

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

Q1 This submission was completed by:

Name	Philip Sanford
Q2 Are you making this submission	as a registered practitioner
Q3 Please tell us which part of the sector your	a registered dentist or dental
submission represents	specialist

Page 3: Area one: new core recertification programme

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

Nothing - see Question 5

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

Please explain.:

I think the cycle time should be reduced to 2 or 3

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

No,

Please explain.:

A one year time cycle is too short for the following reasons: (I) Medical reasons affecting practitioners e.g. surgeryorthopaedic, cancer - the list is endless which require a practitioner to take months off work over a one year period. Once the recuperation period is over means no issue with patient treatment but reduces the time the practitioner can spend on recertification process. (ii) Human factors: pregnancy and child care or death or sickness of a family member means time off work. (iii) Academic factors: such as clashes in courses and availability of suitable recertification experiences. (iv) Treatment times for patients differ: the ORTHODONTIC treatment times vary but range from 9 months - 3 years. This has a bearing on factors like Study Groups - probably one of the best peer to peer recertification processes. I belong to a Study Group that has 8 - 14 members and meets every 12 months. In this group we present 2 - 3 patients every year. Each patient is presented to the group before we start treatment, mid-way during treatment and at the completion of treatment - a 3 - 4 year process. The number that attend varies from year to year depending on factors that I have already listed above. Our SPECIALITY NEEDS AT LEAST A 2 YEAR CYCLE.

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 do not support an open book examination as it is not going to test whether the practitioner is competent in a technical sense or from an ethical point of view. Our responsibility is to do no harm, respect what the patient wants and not let financial marketing or personal views influence what is regarded as good evidence based practice.

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?

Please explain.: See Question 7.

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

I have issues with the following:

- (I) Reflective statement what's it mean?
- (ii) A plan for C.P.D. is appropriate but it has to be flexible.

Page 4: Area two: support for new registrants

Phase two consultation on recertification

Q10 What, if anything, do you like about our draft proposals for supporting new registrants?	Respondent skipped this question
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:	Respondent skipped this question
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?	Respondent skipped this question
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?	
Yes - I agree with the need for this.	
Q16 Is there anything about the draft proposals for addressing health-related competence decline concerns you would change?	Yes, Please explain.: I believe the costs associated with this i.e. examination, consultation and treatment, appliances e.g. hearing aids, glasses should be tax deductible.
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?

This small group of practitioners are the group that are forcing the remaining practitioners to comply with more onerous recertification processes.

Phase two consultation on recertification

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

Yes,

Please explain.:

I feel more time and effort needs to be spent on the practitioner who has multiple complaints. I am less concerned with those who have no notification problems. This may simply be an administration problem and unclear and incorrect instructions from the Dental Council may be the case.

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