



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

Q1 This submission was completed by:

Name	Imogen Scott
Company/organisation	[REDACTED]
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 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?

Yes - it needs to make substantive changes ,
Please give your reasons::
Although assessment of clinical skill and professional/theoretical knowledge is easy to assess through CPD hours and use of courses etc, clinicians seem to have such a range of "acceptable" levels of care/cross infection control/clinical practices/diagnostic abilities. There needs to be some consistency to ensure that lazy dentistry is avoided and some consistency is developed throughout the profession.

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	1
Patients receive appropriate information about their treatment and care	3
Patients needs and concerns are discussed and addressed with their practitioner	2
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	4
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?

No,
Please give your reasons::
Patients are not trained, and should not be trained to such a level to understand the subtleties/idiosyncrasies of what can make or break a successful treatment - there is a reason that experienced dentists are auditors. It is impossible to expect that a patient can discern good from bad treatment in an objective manner. I feel that encouraging patients to recognise poor practice is opening a can of worms that will lead to a flood of vexatious complaints from concerned but mislead patients.

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?

Respondent skipped this question

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?

Respondent skipped this question

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?

Respondent skipped this question

Q10 Are you aware of any other tools or mechanisms the Dental Council should be using to identify and manage risk?

Respondent skipped this question

Q11 Do you think any of these risk tools or mechanisms are more effective than others?

Respondent skipped this question

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?

Respondent skipped this question

Page 8: Area for change five: compliance

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

Respondent skipped this question

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

Respondent skipped this question

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?

Respondent skipped this question

Q16 Do you think the Dental Council should change the current length of its education and learning opportunities (CPD) cycle?

Respondent skipped this question

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?

Respondent skipped this question

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

Respondent skipped this question

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
