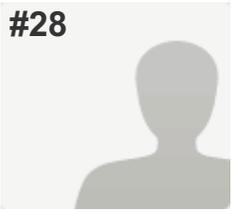


#28



COMPLETE



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

Q1: This submission was completed by:

Name	Marija Lovric
Position	[REDACTED]
City/town	[REDACTED]
Email address	[REDACTED]

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 dental hygienist,
a registered dental therapist

PAGE 3: General question about recertification

Q4: Do you think the Dental Council needs to make changes to its current recertification framework?

Yes - but only minor changes,

Please give your reasons:
I feel that for practitioners that attend regular CPD meeting/etc should be able to carry over their points to the new cycle if they have accumulated more than required. OR make it compulsory to go to regular meetings/CPD events rather than point accumulation. I feel some practitioners just go to events for the sake of getting points rather than continuing their professional development.

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 needs and concerns are discussed and addressed with their practitioner | 5 |
| Patients feel they are treated with dignity and respect at all times | 4 |
| Patients feel confident their practitioner has the knowledge and skills to treat them | 6 |
| Patients know how to complain about treatment they have received from their practitioner | 2 |

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

Yes,

Please give your reasons:

A lot of patients i have seen that have had problems with previous practitioners do not even know they can make complaints and most of the issues have been over communication. There needs to be more information for the public about expectations. I feel sorry for a lot of practitioners because patients come in with very unrealistic expectations and better education for the public would help prevent this problem (and will give them an idea if their practitioner is dodgy or not).

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?

No

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,

Please give your reasons:

Not sure, it should be done on a one to one basis as every situation is different.

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, Risk factors for practitioners, Competence and recertification programmes, 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? 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? 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,
Please give your reasons:
If you are a dental practitioner you should be complying with regulations/etc anyway, you should not need incentives to do your job properly and keep your patients/staff safe.

Q14: What do you think the Dental Council could do differently to encourage practitioner compliance with its recertification requirements? Please explain: no comment

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,
Please tell us what your preferred increase/decrease in hours is and why:
I think practitioners should be expected to attend regular cpd events/meeting and not have a point system as this encourages practitioners to just get points and not take any information in.

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,
Please tell us what your preferred increase/decrease in cycle is and why:
i think the cycle is good but maybe let practitioners carry over hours (if the hours system still stands) and encourage regular learning/attendance.

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

Q18: Do you think the Dental Council needs to make any other changes or improvements to the ongoing education and learning process?

Yes - but only minor changes or improvements ,
Please tell us what other changes or improvements should be made and why:
see my previous comments

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?

n/a