



29 September 2017

Dr Robin Whyman  
**Chair**  
**Dental Council**

Via email [recertification@dcnz.org.nz](mailto:recertification@dcnz.org.nz)

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Dear Dr Whyman and Ms Warner

### **Recertification review**

Thank you for the opportunity to comment on your discussion document on recertification of oral health practitioners.

The Medical Council of New Zealand (MCNZ) is the medical regulator in New Zealand and like the Dental Council is charged with protecting the health and safety of the public by providing mechanisms to ensure practitioners are competent and fit to practice. One of the mechanisms used by MCNZ is in setting standards for recertification.

We congratulate the Dental Council on embarking on this programme and note that the discussion document describes a range of issues shared by MCNZ. We are pleased to see the focus you are placing on strengthening recertification. It is not for us to judge what dental practitioners should do to complete recertification, but MCNZ is moving towards a greater emphasis on evidence based activities and use of data to inform continuing professional development. To this end, MCNZ supports the use of audit of medical practice, regular practice review, multisource feedback, and external peer review as components of a best practice recertification programme. These can help to identify an individual doctor's learning needs and inform ongoing professional development activities.

Whilst reforms focused on developing and implementing recertification were commenced by some health practitioner regulators over 10 years ago, this continues to be an area in which 'good' or 'best' practice is still emerging. There remains a significant lack of agreement about the design and form that it should take, hence health practitioner regulators continue to grapple with a range of approaches, reviewing, evaluating and refining models in a continuous fashion, as learnings are gained and as new research emerges. However there is commonality across all jurisdictions in that the overarching goal is to provide assurance of the competence of health practitioners, support the maintenance of high standards of practice and strengthen accountability to the public.

MCNZ is currently reviewing its own recertification requirements for doctors. In February 2016, following an initial consultation with stakeholders, Council set the [Vision and Principles for Recertification](#). We believe that recertification should ensure that each doctor is supported by education that provides for their individual learning needs and is delivered by effective, efficient and

reflective mechanisms that support continuing improvement in performance. The principles defined quality recertification activities as:

- Evidence-based.
- Formative in nature.
- Informed by relevant data.
- Based in the doctor's actual work and workplace setting.
- Profession-led.
- Informed by public input and referenced to the Code of Consumers' Rights.
- Supported by employers.

Council reviewed the requirements for vocational registrants and proposed to set new standards for recertification programmes that align with the vision and principles.

In early 2017 Council [consulted](#) with stakeholders on the proposed changes to recertification, which would align recertification programmes and CPD activities to our vision and principles. Similar to the Dental Council, MCNZ's direction is to move away from prescribed hours and towards proactive strategies to improve standards of practice and support doctors to provide quality care to patients in an effort to reduce the need for reactive regulatory measures. We note with interest your proposal for a risk-based approach. To some extent, MCNZ took this approach when we implemented a strengthened recertification programme for doctors registered in a general scope of practice in 2012.

In order to improve understanding and garner support from the sector following consultation on MCNZ's proposal for recertification, we will be undertaking further engagement with key stakeholders prior to any decisions being made. The intention is to work through key issues identified and consider how best to approach implementation to ensure a quality outcome, therefore it is essential to bring others along on the journey.

We welcome discussion with you about key issues and are keen to share ideas of interest as you undertake this important work. We wish you well and look forward to seeing your progress.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Philip Pigou', written in a cursive style.

Philip Pigou  
**Chief Executive**  
**Medical Council of New Zealand**