

COMPLETE

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

Q1

This submission was completed by:

Name	Janet Quinlan
Company/organisation	[Redacted]
Position	[Redacted]
City/town	[Redacted]
Email address	[Redacted]

Q2

as a registered practitioner

Are you making this submission survey

Q3

a registered dental therapist

Please tell us which part of the sector your submission survey represents

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:
For some people I think it is too easy to tick the boxes when completing the APC and there needs to an auditing tool for this.

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	2
Patients receive the appropriate treatment for their oral health concern or issue	5
Patients receive appropriate information about their treatment and care	3
Patients needs and concerns are discussed and addressed with their practitioner	4
Patients feel they are treated with dignity and respect at all times	6
Patients feel confident their practitioner has the knowledge and skills to treat them	1
Patients know how to complain about treatment they have received from their practitioner	7

Q6

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

Yes,

Please give your reasons:
Infection control practises need constant monitoring in every practise and the public should be made aware of what's acceptable and what's not. Communication is crucial to avoid misunderstandings and also clearly explaining the procedure you are about to commence helps to make our patients feel a little more at ease.

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,

Please tell us what additional information you think you require:
After attending the forum I feel well informed. It was very helpful.

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,

Please give your reasons:
I think there is a difference here between working as a Dental Therapist for a DHB and a Dentist working in Private Practice and feel the risk pyramid would work really well in PP

Page 6: Area for change three: risk identification

<p>Q9</p> <p>Which (if any) of these tools and mechanisms do you think the Dental Council should be using to identify and manage risk?</p>	<p>Practice audits, Supervision, counselling and/or mentoring, Practical training/experience for a period of time, Competence and recertification programmes, Risk factors for practitioners</p>
<p>Q10</p> <p>Are you aware of any other tools or mechanisms the Dental Council should be using to identify and manage risk?</p>	<p>Yes, Please tell us about other tool/s or mechanism/s you are aware of: I think a well structured mentoring programme is a must for any new graduate, whether they are a Dentist, DT/H. Working along side an experienced practitioner, gives confidence, develops good skill sets and helps the transition from a learning environment to being a competent health professional. I think any form of inservice trainings are important.</p>
<p>Q11</p> <p>Do you think any of these risk tools or mechanisms are more effective than others?</p>	<p>Yes, Please give your reasons: I think practice audits are excellent. They are very useful learning. The auditors view a variety of patients and then give feedback. You maybe able to adjust a procedure you have been doing and make it better. Discussing radiographs and any aspect of care. Peer group meetings with colleagues is also useful and information gathering. Mentoring to me is the most effective risk tool.</p>

Page 7: Area for change four: early intervention

<p>Q12</p> <p>Do you think the Dental Council should explore the use of risk analysis and risk-profiling to identify poor practise sooner?</p>	<p>Yes, Please give your reasons: The less bad publicity the better. The public has to have the utmost confidence in any oral health practitioner and if there are poor practises operating then that is damaging. Auditing of practices annually makes people be more accountable.</p>
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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:

As a registered health professional I personally don't want incentives. I worked and studied hard to become registered and now feel it an honour to fully comply in every aspect with the Dental Council and my APC and serve my community as a trustworthy health professional.

Q14

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

Have some law changes, I know that takes time, to prevent repeat non conformers of compliance that place our profession into disrepute. Clinical audits every 6 months.

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?

Yes - the hours should be increased ,

Please tell us what your preferred increase/decrease in hours is and why:
I think the peer activities hours should be increased as I think there is better learning in smaller groups. We do calibration of radiographs at some peer group activities and this is perfect for a small group. I think the prescribed 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?

Changing the current amount of prescribed hours and peer activities	4
Changing the current length of the education and learning opportunities (CPD) cycle	6
Permitting practitioners to set their own hours of education and learning opportunities and quantity of peer activities	8
Removing the requirement to have verifiable education and learning activities	7
Requiring practitioners to maintain an accurate record of their education and learning activities	2
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	5
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?

No - it works well as it is

Please tell us what other changes or improvements should be made and why:
I don't have any issues with this process and feel it works well

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?

I think its great to have the forums and I really enjoyed attending and learnt alot. Its always rewarding to review processes from time to time and are reassured the council is fulfulling the public of NZ with safe and excellant Oral health Professionals