

# Policy Statement 6.4 – Management of Impaired Dental Practitioners

## Position Summary

Impaired practitioners should be encouraged to seek assistance at an early stage and report their condition to the Board. There should be zero tolerance towards substance abuse by dental practitioners where there is a risk to patient safety. Impaired dental practitioners can continue to provide valuable and safe dental health services, as long as their conditions are carefully managed by regulatory authorities.

## 1. Background

- 1.1. “Impaired” in this statement refers to physical or mental impairments, disabilities or conditions, including Substance Abuse and dependence, which detrimentally affects, or is likely to detrimentally affect, a dentist’s physical or mental capacity to practise.
- 1.2. Dental Practitioners may become impaired during the course of their working lives, deleteriously affecting their ability to practise safely and competently. Frequently these practitioners recover to continue their professional careers.
- 1.3. The prospect of continuing to practise is a powerful motivation for impaired practitioners to rehabilitate.
- 1.4. Under the National Law health practitioners must make mandatory notifications in some limited circumstances.

### Definitions

- 1.5. BOARD is the Dental Board of Australia.
- 1.6. DENTAL PRACTITIONER is a person registered by the Board to provide dental care.
- 1.7. IMPAIRMENT is a physical or mental impairment, disability, condition or disorder that detrimentally affects, or is likely to detrimentally affect, the practitioner’s physical or mental capacity to practise, and includes substance abuse and dependence.
- 1.8. NATIONAL LAW is the Health Practitioner Regulation National Law Acts 2009 as in force in each state and territory.
- 1.9. SUBSTANCE ABUSE is the harmful or hazardous use of psychoactive substances, including alcohol, prescription drugs, and illicit drugs.

## 2. Position

- 2.1. The provisions in the National Law applying to impaired dental practitioners should be separate from, but complementary to, those provisions dealing with complaints, notifications and disciplinary proceedings.
- 2.2. If the Board believes that a dental practitioner is impaired, the matter should be dealt with under the impairment provisions of the National Law in the first instance, even if the matter may lead to eventual suspension or cancellation of registration.
- 2.3. Dental practice by practitioners recovering from impairment, and the maintenance of professional standards, are not mutually exclusive goals.
- 2.4. Impaired dental practitioners can continue to provide valuable and safe dental health services, as long as their conditions are carefully managed by regulatory authorities
- 2.5. Registered dentists working for the Australian Dental Association and its Branches in a confidential advisory capacity should also be exempt from any mandatory notification unless there is substantial risk of harm.

- 2.6. The impairment provisions of the National Law should provide for both informal and formal processes:
- 2.6.1. Informal management of impaired practitioners allows the Board to collect information about, assess and manage an impaired practitioner with the practitioner's full cooperation. The identity of an impaired practitioner who is fully cooperating with the Board should not be disclosed publicly.
  - 2.6.2. Formal management is appropriate where an impaired practitioner does not fully cooperate with the Board. Impairment provisions of the National Law must empower the Board to suspend registration, impose conditions and publicly identify on the Register any impaired practitioner dealt with under the formal management processes.
- 2.7. There should be zero tolerance towards substance abuse by Dental Practitioners where there is a risk to patient safety.
- 2.8. The duration of drug screening of any practitioner whom the Board believes is misusing drugs should be dependent on medical advice and the frequency scaled to reward compliance while preserving protection of the public.
- 2.9. Formal supervision of impaired practitioners with medical conditions that cause unpredictable or intermittent impairment may be appropriate.
- 2.10. Practitioners recovering from impairment should be monitored at regular intervals by appropriately qualified medical practitioners nominated by the Board. Any restriction of practise hours or workload should be based on such medical advice.

#### **Policy Statement 6.4**

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