

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

Q1 This submission was completed by:

Name

Grace Geoghegan

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 think professional development activities and the standards framework online test are a good idea. Dentists are already doing CPD activities, and a short online questionnaire relating to the standards framework would be a simple way of refreshing knowledge, similar in a way to the tests in advanced life support courses.

Phase two consultation on recertification

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

Yes,

Please explain.:

I think the peer attestation and peer review is over the top and would be time consuming and difficult to undertake. It seems like it wouldn't really help assure competence having a friend/colleague write about you and you to them because you don't REALLY know if they are competent and exactly how they are working and nor do they know about you. I am a young dentist but I imagine for very advanced colleagues this would seem over the top or embarrassing, as after a few years of practice you should really have all the basic framework standards to achieve confidence sorted out and certainly the majority do. Peer review seems like an opportunity where one would be able to write something generic just to "get the task done" and I'm sure they would, so would be a waste of time as no one would take it seriously. Reflection seems to be a little off-base and not very well suited to dental professionals, as although we are continually learning and upgrading with new technology and techniques, the basics of our job stays much the same over our career, so how much can you really "reflect" on, we are not working in a role that necessarily involves a lot of in depth heavy conversations (i.e. psychologist, GP), in which reflecting may be more useful. Given that dentistry is largely a practical role I think reflection would have very little impact on what one does day to day.

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

No,

Please explain.:

I think 12 months is not long enough, perhaps 2 years is more appropriate. CPD requirements depend on practitioners finances and may need to be spread over 2 years to attend the CPD events you want to attend.

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.:

I think this would be helpful as a regular refresher of the standards framework, as the paper questionnaire sent out normally does not really "test" your knowledge you merely need to read through it. Clinical knowledge is a bit tricky because every dentist has differing opinions about clinical treatments.

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 two years ,

Please explain.:

This would be similar to resuscitation courses which are 2 yearly which is adequate. I imagine there would be a cost involved and it would be good to cut down on annual registration costs.

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

Respondent skipped this question

Page 4: Area two: support for new registrants

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

I think this is a good idea as most senior dentists are reluctant to work with graduates which can be quite daunting but if there were willing participants who were required to provide mentorship this would be a great help to graduates.

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

Yes,

Please explain.:

I think that it should only be for new graduates in private practice, as those working in public get mentorship anyway and you don't really need the mentorship when working in the hospital but you really need it when leaving the hospital and going to private practice. So new grads going into hospital should have that mentorship delayed until they leave to go private. I would worry that not enough mentors would step up or people could be working in areas where mentorship is not available. Also what happens if you don't get on with your mentor? what are the options? Seems a big change to undertake but if it works out overall I think it is very supportive and helpful.

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

just right,

Please explain.:

I think this is a good amount of time as it allows for the mentor to be available as the graduate is developing more experience.

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.:

You should not be required to participate if you are working in a hospital/public setting or at the dental school, as there are already mentors available within those jobs. You only really need them when you are "out on your own" in private.

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

I would propose their be exemptions allowed and a plan for if you dont get on with your mentor. This should also allow for there being a set amount of "graduate jobs" available, it is already hard to get good jobs as a graduate.

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 think this is a good idea, as someone who doesnt wear glasses I would forget to get my eyes checked.

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

Yes,

Please explain.:

There should be an exemption if you already wear glasses and already have regular optometrist appointments, perhaps this should only apply to those who don't already have any vision problems to detect problems early.

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?

I think it seems fine and appropriate.

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

No

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?

It seems there are a lot of changes proposed at once it may be more appropriate to introduce changes incrementally otherwise its a lot to learn how to do. I also think it would be very upsetting if the price of re certification increased as it is already too expensive.
