

19 September 2017

Marie Warner
Chief Executive
Dental Council
Te Kaunihera Taiki Niho

E: recertification@DCNZ.org.nz

Dear Ms Warner,

RE: Consultation on Recertification

Thank you for inviting the Royal College of Pathologists of Australasia to participate in this recertification. Please find below answers to the Survey questions.

Survey Question 1

Components of Dental Care that patients currently most-least need improvement-rank from 1-7

This is not relevant to RCPA

Survey Question 2

Do you think the Dental Council (DC) needs to equip patients and the public to recognise poor practise?

It is a key role of the DC to protect public health and safety. Ensuring dental practitioners are competent and current is one way to protect the public. However, it is not necessarily easy for patients and even peers to recognize 'poor practise' and hence caution needs to be taken and reliable and evidence-based means used to determine (lack of) competency.

Survey Question 3

Do you have adequate information about the DC's approach to regulation?

Yes

Survey Question 4

Do you think the DC should develop and matrix to explain risks?

Yes

Survey Question 5

Which tools do you think the DC should be using to identify and manage risk?

Audits not by DC but they should be peer review ; Questionnaires Yes; Inquiries – not sure; Risk factors for practitioners Yes (if evidence-based); Competence and recertification programmes Yes, if proven necessary for an individual, but not for all practitioners; Examinations and assessments maybe, no examination but assessment okay, if proven necessary for an individual, but not for all practitioners; Practical training Yes, if proven necessary for an individual, but not for all practitioners; Course of instruction Yes, if proven necessary for an individual, but not for all practitioners; Supervision/mentoring Yes, if proven necessary for an individual, but not for all practitioners.

Survey Question 6

Other tools to identify and manage risk?

Completion of current CPD activities, peer review, reviews from patients

Survey Question 7

Are some tools more effective than others?

Completion of current CPD activities, peer review, encouragement and reward for personal responsibility

Survey Question 8

Do you think the DC should explore the use of risk analysis and risk-profiling

Yes, as long as it is evidence-based

Survey Question 9

Do you think the DC should explore the use of incentives to encourage compliance

Yes, reduced fees if all documentation in on time and complete etc, less frequent assessments for those who regularly comply.

Survey Question 10

What do you think the DC could do differently to encourage compliance

As for Question 9

Survey Question 11

Do you think the DC should change its current amount of prescribed hours and peer activities?

Not necessarily the hours but expand the types

Survey Question 12

Do you think the DC should change the length of the CPD cycle?

The current DC cycle is 4 years which means reaction time is slow. However this needs to be weighed up against a system which is practical and affordable.

Survey Question 13

Actions necessary

Change prescribed hours No; Change length of CPD cycle Possibly; Permit practitioners to set own CPD hours No, but some reduction could be included as an incentive; Remove requirement to have verifiable activities No, but some reduction could be included as an incentive; Require practitioners to maintain accurate records of CPD Yes; Permit choice of activities Yes, could be included as an incentive; Mandatory education re Practice Standards Yes, but relevant to each practitioner type and speciality.

Survey Question 14

Further Comments

None

Yours faithfully



Dr Debra Graves

Chief Executive Officer

Royal College of Pathologists of Australasia