

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

Q1 This submission was completed by:

Name

Peter Vickers

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

Other (please specify):

I am a Dentist approaching retirement who practices as a locum both within New Zealand and overseas.

Page 3: Area one: new core recertification programme

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

Basically , nothing . This may be good for salaried dentists in the public health service , and those at he dental school , but 'buddying up' would be difficult if not impossible.

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

Yes,

Please explain.:

Ensure that all replies are honest by means of verification of attendance at courses Do not implement the peer review and 'reflective statement ' Both are too easy to work around . Eye test? Really? I wear loupes and my vision is better now than 30 years ago . What next? Psychological fitness certificate? Make a CORE4 assessment yearly. The rest is window dressing to make the Dental council look like it is doing something . It will do nothing to get rid of the unscrupulous and incompetent .The current system works well , just encourage General Dental Practitioners to turn in those that are not meeting standards or do not place the Patients needs and wishes first..

Phase two consultation on recertification

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

Yes,
Please explain.:
But keep the process as is

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

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

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?

Assign a mentor (who will be paid) to all new grads and DREX'ers for at least two years , and give them some power to recommend re-examination

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

Respondent skipped this question

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

just right,
Please explain.:
As long as they either stay at one practice or the employers confer and make their findings known to each other.

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.:
ALL new registrants to be mentored and then re-examined to make sure compliance with standards.

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

Discussion of social responsibility of health workers. Too many are purely money oriented.

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?

Not a lot really .

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

Yes,

Please explain.:

In a group practice no-one is willing to 'rock the boat'. How do you tell a friend of twenty years they are past it? A bad review could kill their confidence , depression and loss of motivation . The first one to go that way will be suing the DRC for destroying their career. For a principal in advanced years the stress would be unbearable , loss of practice income . Most practices would sell out to corporates to the detriment of the patients Would a bad review turn some out of their ivory towers in Otago? Loss of tenure , compulsory retirement , loss of pension etc? . Oh I forgot , they make the rules , maybe they should have to follow them too.

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

I am 62 years old , been practicing for nearly forty years and am doing the best work I have ever done. If I am compulsorily retired what will I do ?

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?

One chance and you are out until you can prove you comply, serial offenders are just that

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

Respondent skipped this question

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?

The time and money spent on this just to be seen 'doing something' would be better spent on monitoring the current compliance regime.
