

COMPLETING THIS SURVEY

Information supplied on this form may be provided to other persons and agencies for workforce planning. The Dental Board of Australia and the Australian Health Practitioner Regulation Agency (AHPRA) are committed to ensuring the privacy and confidentiality of personal information held and will adhere to the National Privacy Principles under the Privacy Act 1988 (Cth) when collecting, using, disclosing, securing and providing access to private information.

- Read all instructions
- Print clearly in BLOCK LETTERS using a black or blue pen
- When instructed, mark one box only
- Boxes are to be marked with a cross **x**
- These questions are optional

SECTION A: Your details

1. Are you of Aboriginal or Torres Strait Islander origin?

Mark one box only

- No
- Yes - Aboriginal
- Yes - Torres Strait Islander
- Both Aboriginal and Torres Strait Islander

2. Are you a temporary resident?

Mark one box only

- No Go to question 3
- Yes Supply your visa category number below
-

3. Where did you obtain your initial qualification in Dental?

Mark one box only

- Australia
Go to question 5
- New Zealand
Go to question 4
- Other overseas
Go to question 4

4. If your initial qualification in Dental is from overseas, how did you qualify for registration in Australia in Dental?

Mark one box only

- Trans Tasman Mutual Recognition (with a New Zealand initial qualification)
- Trans Tasman Mutual Recognition (with a non-New Zealand initial qualification)
- Australian Dental Council Certificate
- Recognition pathway for some Canadian, UK, Ireland programs
- Other (please specify)

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SECTION B: Your employment

5. Which of the following statements best describes your working status last week?

i Working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy covers clinical practice, research, administration or teaching.

Mark one box only

- Working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia (including on leave for less than three months)
Go to question 8
- Working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia but currently on leave for three months or more
Go to question 8
- Not working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia
Go to question 6



6. Why were you not working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia last week?

Mark one box only

Working in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy overseas
Go to question 7

Working, but not in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy
Go to question 7

Not working in paid employment at all
Go to question 7

Retired from regular work



Thank you, no further questions.

7. LAST WEEK, did you take active steps to look for work in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia?



Looking for work includes (either part-time or full-time):

- applying for work
- enquiring about a job
- answering an advertisement
- registering with an employment agency
- advertising for work
- contacting people about a job

Mark one box only

Yes

No



Thank you, no further questions.

8. LAST WEEK, how many hours did you work in total in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?



For questions 8-14, if you were on leave last week, answer for a typical week.

Clinical roles

(including managers also providing clinical services)

hours

Non-clinical roles

(including teacher, researcher, administrator or other)

hours

Total

hours

9. LAST WEEK, how many clinical hours did you work in each sector in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?

Private

(including non-profit organisations)

hours

Public

hours

10. LAST WEEK, where was the location of your main job in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?



For questions 10-14, answer for the job in which you worked the most hours last week.

For state/territory, mark one box only

NSW

SA

NT

VIC

WA

ACT

QLD

TAS

Other territories

Postcode

Locality/Suburb

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11. As part of your main job in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy, do you also work in a(nother) regional, rural or remote location?

Mark one box only

No Go to question 12

Yes Provide the location below



If you work in more than one additional regional, rural or remote location, provide the main one.

For state/territory, mark one box only

- NSW SA NT
 VIC WA ACT
 QLD TAS Other territories

Postcode

Locality/Suburb

Average clinical hours worked per week at this location



If your weekly clinical hours worked in this location vary, provide the average clinical hours worked per week in a typical month.

 hours

12. LAST WEEK, what was your principal role in your main job in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?

Mark one box only

- Clinician (including managers also providing clinical services)
 Administrator (including managers not providing clinical services)
 Teacher or educator
 Researcher
 Other (please specify)

13. LAST WEEK, what was the principal area of your main job in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?

Mark one box only

- Dental hygiene
 Dental therapy
 Dental prosthetic
 Oral health therapy
 Orthodontics
 Paedodontics
 Periodontics
 Prosthodontics
 Public health dentistry
 Special needs dentistry
 General dental practice
 Dento-maxillofacial radiology
 Endodontics
 Oral and maxillofacial surgery
 Oral surgery
 Oral medicine
 Oral pathology
 Forensic odontology
 Other

14. LAST WEEK, what was the work setting of your main job in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy?

Mark one box only

- Solo private practice
 Group private practice
 Locum private practice
 Aboriginal health service
 Health promotion service
 Other community health care service
 Hospital (including dental hospital)
 Residential health care facility
 Commercial/business service
 Tertiary educational facility
 School (including school dental service)
 Other educational facility
 Correctional service
 Defence force
 Other government department or agency
 Other

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SECTION C: Workforce intentions

15. In total, how many years have you worked in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy in Australia?

i Years worked in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy includes years of work, regardless of full-time or part-time status. Exclude time spent not working and unpaid leave.

Years worked in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy
(whole years only)

years

16. How many more years do you intend to remain in the dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy workforce?

Intended years of work in dentistry/dental therapy/dental hygiene/dental prosthetics/oral health therapy
(whole years only)

years

17. If your qualification is from an overseas jurisdiction, do you intend to return to that country of origin (or another country) in a permanent capacity?

Yes Go to question 18

No Thank you, no further questions.

18. If yes, within what timeframe are you likely to return to that country of origin (or another country) in a permanent capacity?

- Within the next 12 months
- 1–3 years
- 3 years or longer

Thank you, no further questions.

Please return this form to AHPRA

AHPRA
GPO Box 9813
IN YOUR CAPITAL CITY (refer below)

Sydney NSW 2001	Canberra ACT 2601	Melbourne Vic 3001
Brisbane Qld 4001	Adelaide SA 5001	Perth WA 6001
Hobart Tas 7001	Darwin NT 0801	

