

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

Q1 This submission was completed by:

Name	William Nelson
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
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Page 3: Area one: new core recertification programme

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

- I appreciate the aims to improve overall for the safety and well being of our patients and staff and in keeping up with changing times, views and research/evidence.

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

# Please explain .:

I think there is a risk that a small number clinicians will be overwhelmed with other clinicians asking them to be their peer supported representative and this could require a significant amount of work for the said individual(s). This could mean someone with really good standing, a respected clinician could become overwhelmed with additional work simply because they have a good reputation. How many people is it feasible to be a peer supported advocate for? Which follows onto an additional concern - What is stopping some rogue clinician offering to sign off on other clinicians competency for monetary reward? Easy money. Dentists will no doubt tick the boxes for their dental colleagues who are their friends regardless of their actual competence - whether this was accurately assessed or not.

## Phase two consultation on recertification

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

#### No,

Please explain .:

I think it should be relative to an assessed level of competence; - If deemed really really good then your assessment shouldn't have to occur so regularly - If your competence has been questioned or shown to be less than acceptable then your competence should be assessed more frequently

**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 .:

This has been assessed already through completion of BDS. Again in think this should only be necessary if a clinicians competence has been put into disrepute and again the degree of competence or lack thereof should dictate the frequency.

**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.:

Again in think this should only be necessary if a clinicians competence has been put into disrepute and again the degree of competence or lack thereof should dictate the frequency.

**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 it is a good idea to ensure safer environments for our patients and to help new clinicians reach competency. Good for foreign dentists to establish professional relationships through mentorship.

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

No

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

just right

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

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

Respondent skipped this question

### Phase two consultation on recertification

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?

Good - I think it is unreasonable to think that there won't be declines in skills related to age related health impacts. It seems appropriate that these should be taken into consideration and assessed when considering clinical competence.

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

Respondent skipped this question

**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?

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