Dental Council
Te Kaunihera Tiaki Niho

Registration as an oral health practitioner in New Zealand policy

Date last reviewed	November 2024
Approved by	Council -

Purpose

The purpose of this policy is to ensure a consistent, fair and transparent approach to registration of oral health practitioners.

Scope

This policy applies to all applicants for registration, including New Zealand graduates.

Legislation

The Dental Council (the Council) will register an oral health practitioner within a scope of practice if the applicant:

(a) Is fit for registration as set out in the Health Practitioners Competence Assurance Act 2003 ("the Act");

(b) Has the qualifications that are prescribed by the Council for that scope of practice;

(c) Is competent to practise, as described in the Council's Competence to practise policy.

Policy

1. All applicants must declare in their registration application whether or not they have been convicted in New Zealand or overseas of any offence and whether they have ever had a recognised or treated drug or alcohol problem or other mental or physical disability or condition.

2. Details are required where applicable and failure to give this information may well jeopardise an applicant's right to registration.

3. Applicants can register in a specialist scope of practice without being first registered in a general scope of practice.

4. Areas of practice which were not included in a practitioner's training should not be undertaken unless the practitioner has completed appropriate training and practises to the relevant standards required by the Council's *Standards Framework for Oral Health Practitioners* and practice standards.

5. Where registration was granted based on overseas qualification(s) and/or experience, the new registrant must complete a Dental practice in New Zealand module aimed at orientating them to the New Zealand healthcare system, culture, regulatory and practising environment.

6. Applicants granted registration via the competent authority – qualification pathway will be required to practise under the oversight of a Council-approved practitioner for at least six months, upon commencement of practice in New Zealand.

7. Applicants granted registration via the comparable health system pathway will be required to practise under the direct (onsite) supervision of a Council-approved practitioner for at least 12 months, upon commencement of practice in New Zealand.

8. Applicants with oversight or supervision requirements on their scope of practice must have an approved protocol in place before they commence practice in New Zealand.

9. Each practitioner must nominate their own oversight practitioner or supervisor for Council's approval. Typically, to provide oversight or supervision, a practitioner must have been registered with and practising in New Zealand in a related scope of practice for at least five years, and needs to be in good standing with the Dental Council.

10. Oversight and supervision protocols may include:

    a Details of approved supervisor or oversight practitioner, and workplace where applicable

    b Requirement to complete a Dental practice in New Zealand module

    c Scope and duration of oversight or supervision

    d Any specific assessment(s) required, as appropriate to the circumstances

    e Roles and responsibilities of each practitioner

    f Reporting frequency

    g Documentation requirement to support application for removal of the condition

11. Oversight and supervision conditions cannot be removed until the practitioner has successfully completed the period of oversight or supervision, including any required modules for onboarding to the New Zealand practice environment, and the oversight practitioner or supervisor has provided the necessary attestation. The practitioner must apply for the removal of the conditions, and cannot commence independent practice until they receive confirmation from the Council that the conditions have been removed.

12. In the event of concerns raised in the supervision or oversight reports, usual regulatory intervention will apply. This may include further time spent under oversight or supervision, or competence, health or conduct inquiries. In the event a practitioner's oversight or supervisor withdraws their support, the practitioner will need to stand down from practice until a new arrangement is approved.

13. The teaching and research scope of practice does not lead to independent and unconditional registration; supervision is a permanent feature of the scope of practice. To practise independently, a practitioner would need to apply for registration via a pathway that leads to unconditional registration.

14. Practitioners registered in the teaching and research scope of practice need to ensure that they are transparent as to their registration status, and must not use any protected titles under the Act. For example, a practitioner registered under the teaching and research scope of practice cannot state that they are an endodontic specialist in the context of oral health teaching or research being undertaken in New Zealand, as they are not registered in the scope of practice for endodontic specialists.

15. Applicants who have to meet practice experience requirements in a competent authority and/or comparable health system must have held full/unrestricted/unconditional registration with each authority relied on for registration eligibility in New Zealand. The applicant only needs to hold current full and unconditional registration in the competent authority or comparable health system that they are working in at the time of application.

16. Where applicants with overseas non-prescribed qualifications do not meet the criteria to apply under the competent authority – registration or comparable health system registration pathways, they can apply for registration by individual consideration if they consider the Council might regard their qualifications as equivalent to, or as satisfactory as a prescribed qualification (referred to as an individual assessment or overseas non prescribed qualification pathway).

17. In cases where the Registrar is considering an individual assessment application:

    (a) The Registrar shall arrange an assessment of the applicant's overseas qualification by assessors with relevant knowledge of the prescribed qualifications for the relevant scope of practice in which the applicant applies for registration.

    (b) Having conducted the assessment, the assessors shall advise Council in a written report whether or not they consider the applicant's overseas qualification is equivalent to a prescribed qualification and whether or not the applicant is considered competent to practise within the scope of practice applied for, giving reasons for their opinions.

    (c) Having considered the assessors' report and other information, evidence or advice relevant to the application, including information relevant to the applicant's fitness for registration and advice obtained by the Registrar from any professional adviser, the Registrar may:

        i Register the applicant in the relevant scope of practice;

        ii Propose to register the applicant in the relevant scope of practice subject to such conditions as the Registrar considers are required to ensure the competent practice of the applicant and notify the applicant accordingly. If the applicant accepts the proposed conditions, the Registrar may register the applicant subject to those conditions, otherwise the Registrar shall refer the application for Council's decision concerning the conditions that would apply; or

        iii Refer the application for Council's decision.

    (d) The Registrar shall refer an application for Council's decision if any of the following circumstances apply:

        i The assessors do not consider that the applicant's overseas qualification is equivalent to a prescribed qualification; or

        ii The assessors do not consider that the applicant is competent to practise within the scope of practice applied for; or

        iii The Registrar identifies concerns in relation to the applicant's fitness for registration or any other matters that the Registrar considers may involve material risk to the health and safety of members of the public.

18. Alterations or conditions may be placed on a scope of practice at the time of registration.

19. A pass in the New Zealand Dental Council Registration Examinations is a prescribed qualification for registration as an oral health practitioner.

20. Persons with dental qualifications who are engaged in advising, reporting, teaching, research or management roles and who consider that they are not engaged in ‘dental practice’ (see definition below) are not required to be registered.

Please note: Registered practitioners must also hold an annual practising certificate (APC) in order to practise dentistry in New Zealand (refer Dental Council Policy on Recertification).

Definitions:

The practice of dentistry

The Council defines the practice of dentistry as:

The maintenance of health through the assessment, diagnosis, management, treatment, and prevention of any disease, disorder or condition of the orofacial complex and associated structures within the scope of the practitioner's approved education, training and competence. Practice in this context goes wider than clinical dentistry to include:

(a) reporting or giving advice in a dental capacity; and

(b) teaching, research and management roles

given that such roles use the knowledge and skills attained through undertaking a dental qualification and that such roles influence clinical practice and public safety.

The practice of dentistry is carried out by registered oral health practitioners: dentists, dental specialists, dental therapists, dental hygienists, oral health therapists, orthodontic auxiliaries, dental technicians and clinical dental technicians.

Competent authorities

Competent authorities are those with equivalent regulatory system to New Zealand, including systems for accreditation, setting professional standards, competence assessment and registration, and ensuring ongoing competence and fitness to practise.

Currently Council recognises the following dental competent authorities:

- General Dental Council (GDC) (United Kingdom)
- Commission on Dental Accreditation of Canada (CDAC) and dental regulators in each province (Canada)
- National Dental Examining Board of Canada (NDEB)
- Commission on Denal Accreditation (CODA) and State Dental Boards (USA)
- Dental Council of Ireland (DCI) (Republic of Ireland).
- Dental Board of Australia (DBA) and the Australian health practitioner regulation agency (Ahpra)

Whilst Australia is included in the list, the Dental Council recognises that many practitioners will make use of the Trans-Tasman Mutual Recognition Act to obtain registration in New Zealand and will not rely on competent authority pathways to registration.

Comparable health system

Comparable health systems are countries with comparable health system infrastructure, population health outcomes, and health regulatory frameworks.

Currently Council recognises the following countries as having comparable health systems to that of New Zealand

• Austria • Belgium • Hong Kong • Czech Republic • Denmark • Finland • France	• Germany • Greece • Iceland • Israel • Italy • Japan • Norway	• Portugal • Republic of Korea • Netherlands • Singapore • Spain • Sweden • Switzerland

Oversight

Oversight is defined in the Act as professional support and assistance provided to a health practitioner by a professional peer for the purposes of professional development.

It is used in the registration context to support a new overseas registrants' safe entry to the New Zealand practice environment, and to provide Council assurance of their competence to practise, particularly in regard to cultural competence and safety requirements in New Zealand.

Supervision

Supervision is defined in the Act as monitoring of, and reporting on the performance of a health practitioner by a professional peer. Supervision in this context is distinct from clinical supervision where a practitioner has a responsibility for the clinical practice of a supervisee.

Supervision in the registration context has different levels depending on a practitioner's qualifications, training and experience. Supervision is used as a more robust alternative to oversight, and is intended to provide assurance that the practitioner is safe and competent to practise independently across the breadth of their scope of practice, to the standard required in New Zealand.

Practitioners providing oversight or supervision on behalf of Council are excluded from liability under section 119 of the Act providing they act in good faith and with reasonable care.

Other relevant documents

1. English language requirements and tests policy
2. Dental Council competence to practise policy.
3. Dental Council fitness to practise policy.
4. Restoration to the Dental Register policy.
5. Recertification of oral health practitioners policy.
6. The New Zealand Dental Registration Examinations' policy.