

Akeel Shaaban Submission to ADC Draft Accreditation Standards Consultation**Respondent details****Name:** Akeel Shaaban**Organisation:** First dental**Role/capacity:** Dentist**Location:** Metro**Response to consultation questions**

Do you consider that the draft Standards are at the threshold level to deliver competent graduates who are safe to practise?

(Yes, Somewhat, No, Unsure)

Additional comments:

Do you agree with the specific proposals as incorporated in the draft Standards?

(Yes, Somewhat, No, Unsure)

Additional comments:

Are there any additional Standards or Criteria that should be added?

(Yes, No, Unsure)

Additional comments:

Are there any Standards or Criteria that should be deleted or reworded?

(Yes, No, Unsure)

Additional comments related to your response, and clearly reference the specific criteria you are referring to for refinement.

Do you have any other questions or comments on the Standards?