

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

Q1 This submission was completed by:

Name

Dave Excell

Q2 Are you making this submission

as a registered practitioner

Q3 Please tell us which part of the sector your 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 really I'm afraid. And where is the evidence that it needs to change.

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

Yes,

Please explain.:

Yes Why are you looking at models from other countries and other professions to base this on? We need something that is relevant to dentistry in NZ. I would hate to see the requirement for verified CPD hours diminished. When this came in years ago it made practitioners, that might have other wised worked in isolation, come out and interact with their peers and attend courses This has had a hugely beneficial effect I believe and I think as a minimum we need to retain this and then strengthen on top of it from there if you think there is a need to.

Phase two consultation on recertification

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

No,

Please explain.:

It places too much pressure on practitioners to comply. Yet more paperwork with PDA and PDP and having to meet with peers and do a report on reflection of learning every year just seems over the top and will add another level of stress to an already stressful enough job. Let alone those that are running their own practice as well and all the admin that goes along with that and meeting all the other various standards/codes. 2 yearly eye tests as well as 2 yearly CPR ?? The two yearly cycle for CPR Level 4 seems to roll around very quickly let alone this that is proposed to be yearly and could be a lot of work on top of actually attending the specific training/CPD courses. What if a practitioner goes on maternity leave or is unwell and can't complete the requirements for a year for various reasons? A four year cycle at least gives the opportunity to 'catch up' and is much more manageable in terms of work load.

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?

No,

Please explain.:

How can you assess 'technical skills' through an open book online exam? I would suggest it would be extremely difficult to assess a practitioner's clinical skills with an online assessment. How could that possibly work? Communication skills (language barriers) informed consent could not be assessed either which are both extremely important when it comes to dentistry. Let alone the ability to practically do dentistry in the form of cutting cavities, removing decay, taking out teeth. You may be able to test diagnostic skills to a degree. You might be able to test their knowledge of the standards framework for OHP but does that really give an indication of competence to practice? It only gives you an indication as to whether a practitioner is aware of their responsibilities under the SF and HPCA not if they are actually doing what they should, but I guess there is some merit to this. Who is going to be responsible for making up these tests each year and the admin behind running them and then dealing with the consequences of those that don't pass for whatever reason? Will they then have to stop practicing? What will be the added costs involved? Has anyone done a budget for this as it is just going to raise the cost of compliance and subsequently the costs of dentistry to the population of NZ.

Phase two consultation on recertification

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 five years ,

Please explain.:

For reasons listed above I don't think there is a good reason for this.

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

Mentoring for all new registrants is a good idea. But this is a huge ask in terms of finding appropriately trained mentors outside of their working environment. New registrants should pay for this if so.

Page 4: Area two: support for new registrants

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

Yes mentoring is a good idea and perhaps one of the only things I like about this proposal. But as mentioned it would be difficult to find appropriate mentors and they would need to be trained and who would fund this? The council? The new registrant should probably pay but for many cost would be a huge issue I suspect.

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

Yes,

Please explain.:

Mentoring is extremely important. Even dentists that have been practicing for years (like my self) still have other dentists that they look up to, respect and learn from. It is about setting a good example and instilling a value set in a practitioner that will set them off on the right path in terms of ethics and this will hopefully last them the rest of their career. It is fundamental to everything we do in terms of being good dentists who respect and care for our patients and don't 'exploit' them. But it is about finding the right mentors and this is especially important for new graduates from Otago but I believe perhaps even more so for new registrants from overseas as they come from a different culture, and often have a different value set to dentists from here. They are the ones who probably would benefit from mentoring the most.

Q12 Do you think the proposed two year minimum period for the mentoring relationship is:

just right,

Please explain.:

2 years is a good time frame I think

Q13 Do you think all new registrants should participate in a mentoring programme, or are there some new registrants who should not be required to participate in a mentoring programme?

Yes,

Please explain.:

Yes they should all have to do it

Q14 Do you have other proposals about supporting new registrants you would like us to consider? Please explain.

Respondent skipped this question

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?

I am happy to have a 2 yearly eye test but what about all the other things that are not so measurable. In some ways I think this is a bit of a red herring.

Q16 Is there anything about the draft proposals for addressing health-related competence decline concerns you would change?

Yes,

Please explain.:

If you are going to go down this track then what about cognitive age related decline? How do you measure that? Examples of practitioners working into their 80's is not uncommon now unfortunately. How do you test them to make sure they are still competent from a purely motor skills point of view? What about drug addiction, alcoholism and mental health. All very difficult things to measure. There has to be an element of trust with the practitioner I think and support networks and programs for those that need it like there is now. Maybe avenues where practitioners can seek help without fear of losing their APC.

Q17 Do you have other proposals for addressing health-related competence decline concerns you would like us to consider? Please explain.

More support networks as above for health concerns. Cognitive decline maybe relies on peers being able to express concern to council with out fear of retribution. A difficult one.

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?

All seems quite good. But need to get really tough on this group I think and not be scared to take away their APC if they won't comply

Phase two consultation on recertification

Q19 Is there anything about the draft proposals for addressing recurring non-compliant practitioner behaviours you would change?

No,

Please explain.:

All seem good ideas Think the key is to make sure that DCNZ is not registering incompetent practitioners in the first place by making the exam for dentists wanting to register on overseas qualifications a lot more difficult and it sounds like DCNZ has tightened up on this to a degree. But I think any exam to register an overseas trained dentist needs to have a big clinical and technical skills component assessed by the appropriate people at the dental school in Dunedin. Because at the end of the day those people who are being registered need to be of an equivalent standard to those that are graduate the BDS course. There perhaps also needs to be some training around values, ethics, ACC, COHS and all the other things that make up the 'dental culture' if you like like, here in NZ.

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

As above

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?

DCNZ is proposing that each year we need to:

Every practitioner needs to nominate a peer support person to help us maintain our knowledge and skills.

Every practitioner to complete written reflection statements.

Prepare written documents about our learning objectives.

Identify and write about areas of competence which we are deficient in.

Require every practitioner to upload a written attestation prepared by their professional peer when they renew their APC.

Every year to complete online assessments & tests.

Plus Biennial eye tests and more

This is stressful for all practitioners, there are costs involved, and these will be passed onto the public. We already know it is expensive to see a dentist and no government funding for it like in medicine. This potentially will limit access to an even larger group of the population in NZ.

All of this takes time and costs money for what? There is no evidence to suggest the current system is broken (based on the numbers of complaints, HDC cases, peers review cases, what is the issue and what evidence do they have to show the need for change) so why change it! Why not look at simply strengthening what you already have?

Get tougher on non compliant practitioners

Identify at risk groups/practitioners and target them with practice audits

Strengthen the registration process so sub standard dentists don't get registered in the the first place

Keep as is or strengthen the requirement for verified CPD

I don't see the value in practitioners having to 'reflect' on a learning plan and what you have done CPD wise over the last year!

Having a peer sign off learning plans and attestations is open to the abuse of two potentially incompetent practitioners attesting that they are both competent. Where is the quality control around that?