the Dental Council's approach to regulation?



PAGE 2: Information about the person or organisation completing this submission survey

O4: This submission was assembled by	
Q1: This submission was completed by: Name	Rand Razag
Company/organisation	
Position	
City/town	
Email address	
Q2: Are you making this submission survey	as a registered practitioner
Q3: Please tell us which part of the sector your submission survey represents	a registered dentist or dental specialist
PAGE 3: General question about recertification	
Q4: Do you think the Dental Council needs to make changes to its current recertification framework?	Respondent skipped this question
PAGE 4: Area for change one: public assurance	
Q5: Each of the seven statements below are equally in want to identify where there are gaps or weaknesses public.Please rank the components from 1-7, with one improvement and seven being the component you thi	in the way our oral health practitioners serve the being the component you think needs the most
Patients know how to complain about treatment they have received from their practitioner	e 7
Q6: Do you think the Dental Council needs to equip patients and the public to recognise poor practise?	Yes
PAGE 5: Area for change two: right-touch risk-based reg	julation
Q7: Do you feel you have adequate information about	Yes

Q8: A risk pyramid illustrates the connection between the desired actions and/or behaviours of a practitioner and the differing level of responses a regulator can use to encourage and/or achieve the desired action and/or behaviour.Do you think the Dental Council should develop a risk pyramid/matrix to explain the types and levels of risk and corresponding regulatory responses?

Yes

PAGE 6: Area for change three: risk identification

Q9: Which (if any) of these tools and mechanisms do you think the Dental Council should be using to identify and manage risk?

Practice audits, Practice questionnaires,

Competence and recertification programmes,

Practical training/experience for a period of time,

Course of instruction,

Supervision, counselling and/or mentoring

Q10: Are you aware of any other tools or mechanisms the Dental Council should be using to identify and manage risk?

No

Q11: Do you think any of these risk tools or mechanisms are more effective than others?

Yes

PAGE 7: Area for change four: early intervention

Q12: Do you think the Dental Council should explore the use of risk analysis and risk-profiling to identify poor practise sooner?

Yes

PAGE 8: Area for change five: compliance

Q13: Do you think the Dental Council should explore the use of incentives to encourage practitioner compliance?

No

Q14: What do you think the Dental Council could do differently to encourage practitioner compliance with its recertification requirements? Please explain:

I think DCNZ is doing very well with Practioner compliance

PAGE 9: Area for change six: ongoing education and learning opportunities

Q15: Do you think the Dental Council should change its current amount of prescribed hours and peer activities?

No - the hours are about right

Q16: Do you think the Dental Council should change the current length of its education and learning opportunities (CPD) cycle?

No - the cycle length is about right

Q17: Please rank the following statements (with one being most important and eight being least important) according to the following question: Which actions should the Dental Council prioritise when considering its approach to ongoing education and learning opportunities?

Q18: Do you think the Dental Council needs to make any other changes or improvements to the ongoing education and learning process?	No - it works well as it is
Setting some mandatory education and learning opportunities based on the Dental Council's Practice Standards	7
Permitting practitioners to choose all of their education and learning opportunities from prescribed categories	6
Permitting practitioners to choose some of their education and learning opportunities from prescribed categories	3
Requiring practitioners to maintain an accurate record of their education and learning activities	2
Removing the requirement to have verifiable education and learning activities	4
Permitting practitioners to set their own hours of education and learning opportunities and quantity of peer activities	8
Changing the current length of the education and learning opportunities (CPD) cycle	5
Changing the current amount of prescribed hours and peer activities	1

PAGE 10: Final thoughts and comments

Q19: Do you have any other comments, suggestions or	I te
information you want to share with the Dental Council	app
about recertification?	

I feel DCNZ doing very well, but this survey is much appreciated