

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

Q1 This submission was completed by:

Name	Chris Casswell
Q2 Are you making this submission	as a registered practitioner
Q3 Please tell us which part of the sector your	a registered dentist or dental
submission represents	a registered dentist or dental specialist

Page 3: Area one: new core recertification programme

Q4 What, if anything, do you like about our proposed core recertification programme?

Nothing. The present CPD system is working well and should be retained. Peer review in this suggested form will not give the DCNZ the results they need to improve the competence of dental practitioners. It is a retrograde step for the profession.

**Q5** Is there anything about our proposed core recertification programme you would change?

## Yes,

Please explain.:

Almost everything should be changed.....it sounds fine in theory but it won't achieve the results intended. Discussing a PDP with a friend, who will obviously be reticent about admitting their shortcomings and then writing an honest written attestation is fraught with problems. Such a peer/buddy system is going to be ineffective in determining competence and assurance. The attestations and reviews will not be seen by the DCNZ (unless a complaint is received or audit is carried out) Therefore the DCNZ will be totally ignorant of the effectiveness of all the new measures they have put in place and even less aware than with the present CPD system.

### Phase two consultation on recertification

**Q6** Do you support our proposal to change the recertification cycle to 12 months?

#### No,

Please explain .:

Dentists in general practice are incredibly busy but increasingly stressed as practice management with all the compliance issues is becoming a nightmare. The vast majority of dentists, probably 95%, are honest, caring and conscientious and do a good standard of dentistry in a very challenging environment. Do not impose more unnecessary paper work when the present CPD is working well.

**Q7** Do you think our proposed core recertification programme should include a requirement for practitioners to complete an online open-book assessment of their technical and clinical knowledge and skills?

#### Yes,

Please explain.:

This could be beneficial if it is not too onerous or required too frequently.

**Q8** If a proposal about an online open-book assessment of a practitioner's technical and clinical skills and knowledge is supported, how often should practitioners be required to complete an assessment?

Every three years

**Q9** Do you have other proposals about our proposed core recertification programme you would like us to consider? Please explain.

Some GDPs have little understanding of what is considered "good dentistry" and are overconfident in their own abilities. Before the CPD system was first introduced some younger practitioners attended no courses at all feeling they had learnt it all at dental school(!!) Thankfully with the excellent CPD system these GDPs are no longer so isolated and are seen at branch meetings and workshops.

Page 4: Area two: support for new registrants

Q10 What, if anything, do you like about our draft proposals for supporting new registrants?

Mentoring is good & should be compulsory for 2 years as you propose.

**Q11** Is there anything about the draft proposals for supporting new registrants you would change?

No

### Phase two consultation on recertification

Q12 Do you think the proposed two year minimum too period for the mentoring relationship is: long Please explain.: Having been a mentor several times in the past, it is a huge commitment - maybe 18months would be a little bit better than either 1 or 2 years. This should also be compulsory for new registrants from overseas though it will be difficult for the DCNZ to find enough mentors. With new registrants joining an established practice, it may be acceptable to have one of the practice principals as a mentor ...? Q13 Do you think all new registrants should participate Respondent skipped this question in a mentoring programme, or are there some new registrants who should not be required to participate in a mentoring programme? Q14 Do you have other proposals about supporting Respondent skipped this question new registrants you would like us to consider? Please explain. Page 5: Area three: addressing health-related competence decline concerns Q15 What, if anything, do you like about our draft proposals for addressing health-related competence decline concerns? Certainly every practitioner over 40 should have eye exams - & hopefully younger GDPs also though it shouldn't be compulsory. Q16 Is there anything about the draft proposals for Respondent skipped this question addressing health-related competence decline concerns you would change? Q17 Do you have other proposals for addressing Respondent skipped this question health-related competence decline concerns you would like us to consider? Please explain. Page 6: Area four: addressing recurring non-compliant practitioner behaviours Q18 What, if anything, do you like about our draft proposals for addressing recurring non-compliant practitioner behaviours? Agree with your draft proposals Q19 Is there anything about the draft proposals for No addressing recurring non-compliant practitioner

behaviours you would change?

## Phase two consultation on recertification

**Q20** Do you have other proposals for addressing recurring non-compliant practitioner behaviours you would like us to consider? Please explain.

Respondent skipped this question

# Page 7: Final thoughts and comments

**Q21** Do you have any other comments, suggestions or information you want to share with us about the draft proposals for improving our approach to recertification?

A far more accurate and rapid method of identifying unsafe practitioners would be to survey all NZ GDPs. Send them a list of the dentists in their immediate locality ( ie the town or city suburb within 20kms of their practice) probably 15-25 names and ask the question: Please indicate beside each name if you consider the treatment of each dentist is A Good, B Satisfactory C Inadequate D Don't know their work.

I'm certain that every dentist that works in a certain locality for more than a year or two, knows one or two practitioners who are causing concern.

I know you will say this is impossible and not ethical, but who are we protecting our profession or the public?