



Position Statement: Scope of practice

Oral Health Therapists, Dental Hygienists and Dental Therapists (Oral health practitioners) are members of the dental team. They are educated in and practise a range of the activities included in the definition of dentistry. Oral health practitioners are independent practitioners, and can work autonomously.

The members of the dental team work together within their particular areas of competence, to provide the best possible care for their patients. The [Dental Board of Australia](#) (2020) states, *“All dental practitioners are members of the healthcare team and are expected to work with each other to provide the best possible care and outcome for their patients. An individual dental practitioner’s scope of practice depends on their education, qualifications, training, experience and competence. Dental practitioners are expected to know their scope of practice.”*

Each team member of the dental team is treated as an individual practitioner, able to exercise autonomy in their decisions within their scope of practice. You are solely responsible for the treatments, decisions and advice you provide, regardless of your practitioner registration division.

The Australian Dental and Oral Health Therapists Association (ADOHTA) supports the need to ensure that its members are providing relevant, professional, and competent care to their clients in a safe environment. To ensure practitioners are sufficiently knowledgeable and skilled in current oral health care practices, they must adhere to the Scope of Practice guidelines outlined by the Dental Board of Australia and the shared code of conduct from the Australian Health Practitioner Regulation Agency (AHPRA).

Scope of Practice refers to the specific duties and responsibilities that oral health practitioners, including Dental Hygienists, Oral Health Therapists, and Dental Therapists, are trained and competent to perform. It is important for practitioners to understand and abide by the scope of practice for their respective profession to ensure the safety and competency of the oral health care they provide, and to maintain the public's confidence in the dental profession.

Non-compliance with the scope of practice guidelines can result in disciplinary proceedings by the Dental Board of Australia and AHPRA. ADOHTA encourages its members to use the Dental Board's scope of practice reflective tool to ensure they are practicing within the scope of their profession.

Professions scope of practice

The scope of practice for dental professionals, including dental hygienists, oral health therapists, and dental therapists, is determined by the Australian Dental Council (ADC) through their competency standards for newly qualified dental professionals. These standards outline the knowledge, skills, and judgment required for safe and effective practice in the dental profession.

The ADC's competency standards take into account the specific role and responsibilities of each dental profession, as well as any relevant legislation and regulations. They also consider the latest evidence-based practice and emerging trends in the field of oral health.

For example, dental hygienists are responsible for the assessment, diagnosis, and treatment of oral diseases, as well as the promotion of oral health. Their scope of practice includes the provision of preventative and therapeutic care, such as scaling and polishing, fluoride therapy, and oral health education.

Oral health therapists, on the other hand, have a broader scope of practice that includes both dental therapy and dental hygiene. They are responsible for the assessment, diagnosis, and treatment of oral diseases, as well as the promotion of oral health. They can provide preventative and therapeutic care, such as scaling and polishing, fluoride therapy, and oral health education, as well as place restorations and extract primary teeth.

The ADC's competency standards are reviewed and updated regularly to ensure that they reflect the current state of the profession and to ensure safety and competency.

Individual's scope of practice

Scope of practice refers to the range of dental treatments and procedures that an individual is educated, trained, and competent to perform. It is determined by a combination of factors, including the individual's division of practice, level of education and training, competence and experience, registration and legal requirements, clinical need, professional indemnity, and workplace environment.

Individuals must use sound professional judgement to assess their own scope of practice, and ensure that they are educated, trained, and competent to carry out any activities they take on. To help with this, the Board has developed a reflective practice tool that encourages individuals to reflect on their knowledge, skills, and abilities, and consider how their overall competence relates to their area of practice.

ADOHTA recognises the importance of maintaining the competency and skills of its members, and encourages ongoing education and professional development to stay current with the latest oral health care practices.

Expanding scope of practice

Continuing professional development (CPD) is one way to expand your scope of practice as a dental practitioner. CPD allows you to stay current with new techniques and technologies, as well as keeping up with changes in legislation and best practices. However, it's important to note that accreditation of courses and CPD is no longer done by the Dental Board of Australia. Instead, it is the responsibility of individual practitioners to ensure that the CPD activities they undertake are relevant and of a high standard. After your CPD, you will need to assess whether you have received enough clinical experience to include the new technique in your practice, and whether you feel confident and competent to safely perform it. Remember, you are responsible for the decisions, treatment and advice you provide, so use sound professional judgement in determining your scope of practice.

Case study

Case Study: Sarah, a Dental Therapist

Sarah has been working as a dental therapist for 35 years. She received her foundation education and training from a university, where she learned the basic skills and knowledge required to perform dental treatments such as fillings, extractions, and cleanings. However, her original training did not include Class IV restorations.

Recently, Sarah's workplace has requested that she manage Class IV paediatric cases. In order to expand her scope of practice to include this treatment, Sarah has decided to take a continuing professional development (CPD) course on Class IV restorations.

The CPD course Sarah took was run by a university, and was instructed by a respected dental practitioner with several years of experience in the field. The course covered the latest scientific evidence and techniques for Class IV restorations, as well as hands-on activities to give participants the opportunity to practice the skills they were learning.

Sarah used the reflective practice tool provided by the Dental Board of Australia to assess her knowledge, skills, and abilities in relation to Class IV restorations. The first 5 questions of the tool are as follows:

1. My foundation education and training was completed at XYZ University 35 years ago. My current scope of practice includes all classes of restorations except for Class IV restorations, which were not part of my foundation training. However, I am competent in restorative materials and have been using them in my practice for many years.
2. I stay current with the latest scientific evidence by regularly attending continuing education courses and reading dental journals. I also have a network of colleagues that I consult with when I have questions or concerns.
3. To identify any gaps in my knowledge or training, I regularly reflect on my practice and seek feedback from colleagues and patients. If I identify a gap, I will research the latest techniques and attend continuing education courses to remedy it.
4. I regularly reflect on my education and training as it relates to my competency across my current practice. This includes assessing my clinical skills, knowledge, and practice against current standards and guidelines.
5. I have recently completed a course on Class IV restorations specifically for paediatric cases, which was run by XYZ University. The course was taught by a leading expert in the field and included both didactic and hands-on components. The course content covered the latest techniques and materials used in Class IV restorations and emphasized the importance of proper diagnosis and treatment planning. The course also provided me with the opportunity to practice the techniques in a supervised setting before applying them in my practice.