

23 October 2018

Dental Council of NZ
Level 11, Kordia House
109-125 Willis Street
WELLINGTON 6011

Sent via email to recertification@dcnz.org.nz

Dear DCNZ council members,

Re: Submission from the Auckland Dental Association regarding the proposed DCNZ recertification review

On behalf of the Auckland Dental Association (ADA), we submit this response to the proposed DCNZ recertification requirements. The ADA consists of 470 members. The following comments have been collated from our two most recent open forum discussions.

New Zealand has high standards of dental care and the ADA will always support the DCNZ's stand to ensure dentistry is safe for patients and continues to be of high quality. However, our membership is surprised at the magnitude of proposed changes when there does not appear to be a problem with the competency of the vast majority of oral health practitioners in New Zealand. The 2017/2018 DCNZ publication reported that only 15 practitioners were investigated regarding issues with competency. Furthermore, it is well known that dentistry in New Zealand is expensive - increasing the compliance costs will only worsen this, which may further reduce the access to care for many New Zealanders.

Area one:

- The proposal of an annual cycle is of concern. It is not uncommon for practitioners to take several months away from practising dentistry (parental leave, sickness). A three-year cycle allows time for practitioners to catch up on CPD once they return to work. There is no strong rationale to change from the current three-year cycle to an annual cycle.
- Members are concerned about "attesting" to one another's work. An individual's assessment of clinical competency is highly subjective. Also, many dentists do not actually see the clinical work of their peers. Would practitioners be expected to physically observe their colleagues at work for a specified period of time and observe specified types of procedures to be able to "attest" to the competency of their fellow colleague? How would this be enforced? Our members feel that this requirement could be abused, with friends "signing" each other off. Alternatively, this system could create rifts between colleagues. For example, a practitioner may refuse to "sign off" on his/her peer's competency. Moreover, what are the legal implications for the "attester"?
- The concept of using "reflection" is vague and its relevance to competency is unclear, especially for our older dentists. Our members feel that "reflection" will need to be taught before it is implemented.

Area two:

- Our members agreed that expanding on the current mentoring programme would be of benefit. However, who will implement these mentoring programmes and how will these mentoring programmes be accredited?

Area three:

- Our members feel that the requirement to undergo a compulsory eye test is prescriptive and does not allow autonomy

Overall, we understand that the DCNZ are required to ensure the clinical competency of New Zealand dental professionals, as well as the safety of the public. However, our membership would like a thorough explanation for the justification of such a radical change to the current CPD system. Finally, our members have requested greater clarity around the specific details regarding the implementation of the proposed changes into their daily practice.

Yours faithfully

A handwritten signature in black ink, appearing to read 'T Stuart', written in a cursive style.

Tania Stuart
President
Auckland Dental Association