to provide **1 August 2026** an evaluation of the implementation of the revised curriculum to determine if the changes to the program design and delivery have met their intended goals.