

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

Q1 This submission was completed by:

Name

Haris

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 that you are trying to think of ways to improve practitioner competence

Phase two consultation on recertification

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

Yes,

Please explain.:

I have a few concerns with this recertification programme including utilisation of peer review, increased administrative work and increased stress/workload for an already stressed profession. The utilisation of peer review I believe would be both unnecessary and a mistake. I believe it is unnecessary as peers would obviously be biased and write raving reviews without much thought for critical evaluation of one another so it would hardly contribute to the process more than just more information to be processed. The mistake and risk here is that if a peer has a concern, there is no way that they can voice it in this manner as their peer would obviously know about the negative light shed on them. This has potential to cause friction and distrust within the profession of one another and would have the opposite effect of what I imagine the dental council would like to see from our profession. A big concern whether or not the reviewing peers will be held accountable for supporting a practitioner that is later found to not be competent - this brings about a lot more problems if people are having to be worried about being punished for 'passing' the practitioner they are reviewing which is later reprimanded. This whole process will be increasing the administrative work that not only needs to be done but also that needs to be assessed. Who will be covering the costs associated with all of this increased output? There is no need to look at increasing the cost of dentistry any further than it already is. The idea that all of this needs to be held for 8 years in case of audit is far too long, I don't see how a reflection done almost a decade ago has any bearing on where you currently stand as a practitioner, nor would it have anything to add over reflections done in the last 3-4 years, which would be a better amount of time to keep these logs. All of the increased complexity and work around this proposed recertification programme will only add to the stress levels and workloads we currently deal with. Dentistry, as any person off the street could tell you, unfortunately has some of the worst, if not the worst, rates of burnout, mental health decline and all round is a very stressful profession. This new means of recertification means you will only be adding to these issues unless the additional work is offset by a reduced requirement for PDAs so that the overall time spent maintaining competence is kept at the same level.

Phase two consultation on recertification

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

No,

Please explain.:

This, as stated in my previous answer, will be a surefire way to greatly contribute to dental stresses. A 12 month recertification is far too frequent and a more than satisfactory level of competence can be maintained with a 4 year cycle as at present where this acts as a refresher opportunity - dentists work more days than not and it's not as if they will be forgetting how to do dentistry every 12 months.

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.:

I would argue dentists have done more than their fair share of tests and examinations in their lifetimes without the incorporation of further ongoing testing belittling their current knowledge and everything they have worked for thus far. The issue with dentistry is also that there is no one right answer and may be many ways to do a treatment, so unfortunately a test giving rise to right and wrong answers may be penalising certain dentists for employing different techniques that may work as well as or better than peers.

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 four years ,

Please explain.:

Recertification, as I mentioned in a previous question, should not be more frequent than once every four to five years.

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

A reduction in PDA requirement from the current 80 to offset increased workload required to complete the proposed recertification programme could be of benefit as it could facilitate smarter rather than harder working

Page 4: Area two: support for new registrants

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

Mentoring should be made available to dentists but not mandatory

Phase two consultation on recertification

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

Yes,

Please explain.:

A concern I have is to do with where an adequate amount of mentors can be found if mentorship is mandatory for 2 years. This also begs the question of whether these mentors are going to be doing it out of their own good will or will they be getting paid? If they are doing it out of good will and we don't have enough what happens then? If they are getting paid then who is responsible for the cost? Furthermore, if there is any plan to currently, or in future, have mentors grading and assessing the new registrants I would vehemently oppose this. The new registrants have already gone through a registration process and passed whatever exams were necessary and this has potential to be an extended registration process and barrier to dentistry.

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

**too ,
long**

Please explain.:

The mentorship should not be mandatory but easily available to new registrants. If a mandatory period is chosen a shorter period of mandatory mentorship will allow new registrants to see how important mentorship is and allow them to seek more mentorship in future if they feel it is something that was very valuable to them. A 2 year minimum period may be long as it will require a lot more mentors to be available to allow for more registrants to be looked after, and would extend potential stresses.

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.:

I don't believe anyone should be required to participate in a mentoring programme but should be given every opportunity to do so.

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?

Respondent skipped this question

Phase two consultation on recertification

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

Yes,

Please explain.:

I am not aware of any cases of dentists having caused any issues to patients because of poor eyesight. The 2-yearly mandatory eye testing is too much and is only going to be adding more burden onto dentists - something we have enough of without increasing it through more frequent hoops to jump through for recertification.

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?

It's important to deal with non-compliant practitioners as they work to erode the view that New Zealand dentistry is amazing, which it is

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?

Respondent skipped this question