



COMPLETE

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

Q1 This submission was completed by:

Name	Abby Emery
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? **No - it works well as it is**

Please give your reasons::

There is no research to show that having to obtain professional development credits increases the competency to professionals, however, I think to have some amount does encourage the mind set and a reminder to practitioners that we need to stay up to date with our profession for the health of our patients. I think the current amount for dentists is correct. I can't comment on the number dental techs, oral hygienists and therapists have to obtain.

Page 4: Area for change one: public assurance

Q5 Each of the seven statements below are equally important components of good oral health care. We want to identify where there are gaps or weaknesses in the way our oral health practitioners serve the public. Please rank the components from 1-7, with one being the component you think needs the most improvement and seven being the component you think needs the least improvement:

Patients are confident their practitioner will not harm them	5
Patients receive the appropriate treatment for their oral health concern or issue	2
Patients receive appropriate information about their treatment and care	1
Patients needs and concerns are discussed and addressed with their practitioner	6
Patients feel they are treated with dignity and respect at all times	7
Patients feel confident their practitioner has the knowledge and skills to treat them	3
Patients know how to complain about treatment they have received from their practitioner	4

Q6 Do you think the Dental Council needs to equip patients and the public to recognise poor practise?

No,
Please give your reasons::
I'm not sure how the dental council can do this. All you can advised is to seek a second opinion. By giving the public too much information I think it could potentially just create more doubt in the profession and make patients more nervous of their treatment.

Page 5: Area for change two: right-touch risk-based regulation

Q7 Do you feel you have adequate information about the Dental Council's approach to regulation? **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? **No**

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?

**Risk factors for practitioners,
Competence and recertification programmes
Practical training/experience for a period of time**

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?

No

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?

No

Page 8: Area for change five: compliance

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

Yes

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

I'm not sure. As number of professional development points does not relate to competence potentially there is no need to enforce the number that needs to be obtained but rather give a suggested amount and help dentists feel supported to continue enjoying their profession. If practitioners are feeling positive then I think they will naturally want to better their skills for their patients.

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?

Yes - the cycle length should be increased

Please tell us what your preferred increase/decrease in cycle is and why::

Perhaps change to 6 years. This gives young women having family a little more time to obtain their points. For example: If a woman happens to have two children very close together and wants to breastfeed it would be difficult to obtain all their professional development points in 4 years.

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?

- | | |
|---|----------|
| Changing the current amount of prescribed hours and peer activities | 8 |
| Changing the current length of the education and learning opportunities (CPD) cycle | 2 |
| Permitting practitioners to set their own hours of education and learning opportunities and quantity of peer activities | 3 |
| Removing the requirement to have verifiable education and learning activities | 4 |
| Requiring practitioners to maintain an accurate record of their education and learning activities | 5 |
| Permitting practitioners to choose some of their education and learning opportunities from prescribed categories | 6 |
| Permitting practitioners to choose all of their education and learning opportunities from prescribed categories | 1 |
| Setting some mandatory education and learning opportunities based on the Dental Council's Practice Standards | 7 |

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

Page 10: Final thoughts and comments

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

Respondent skipped this question