

## Welcome to the Dental Board of Australia's December 2014 newsletter.

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## Renew registration online now

The Dental Board of Australia (the Board) reminds dental practitioners that the renewal of registration is now in the late period. Renewal applications received during December will incur a late payment fee.

If you are awaiting confirmation that your registration has been renewed, you are still able to practise while your application is assessed. Your name remains listed on the national Register of Dental Practitioners.

Under the National Law<sup>1</sup>, if you do not renew your registration within one month of your registration expiry date you must be removed from the Register. Your registration will lapse and you will not be able to practise in Australia. A fast-track application can be made, but only during January. You cannot practise until the application is processed and the national register is updated.

Under the National Law, all registered dental practitioners are responsible for renewing their registration on time each year and there is no option for AHPRA or the Board to renew your registration after it has lapsed without a new application.

We encourage you to read the Board's registration standards carefully before applying to renew as information in support of declarations made in an application could be requested.

A renewal [FAQ](#) is available on the Board's website.

## News from the Board

### Interim policy on the use of botulinum toxin

The Board continues to work on the review of the interim policy on the use of botulinum toxin and the associated fact sheet. While this work continues the Board has removed the documents from its website.

Even though the Board has removed the documents from the website, the public remains protected by the Board's existing regulatory policies, particularly the [Scope of practice registration standard](#) and associated guidelines, and the [Code of conduct](#) and various Commonwealth and state legislation.

Dentists using agents such as botulinum toxin and dermal fillers in their practice are expected to do so in consideration of the requirements of the Board and other regulatory authorities. Prescribing under legislation in most jurisdictions must be for dental treatment only. Specifically, dentists and specialists must ensure that they have undertaken education and training in the use of these agents, that they are competent to use them, and that there is documented informed and financial consent.

For dentists, including dental specialists, the Board considers the approved program of study that qualifies a dentist for registration as providing the foundation knowledge. Further training and study in the use of facial injectables can maintain competency and knowledge in the use of these scheduled medicines in dental practice. This can be done through continuing professional development (CPD). Practitioners should consider the Board's [registration standard and guidelines](#) on continuing professional development when selecting CPD.

The Board expects dentists to refer the patient to another dental practitioner or medical practitioner if the care of the patient is outside that practitioner's scope of practice.

There is no approved training for dental prosthetists, dental hygienists, dental therapists or oral health therapists in the use of botulinum toxin or dermal fillers. Jurisdictions' drugs and poisons legislation does not authorise the use of these agents by these dental practitioners. Any use of botulinum toxin or dermal fillers by these practitioners would be considered as practising outside the practitioner's scope of practice. A dentist or dental specialist cannot instruct or ask these practitioners to use botulinum toxin or dermal fillers.

<sup>1</sup> Health Practitioner Regulation National Law, as in force in each state and territory.

## Therapeutic Goods Administration

Part of the review of the interim policy has involved working with the Therapeutic Goods Administration (TGA). The TGA is part of the Australian Government Department of Health and Ageing, and is responsible for regulating therapeutic goods including medicines, medical devices, biological, blood and blood products.

### 'Off-label' use

TGA-approved indications for scheduled medicines are published in the [Australian Register of Therapeutic Goods](#).

The practice of healthcare practitioners prescribing scheduled medicines outside their approved indications, (i.e. the indications entered in the Australian Register of Therapeutic Goods), is a matter for healthcare practitioners, who are not regulated or controlled by the TGA.

The use of a medicine outside the approved indication/s for supply is often referred to as 'off label' use. The TGA does not assess 'off-label' uses and they are therefore regarded as experimental.

Dentists using botulinum toxin in their practice should be familiar with the approved indications of this scheduled medicine. For example, the use of botulinum toxin for the treatment of temporomandibular joint (TMJ) disorder/dysfunction is considered to be 'off-label'.

If a dentist does decide to use a scheduled medicine 'off-label' then this is a clinical judgement that should be made in consultation with their patient.

### What does this mean for you?

If you are a dentist, or dental specialist, and using botulinum toxin and/or dermal fillers in your practice, you need to ensure that you:

- have undertaken education and training to use these agents
- are competent to use them
- practise within the definition of dentistry as defined in the Board's [Guidelines for scope of practice](#)
- ensure you have informed and financial consent at all times
- refer the patient to another dental practitioner or medical practitioner if the care is outside your scope of practice
- ensure your professional indemnity insurance covers your practice in this area
- practise in accordance with the drugs and poisons legislation in your state or territory, which will usually require you to only use scheduled medicines for dental therapeutic use
- consider whether the reason you are using the agent is for an approved therapeutic use in the TGA Australian Register of Therapeutic Goods, and if not (therefore 'off-label'), you are relying on your clinical judgement. This should include assessment of risk and you need to have discussed the use of the agent with the patient, as shown by documented informed consent, and
- ensure any advertising of these services is in accordance with the Board's [Guidelines for advertising regulated health services](#).

## Regulatory codes and guidelines

In addition to registration standards, the Board expects all dental practitioners to practise in accordance with all regulatory [codes and guidelines](#). When you apply for, or renew, your registration as a dental practitioner, you agree to comply with all relevant legislation and Board registration standards, codes and guidelines. Your compliance with these standards may be audited from time to time. In addition, if you are the subject of a notification you may also be required to provide evidence to the Board of your compliance with these standards, codes and guidelines.

### Scope of practice

The Board has published the revised [FAQ's](#) on its website to help dental practitioners understand what they need to do to comply with the [Scope of practice registration standard](#) and [Guidelines for scope of practice](#).

### Code of conduct

The [Code of conduct](#) seeks to assist and support practitioners to deliver appropriate, effective services within an ethical framework. Practitioners have a professional responsibility to be familiar with this code and to apply the guidance it contains.

Dental practitioners have a duty to make the care of patients their first concern and to practise safely and effectively. Maintaining a high level of professional competence and conduct is essential for good care.

### Obligations of dental practitioners regarding use of title

The National Law allows for, and protects, specialist titles and endorsements. A registered health practitioner who does not hold specialist registration may not use the title 'specialist', or through advertising or other means, present themselves to the public as holding specialist registration in a health profession.

While the National Law protects specific titles, use of some words, such as 'specialises in', may be misleading or deceptive, as patients can interpret the advertisements as implying that the practitioner is more skilled or has greater experience than is the case.

The [list of approved specialties](#) is available on the Board's website.

The Board recommends that care be taken by any practitioner who uses a title which could reasonably lead a member of the public to believe that a practitioner is registered in a health profession, or division of a health profession, unless they have a demonstrable right to use that title.

## 2013/14 National Scheme annual report

AHPRA and the National Boards have released their 2013/14 [annual report](#) on the National Registration and Accreditation Scheme (the National Scheme), providing a comprehensive record of the operations of the National Scheme for the 12 months ending 30 June 2014.

This year, for the first time, AHPRA and the National Boards have also published summaries of our work regulating health practitioners in every state and territory. Profession-specific profiles have also been published.

The annual report provides a national snapshot of the work and finances of the National Scheme and is tabled in the parliaments of each state and territory and the Commonwealth. The 2014 annual report is an important reporting milestone and covers the lead-up to the scheduled independent three-year review of the National Scheme, now underway.

For more information, please read the media release on the AHPRA website.

### Dental profession profile

The Board has published a report titled Dental regulation at work in Australia 2013-14, which outlines its work in regulating the dental professions in the National Scheme. The report provides a profession-specific view of the Board’s work to manage risk to the public and regulate the profession in the public interest. It is a profile of regulation at work in Australia for the 12 months ending 30 June 2014.

The data in this report are drawn from data published in the 2013/14 annual report of AHPRA and the National Boards.

### Snapshot of 2013/14 registration and notifications data

At 30 June 2014, there were 20,707 dental practitioners across Australia, an increase of 3.99% since the previous year. Refer to Table 1.

In 2013/14, 951 notifications were received about dental practitioners across Australia. Nationally this represents notifications at about 4% of the dental practitioner registration base. Refer to Table 2.

Table 1	Table 2
<p>Of the 20,707 dental practitioners:</p> <ul style="list-style-type: none"> <li>• 506 hold registration in more than one division<sup>2</sup></li> <li>• 6,361 were registered in NSW which represents the highest number of registered practitioners</li> <li>• 76% are registered as dentists (including dental specialists)</li> <li>• 9% as dental hygienists</li> <li>• 8% as dental therapists</li> <li>• 6% as dental prosthetists, and</li> <li>• 5% as oral health therapists.</li> </ul>	<p>Of the 951 notifications:</p> <ul style="list-style-type: none"> <li>• 39% were from NSW (notifications in NSW are managed under a co-regulatory model)</li> <li>• 61% were from outside of NSW</li> <li>• 89% of matters outside NSW related to dentists, and</li> <li>• 11% related to the other dental divisions</li> </ul>

<sup>2</sup> Note percentages do not equal 100% due to some dental practitioners holding registration in more than one division.

Nationally, there were 1,015 dental practitioner notifications closed in 2013/14, 636 of these were managed outside of NSW. Of the closed notifications, 89% related to dentists, with dental prosthetists being the next highest dental division at approximately 8%. Refer to Tables 3 and 4.

Table 3	Table 4
<p>Of the 636 matters:</p> <ul style="list-style-type: none"> <li>• 66% of matters were closed at assessment</li> <li>• 46% no further action was taken</li> <li>• 28% were retained by the health complaints entity in the state or territory</li> <li>• 11% were cautioned</li> <li>• 1% was reprimanded</li> <li>• 6% accepted undertakings</li> <li>• 7% had conditions imposed, and</li> <li>• one practitioner surrendered their registration.</li> </ul>	<p>Of the 379 matters which were managed within NSW:</p> <ul style="list-style-type: none"> <li>• 86% were finalised with no further action, discontinuation or withdrawal</li> <li>• approximately 5% received counseling/interview, and</li> <li>• 1.5% were disqualified from registering or had their registration cancelled.</li> </ul>

## Certificate of registration status now available online

### New process makes it easy

Registered health practitioners can now request a certificate of registration status (CoRS) using the online AHPRA portal. In the past this was a manual process involving a form which was either posted or hand-delivered to an AHPRA office. Practitioners can now:

- apply online by logging onto online services, or find out more information on our Practitioner services page of the AHPRA website, or
- apply using the PDF form (245 KB), which is available for download from our Common application forms page or the Practitioner services page of the AHPRA website.

There is a fee of \$50 for each CoRS.

### What is a CoRS?

When practitioners are seeking registration or employment that requires them to be registered outside Australia, the regulatory authority in that jurisdiction may require a certificate of registration status (CoRS). This document is also referred to as a certificate of good standing or certificate of current professional status by some regulators.

The certificate provided by AHPRA:

- identifies the National Board and the recipient organisation
- lists practitioner-specific information including key registration dates, details of any current proceedings, suspensions,

cancellations and/or any other relevant information, such as active conditions, undertakings, cautions and reprimands, and

- includes the date of issue of the certificate.

AHPRA offers a service to practitioners to provide a CoRS to regulatory authorities in other countries and some other approved organisations, including a number of specialist colleges. Approved organisations can be found on AHPRA's website under [Practitioner services](#).

The certificate is never provided to the requesting practitioner or to an employer, and can only be sent to an AHPRA-approved regulatory body or organisation.

These changes are part of our ongoing work with AHPRA to improve and streamline services for registered dental practitioners.

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## National Scheme news

### Three-year review of the National Scheme

The independent review of the National Scheme is underway and a consultation paper is now [published](#).

The terms of reference for the review are published at the [Australian Health Ministers' Advisory Council website](#) under 'media releases' on the right-hand tab. The review – led by independent reviewer, Mr Kim Snowball – was built into the intergovernmental agreement that set up the framework and governance arrangements for the National Scheme. The agreement stated that the Australian Health Workforce Ministerial Council (Ministerial Council) would initiate an independent review after three years of the National Scheme's operation.

The review team expects to make its recommendations early in 2015, which will then be subject to final decisions by all health ministers.

The National Boards and AHPRA are actively participating in the review process.

### Regulatory principles endorsed for National Scheme

The National Boards and AHPRA have launched refreshed regulatory principles that will underpin the work of the Boards and AHPRA in regulating Australia's health practitioners in the public interest.

The principles are endorsed by all National Boards and the AHPRA Agency Management Committee and will guide Boards and AHPRA when they are making decisions. The principles encourage a responsive, risk-based approach to regulation across all professions within the National Scheme.

Regulatory decision-making is complex and contextual, requiring judgement, experience and common sense. The principles will further support consistent, balanced decision-making.

AHPRA and the National Boards will be seeking feedback on the principles in a formal consultation and will review them based on this feedback and 12 months' experience.

We encourage you to read the regulatory principles published in a [media release](#) on the AHPRA website.

### Data Access and Research Committee (DARC)

One of the objectives of the National Scheme is to protect the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered. To achieve this objective AHPRA and the National Boards are increasing the use of data and research to inform policy and regulatory decision-making. Specifically, we're building organisational capacity for analysis, supporting external collaboration on regulatory research, and conducting or supporting high value regulatory research and analysis.

To do this well, we must effectively govern access to data generated by the National Scheme. We can provide access to de-identified data, as governed by the National Law and the relevant privacy laws and policies, but strict limits exist. These limitations are explained on the [AHPRA website](#), which also includes a downloadable data access and research [application form](#) for interested researchers.

AHPRA and the National Boards encourage applications from researchers whose projects aim to deliver regulatory improvement and health workforce reform.

### Queensland – new arrangements for handling notifications from 1 July 2014

From 1 July 2014 a new law came into effect in Queensland, the *Health Ombudsman Act 2013*.

From this date, all complaints about Queensland health practitioners will be received by the Office of the Health Ombudsman (OHO), which will either manage the matters or refer them to the relevant National Board to manage.

Complaints that were made to AHPRA or National Boards before 1 July 2014 will generally continue to be managed by AHPRA on behalf of National Boards. However, under the new law the OHO can request that a matter be referred to it to be managed. If this were to happen, AHPRA will inform both the notifier and the practitioner who is the subject of the notification.

For information about the OHO please go to [www.oho.qld.gov.au](http://www.oho.qld.gov.au) or call 133 646 (133 OHO).

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## Update your contact details

Please check your contact details and update them if necessary in order to receive regular reminders from the Board and AHPRA. Email accounts should be set to receive communications from AHPRA and the Board to avoid misdirection to a 'junk email' or 'spam' box or account.

If you have not yet provided your email address to AHPRA or the Board, please do so as a matter of urgency.

To update your contact details, go to the AHPRA website, click [Online Services](#), use your unique contact number (User ID) and follow the prompts. Your User ID is not your registration number. If you do not have a User ID complete an online enquiry form, selecting 'User ID' as the category of enquiry, or call 1300 419 495.

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## Keep in touch with the Board

- As always, we encourage you to regularly check the [Dental Board website](#) for information and updates relating to the dental profession.
- Visit our website for information on the National Scheme and for the mandatory registration standards, codes, guidelines, policies and fact sheets. Board communiqués and consultation papers are published on the site under the [News tab](#).
- Lodge an [online enquiry form](#).
- For registration enquiries call 1300 419 495 (from within Australia) or +61 3 8708 9001 (for overseas callers).
- Address mail correspondence to: Executive Officer, Dental Board of Australia, GPO Box 9958, Melbourne VIC 3001.
- AHPRA state and territory office locations are listed on the [AHPRA website](#).

