Executive Officer
National Board of Australia
AHPRA
GPO Box 9958
Melbourne 3001

6 June 2013

Dear Sir/Madam,

I refer to your recent invitation for ADPA Limited to provide feedback on reviews of common guidelines and codes of conduct (for most National Boards), which have been released for public consultation by the 14 National Boards regulating registered health professions in Australia.

ADPA Limited has reviewed the following material in relation to your invitation:

- Advertising
- Social Media
- Mandatory Reporting and
- Code of Conduct

We believe that the updated common guidelines and codes are a significant improvement on those provided during the preliminary phase of the consultation process in terms of their wording, layout and explanatory examples.

We note, however, that ADPA Ltd raised a number of issues and made a number of suggestions in our submission made in relation to these matters in January of this year that have not been implemented in the revised material, and we therefore refer you again to that submission for our views. Specifically, we would recommend that an education process be undertaken once the new Guidelines and Codes are adopted to ensure that all practitioners are aware of the revisions and are fully informed about their obligations in this regard.

We note the new section in the Code of Conduct on Good Practice, specifically:

\textit{e. where the practitioner undertakes to make a device for a patient or client (a custom-made device) such as dentures, informing the patient or client if the device will be made outside Australia}

ADPA Ltd welcomes this addition to the Code, and is of the view that its inclusion will, if monitored and enforced, be a significant step towards protecting not only our patients and clients, but also the Australian dental technician industry.

However, we believe the section needs some clarification. Does it mean materials made overseas, parts made overseas or devices completely fabricated overseas? For example, many supplies used by dental prosthetists are made in Germany, the USA or Asia, so clarification would be required as to the extent of disclosure required.
An alternative approach may be to provide that a practitioner should provide information to patients or clients about the materials being used in the devices, which would cover not only the source of the materials, but also some indication of the quality and extent of safety standards (if any) that have been applied in the production or manufacture of the material/device.

We look forward to the next stage of this process, and again thank you for the opportunity to be involved.

Yours faithfully,

Ms Cindy Tilbrook
Acting CEO
Australian Dental Prosthetists Association Ltd