



29 July 2016

Simplifying medical treatment decision making and advance care planning - submission from the Australian Dental Association Victorian Branch (ADAVB)

The Australian Dental Association Victorian Branch (ADAVB) welcomes the Government's intention to simplify the legislation regarding health care treatment decision making, and advance care planning. We support the application of the proposed Medical Treatment Planning and Decisions Act to all registered health care practitioners and paramedics. However, given this broad application, we propose that a more inclusive name for the legislation should be 'Health Care Treatment Planning and Decisions Act'. This would recognise that advance care planning is not limited to medical care; rather, many aspects of health care are encompassed.

Our members report that, all too often, the oral health needs of patients and recommendations of dental practitioners are overlooked or ignored in advanced care directives. Dentists who treat patients in palliative care settings often observe a need for simple dental procedures, for example, the removal of teeth to relieve pain or improve dental function, but the person responsible for medical treatment decision making refuses the procedure.

Notwithstanding that a general medical practitioner has the best insight into the overall health of the patient, the dental practitioner has expert knowledge of health and disease in the oral cavity, and is the best practitioner to be able to offer an opinion on the risk/benefit of dental intervention in advanced care planning. Recognising the critical role of dentists in providing appropriate oral health care for palliative patients is therefore vital.

We support the proposed requirement that "where a medical treatment decision maker refuses significant medical treatment for a person in circumstances where a health practitioner reasonably believes that the medical treatment decision maker is unable to know or infer the person's values or preferences, the health practitioner must notify the Public Advocate." However, we are mindful that in some circumstances a health practitioner may not be in a position to know whether or not the treatment decision maker is able to know or infer the patient's values or preferences. Legislation to reflect this requirement will therefore need to be carefully drafted with this in mind.

In addition to the suggested change to the name of the legislation, the ADAVB recommends that the Act:

- include dental practitioners as part of advanced care planning, where appropriate;
- allow treatment for dental diseases, including the relief of pain, for a patient who has an advanced care directive, and
- recognise that where the health care treatment decision maker has made a decision that is deemed not to be in the

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best interests of the patient, the dentist should have authority to report this event to the Public Advocate.

Furthermore, given that noncompliance with the proposed legislation may constitute unprofessional conduct, we urge that sufficient time and funding be allowed to successfully implement the new legislation. This would include communications and education to ensure that practitioners and regulators understand their roles and responsibilities under the new Act.

Representing over 3,800 members, the ADAVB is the peak membership body for dentists in Victoria. Our mission is to advance the oral health of Victorians and the professional lives of our members. This proposed legislation offers a key opportunity to recognise the importance of supportive oral health care for patients who need palliative care. We therefore look forward to the opportunity to review the draft legislation as it progresses.

Sincerely,

A handwritten signature in black ink that reads "Garry Pearson". The signature is written in a cursive style with a long, sweeping horizontal line extending to the right.

Garry Pearson,

Chief Executive Officer