

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

Q1 This submission was completed by:

Name

Gareth Ngan

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?

I like the concept of making overseas trained dentists, certifying for the first time, undergo a mentoring program

Phase two consultation on recertification

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

Yes,

Please explain.:

I believe the current system is generally satisfactory. The lack of any significant auditing system does not encourage practices to keep their systems and protocols up to date. I strongly disagree with the reduced emphasis on verified CPD hours. I disagree it is not a valid means of maintaining competency. It is not perfect but it is the only effective measure of PDAs currently available. At least with the current system dentists are forced to attain a minimum number of hours attending verifiable PDAs, any system which will offer dentists the chance to dilute this minimum standard is a bad thing. I feel that the proposed emphasis on "qualitative" CPD, the self-selected mentoring system, the PDP and reflection statements will not achieve the goal of maintaining standards. In fact, I believe the new proposed system, could in fact undermine standards. It will allow like-minded practitioners to nominate each other as mentors, so in cases of sub-standard or at risk practitioners they will not push each other to improve. You do not get exposed to current and emerging concepts sitting around a table with your peers. This is achieved by hearing and seeing the information from the mouths of eminent local and international speakers, at seminars and conferences. Not to mention the peer contact that comes along with attendance. The new system will serve to increase the time and money burden on the average dentist, who are competent. It will not resolve the problem of over-resourcing to deal with the small group of recalcitrant dentists in NZ, the ones the DCNZ should be more concerned about. A significant practice auditing program would be a more useful tool to try to motivate dentists to maintain high standards

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

No,

Please explain.:

The proposal document talks about not increasing the burden on dentists that are generally doing what they are meant to. I believe the proposed system is contrary to that idea. More regular recertification will cost more in terms of time, effort and expense. Our APC already costs several times more that it does for medical GPs in New Zealand. The proposal document states that the NZDC was found to use a disproportionate amount of resources to improve and correct the issues of a small group of recalcitrant practitioners. It is my view that the NZDC intends making the entire pool of dentists (the majority of whom comply) have to engage in more red tape, instead of having a targeted approach to dealing with this group

Phase two consultation on recertification

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.:

An online open book test is no measure of clinical competency, of standards of practitioners and dental practice standards. I don't believe it will have any real world benefits

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?

Respondent skipped this question

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

Keep the current verified CPD hours requirement, increase it to 100 hours per cycle if you wish. Abandon the qualitative self-chosen mentor based system, increase auditing to make sure practitioners are maintaining standards

Page 4: Area two: support for new registrants

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

I support making new overseas trained registrants enrol in a 2 year mentoring program

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

Yes,

Please explain.:

Keep the new local trained graduates in the existing mentoring program run by the NZDA. I have had many associates pass through the system and it is very good. Any mentoring system for overseas trained dentists should be user pays, as they are the primary beneficiaries. Any system should not allow dentists to select their own mentors, this does not encourage advancement. It is only human that many will opt to take the path of least resistance and this can't be good for upholding standards as a whole

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

just right,

Please explain.:

A one year program for new local graduates is sufficient

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?

No,

Please explain.:

New local dental graduates should be in their own separate program as per the status quo

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?

Eye tests are perfectly reasonable

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

No

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

Respondent skipped this question

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?

Respondent skipped this question

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

Yes,

Please explain.:

Tighter control over at risk unsafe or recalcitrant practitioners, regular assertive auditing system to make sure this group are lifting standards. Greater restrictions on practice, or decertification for those chronic offending practitioners who don't make the standard

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

Tighter control over at risk unsafe or recalcitrant practitioners, regular assertive auditing system to make sure this group are lifting standards. Greater restrictions on practice, or decertification for those chronic offending practitioners who don't make the standard

Page 7: Final thoughts and comments

Phase two consultation on recertification

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?

In discussions with colleagues I have come to the conclusion that the NZDC does not have a significant auditing system. Considering that practitioners will have to merely maintain records for possible audit where is the incentive for practitioners to do anything if there is no real threat of investigation? A more active targeted auditing process would be valuable in trying to maintain standards, along with a more aggressive treatment of those recurring non-compliant practitioners, who pose a greater threat to the public. I believe this would be a more efficient way to use resources also.

I am not alone in my concerns regarding the proposed changes. Many of my colleagues have articulated similar concerns to me. I have a great deal of passion and pride for my profession, and I would hope that you take my concerns seriously, as I worry that the changes you propose may have far reaching negative consequences for the dental profession in New Zealand.
