Dental Council
Te Kaunihera Tiaki Niho

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12 November 2025

Tēnē koe,

Consultation on three new proposed registration pathways for overseas practitioners and updates to existing prescribed qualifications

The Council has been considering opportunities to improve and increase registration pathways and reduce barriers for suitably trained overseas practitioners wanting to practise in New Zealand.

In addition to our current registration pathways, we are now proposing to leverage of our existing recognition of some overseas jurisdictions and draw on global evidence to offer three new registration pathways for overseas trained oral health practitioners:

- ***Competent authority – registration*** based on recent clinical practice experience in a competent authority
- ***Comparable health systems*** based on recent clinical dental practice experience in a comparable health system, recognising 21 countries
- ***Teaching and research*** based on employment in a New Zealand tertiary education institution to provide clinical learning, teaching, and research education for accredited New Zealand oral health programmes.

As well as expanding the options available for overseas qualified oral health practitioners to register in New Zealand, the time to process an application will also be less.

Like the rest of our frameworks, the proposals are risk-based. As the public health and safety risk increases, so do the safeguards we propose to put in place.

In addition, we propose to:

- Introduce a Dental practice in New Zealand module to further support all overseas new registrants' transition to New Zealand dental practice.
- Remove barriers identified in some of our existing prescribed qualifications. In particular for clinical dental technology and oral medicine.
- Update other prescribed qualifications to provide clarity, consistency, and ensuring regulatory compliance to section 12(2) of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

A number of draft documents form part of the consultation document to support the proposed changes, if accepted following consideration of the feedback received on the proposals.

Have your say

We welcome and value all feedback on these proposals to ensure they are robust and achieve their intended outcomes.

Your submissions must reach us **by 29 January 2026.**

What we are asking

Proposed registration pathways

1. Overall, do you believe the proposed changes outlined in this document will help reduce barriers to registration for suitably trained overseas practitioners and why?
2. Do you support the introduction of the ‘Competent authority registration' pathway and why?
3. Do you support the introduction of the 'Comparable health system' pathway for dentists and why?
4. Do you support the introduction of the ‘Teaching and research’ pathway and why?

Proposed changes to existing prescribed qualifications

5. Do you support removing the requirement for a medical degree for oral medicine specialist registration in New Zealand, subject to the relevant medical training and clinical experiences being embedded into the specialist training programme, and why?
6. Do you support removing the requirement to register in dental technology before registering in clinical dental technology and why?
7. Do you support the proposed changes to the New Zealand registration examination requirements?
8. Do you have feedback on the proposed administrative changes to the prescribed qualifications for any of the scopes of practice, as reflected in the draft gazette notices? Please include which scope of practice/s your feedback relates to.

Proposed fees for new registration pathways

9. Do you find the proposed fees for the new registration pathways reasonable?

We encourage online submissions via our online **feedback survey.**

Alternatively, you can submit your response to **consultations@dcnz.org.nz.**

Section 14(2) of the HPCAA requires the Council to consult on the proposed *notice(s) of prescribed qualifications*.

Section 130 of the HPCAA requires the Council to prescribe fees in a notice. Proposed new fees to support the proposals are included in the consultation document.

Submissions

Submissions received will be published on our website and will record the submitter's name and profession (for registered oral health practitioners), or name and organisation. All other contact details will be removed. We will not publish any submissions containing derogatory or inflammatory content.

As this is a public consultation process, "In confidence" information will only be accepted under special circumstances. Please contact us before submitting material in confidence.

Next steps

Once the consultation is closed, Council will consider all feedback before making any final decisions. We will then communicate the outcome of the consultation.

As relevant to the Council decision, changes will be given affect by notices in the New Zealand Gazette (www.gazette.govt.nz), which will also be published on our website.

If you have any questions about this consultation, you can contact us by email or phone 04 499 4820.

I look forward to receiving your views on the proposals.

Ngā mihi,

Marie MacKay
Chief Executive

Consultation on proposed:

- addition of three new registration pathways for overseas practitioners
- updates to existing prescribed qualifications

Issued date: 12 November 2025

Closing date: 29 January 2026

Dental Council
Te Kaunihera Tiaki Niho

Contents

1. Executive summary

The proposals

New registration pathways

The Dental Council is proposing to offer three additional registration pathways which open New Zealand registration opportunities for some overseas practitioners. These new proposed pathways are:

- *Competent authority – registration* based on recent clinical practice experience in a competent authority
- *Comparable health systems* based on recent clinical dental practice experience in a comparable health system, recognising 21 countries
- *Teaching and research* based on employment in a New Zealand tertiary education institution to provide clinical learning, teaching, and research education for accredited New Zealand oral health programmes. This does not include independent clinical practice by the practitioner.

In addition to expanding the options available for some overseas qualified oral health practitioners to register in New Zealand, as prescribed qualifications, processing these applications will take less time.

Like the rest of our frameworks, these are risk-based models. As the public health and safety risk increases, so do the safeguards we put in place. This includes different levels of supervision based on the proportional risks perceived through the different pathways.

We also propose to:

- Introduce a *Dental practice in New Zealand* module to further support all overseas new registrants' transition to New Zealand dental practice.
- Rename the current *overseas prescribed qualification* pathway to *Competent authority – qualification*. This will provide clarity and consistency between the different pathways.

Updates to existing prescribed qualifications

The following key changes are proposed to the existing gazetted prescribed qualifications:

- For oral medicine practice in New Zealand, remove the requirement for a stand-alone medical degree for registration and instead articulate the necessary medical components that need to be included in an oral medicine postgraduate training programme.
- Remove the requirement for registration in the dental technology scope of practice as a pre-requirement to register in the clinical dental technology scope of practice. This requirement is inconsistent with our other scopes of practice, and places unnecessary barriers to registration in clinical dental technology.
- Some administrative changes to terminology are proposed for clarity, consistency, and ensuring regulatory compliance to section 12(2) of the Health Practitioners Competence Assurance Act 2003 (HPCAA).

To support the proposed changes, various documents are enclosed for feedback. This includes draft gazette notices for the prescribed qualifications across all scopes of practice, a draft gazette notice for fees related to the new registration pathways, and updates to the Registration policy containing the details on the related safeguards put in place for the new proposed pathways. See section 5 (p24) of the consultation document for the links.

Dental Council
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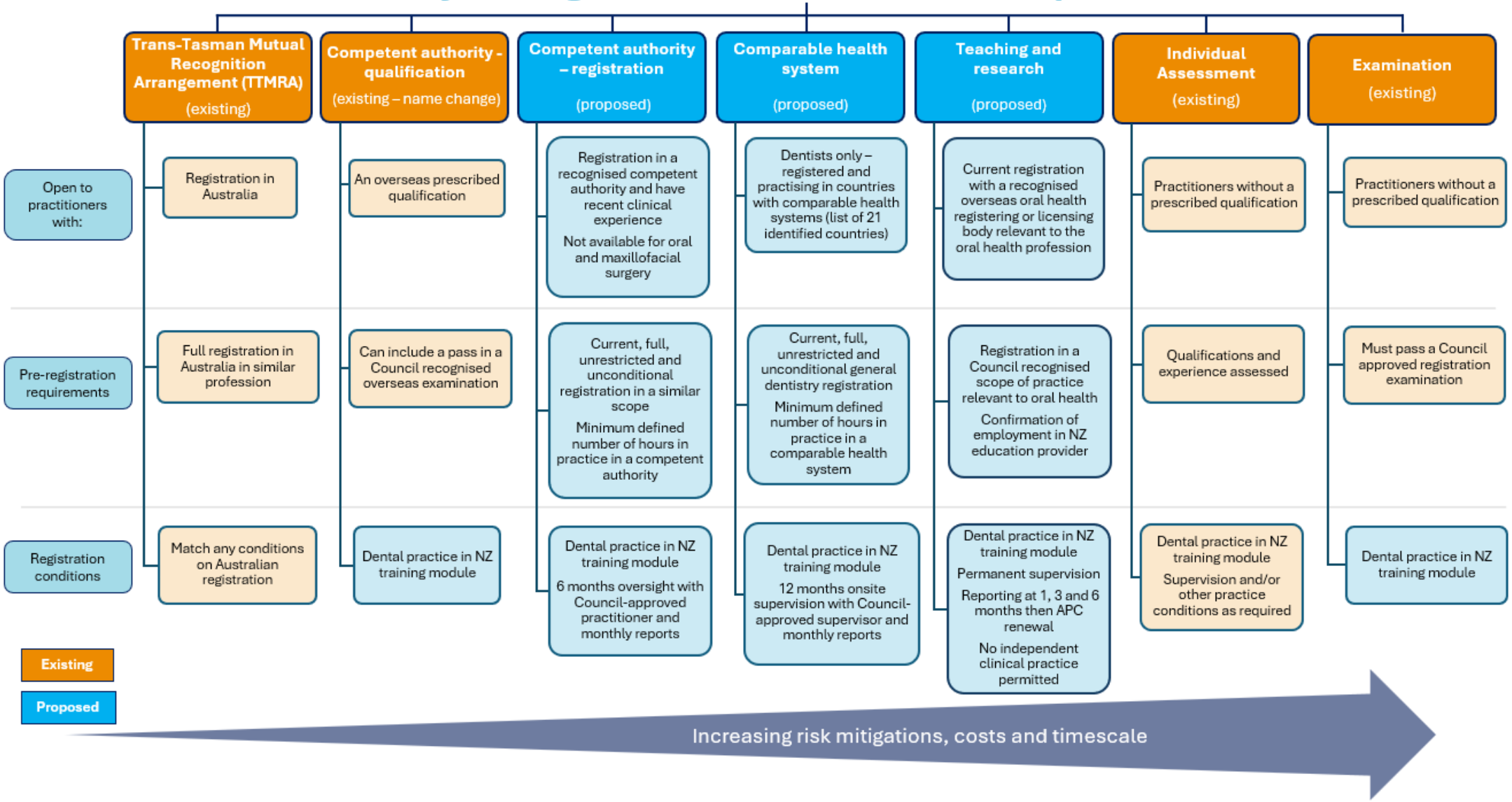
Pathways to registration - overseas trained practitioners



New registration pathways

We are now proposing to leverage of our existing recognition of some overseas jurisdictions and draw on global evidence to offer new registration pathways including:

1. Competent authority – registration

For practitioners who do not hold an accredited qualification from a competent authority[1] but are registered and practise in one or more competent authority(s).

2. Comparable health systems

For practitioners who are not eligible for registration via a competent authority pathway but are registered and practise in a comparable health system[2].

3. Teaching and research

For practitioners who have an offer of employment from a New Zealand tertiary education institution to provide clinical learning, teaching and/or research education for New Zealand accredited oral health programmes, and are not eligible for registration via the competent authority or comparable health system pathways. A practitioner cannot undertake independent clinical practice in this scope of practice.

Details of each new pathway can be found in the proposed new registration pathways section of this document.

The following four registration pathways remain:

- New Zealand graduates
- current gazetted overseas prescribed qualifications.
- assessment of individual qualifications and experience
- New Zealand registration examination pathways.

Individual assessment will only be an available pathway for those overseas trained practitioners that are not eligible to come through the other existing or proposed pathways.

Supported entry to the New Zealand practice environment

As part of the oversight and supervision requirements on the proposed overseas registration pathways, practitioners will need to complete an oversight or supervision programme within a defined timeframe.

The purpose of the programme is to:

- Support an overseas trained practitioner in their transition to autonomous practice in the New Zealand practice environment.
- Provide assurance of a practitioner's ongoing competence and fitness to practise.

[1] Authorities with equivalent regulatory systems, including systems for accreditation, setting professional standards, competence assessment and registration, and ensuring ongoing competence and fitness to practise

[2] Countries with comparable health system infrastructure, population health outcomes, and health regulatory frameworks

The programme consists of:

- A Dental practice in New Zealand module aimed at orientating practitioners to the New Zealand healthcare system, culture, regulatory and practising environment.
- Oversight or supervised practice, with regular reporting and a formal recommendation from the Council-approved oversight practitioner or supervisor at the end of the programme, confirming that the practitioner is safe and competent to practise independently (without oversight or supervision) in New Zealand.

The registration conditions will be removed after application by the practitioner with evidence that demonstrates successful completion of all the programme requirements.

In the event of concerns raised in the reports about the practitioner's practice, 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.

We are also proposing that the *dental practice in New Zealand* module be rolled out to **all** overseas registrants to support their transition to New Zealand practice.

Existing overseas prescribed qualification pathway

Further, we are proposing to rename the existing *overseas prescribed qualification* pathway to *competent authority – qualification* pathway. This is a common term used throughout regulation and will provide greater clarity between qualification and registration-based pathways.

In this context, 'competent' refers to those authorities that Council has formally reviewed and recognise as having equivalent systems and standards to that of New Zealand.

We will also take the opportunity to update the Gazette notices for clarification and consistency between scopes of practice.

Clinical practice requirements

The proposed period of clinical practice required before applying for registration under the *Competent authority - registration* and *Comparable health system* pathways is based on the Medical Council of New Zealand (MCNZ) pathways that have been operating for a number of years.

The clinical practice requirements are enabling with respect to time away from practice, but also meet HPCAA recency of practice requirements.

The clinical practice requirements are shorter for dental specialists than for the other scopes of practice. This reflects the specialist additional training completed and the transparency of specialist referral practice.

Risk-based approach

Like the rest of our frameworks, the new proposed registration pathways are risk-based models.

Each existing and proposed pathway has safeguards built into the registration requirements to protect the public and manage risk. Where there is more risk associated with a pathway the safeguards increase.

Generally, pathways that rely on the recognition of qualifications or practice from Council recognised jurisdictions with similar standards and competencies to New Zealand are considered lower risk, while

those not previously recognised and from less familiar systems are managed with more risk and regulatory protections.

Existing registration processes that enable identification and management of any competence or fitness for registration concerns will be embedded in the new pathways. These include disclosure requirements for competence or disciplinary proceedings, referee checks and certificates of standing from the health authority(s) where the applicant practised. The Council can only register a practitioner if it is satisfied that they are fit for registration in accordance with section 16 of the HPCAA and competent to practise in the scope of practice applied for.

Key benefits

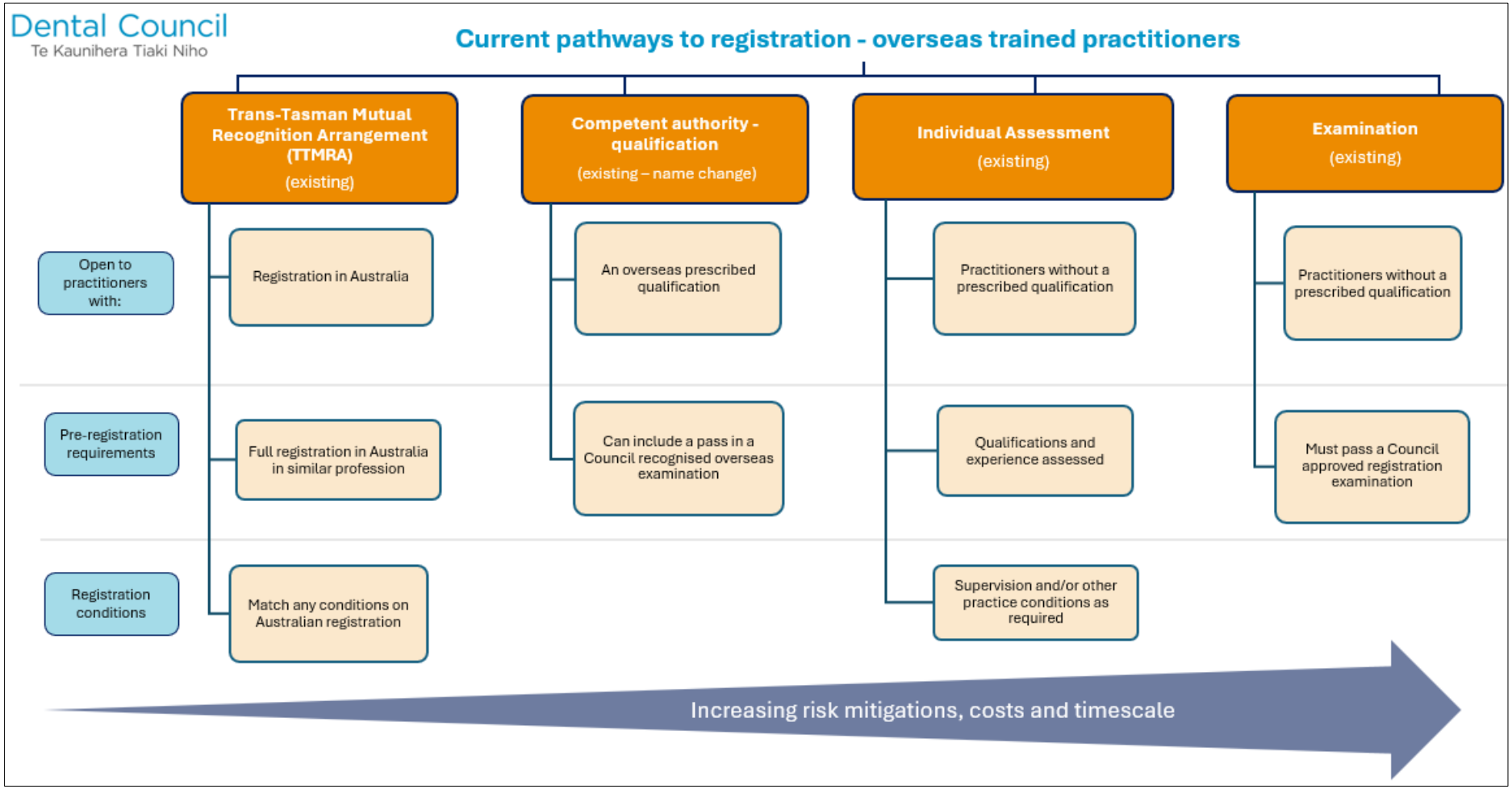
The proposed changes seek to:

- **Reduce regulatory barriers** by offering alternative routes to registration and practice in New Zealand
- **Enable practitioners to practise** in New Zealand **sooner** under enabling conditions
- **Create new pathways** based on recent clinical practice in recognised competent authorities and comparable health systems
- **Support oral health education and research** in New Zealand through a dedicated registration pathway
- **Ensure competence in the New Zealand context** through the introduction of oversight or supervision programmes, including initial oversight or supervision of practice and completing a *Dental practice in New Zealand* module
- **Increase the pool and diversity** of suitably qualified practitioners able to practise in New Zealand
- **Ensure** consistency, clarity and equity in the secondary legislation we set across the prescribed qualifications for all our scopes of practice
- **Ensure** our prescribed qualifications reflect contemporary educational construct and remain comparable to other competent authorities we recognise
- Continue to **protect** the health and safety of the **New Zealand public.**

2. Our existing registration pathways

The Council has been considering opportunities to improve and increase registration pathways, and reduce barriers for suitably qualified overseas practitioners.

Our current model for registration of overseas qualified practitioners includes four pathways:



3. Proposed new registration pathways

The Council has been monitoring alternative approaches that have been proving effective for other New Zealand health regulators and overseas jurisdictions. These approaches involve managing the registration of overseas trained professionals through a two-prong approach:

1. Competent authorities

   Authorities with an equivalent regulatory system, including systems for accreditation, setting professional standards, competence assessment and registration, ensuring ongoing competence and fitness to practise.

2. Comparable health systems

   Countries with comparable health system infrastructure, population health outcomes, and health regulatory frameworks.

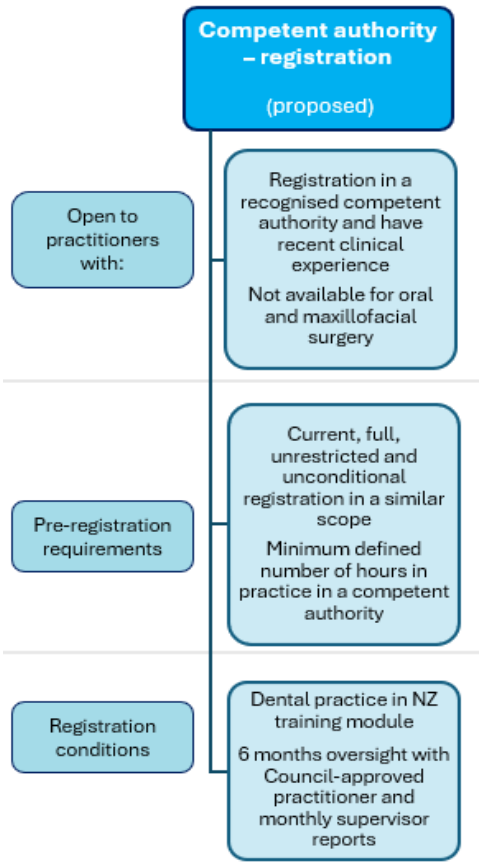
In response to a global shortage of oral health educators, some overseas jurisdictions also offer specific registration pathways for educators and researchers, for example in Australia and the UK. Council also proposes introducing a teaching and research pathway for these practitioners, where they are not eligible for the competent authority or comparable health system pathways.

3.1 Competent authority – registration

This is a new pathway for practitioners who are currently **registered** in a recognised competent authority(s) and have **recent clinical experience** there, but do **not hold an accredited qualification** from that competent authority(s).

Currently recognised competent authorities are:

- Australian health practitioner regulation agency (Ahpra) and Dental Board of Australia (DBA)[3]
- Dental Council of Ireland (DCI) (Republic of Ireland)
- General Dental Council (GDC) (United Kingdom)[4]
- Commission on Dental Accreditation of Canada (CDAC) and Canadian provincial dental regulators and the National Dental Examining Board of Canada (NDEB)
- Commission on Dental Accreditation (CODA) and USA state dental boards.



[3] DBA and Ahpra are included in the list for completeness, but it is recognised that Practitioners who hold full registration with Ahpra can apply for mutual recognition via the Trans-Tasman Mutual Recognition Act 1997 (TTMRA)

[4] General Medical Council (GMC) is also recognised as a competent authority for OMS, with the prescribed qualification being registration in OMS with the GMC

This pathway recognises applicants whose primary qualification is not from a competent authority, or who don't otherwise hold a prescribed qualification, but they hold full (unrestricted) registration with a competent authority(s) and have been successfully practising clinically there for a period of time.

The new proposed pathway is expected to open up registration opportunities across the range of oral health professions where practitioners have been successfully practising in those listed jurisdictions.

Registration requirements

Dentists

- Applicants must hold current, full, unrestricted, and unconditional general dentistry registration in a recognised competent authority(s) and be in good standing with that authority(s)
- They must have practised clinically in general dental practice in a competent authority(s) for at least 33 months (working 20 hours or more per week) during the 48 months before applying.

Recognised dental specialists

- Applicants must hold current, full, unrestricted, and unconditional registration appropriate for practice in the specialty applied for, in a recognised competent authority(s) and be in good standing with that authority(s)
- They must have practised clinically in their specialty scope of practice in a competent authority(s) for at least 24 months (working 20 hours or more per week) in the past five years, including 12 months within the last 18 months immediately before applying.

Oral health therapists, dental hygienists, dental therapists, clinical dental and dental technicians, and orthodontic auxiliaries

- Applicants must hold current, full, unrestricted, and unconditional registration in the equivalent scope of practice with a recognised competent authority(s) and be in good standing with that authority(s)
- They must have practised clinically[5] in their identified oral health profession in a competent authority(s) for at least 33 months (working 20 hours or more per week) during the 48 months before applying.

Registration with conditions

Registration includes a period of oversight as part of a broader oversight programme. This includes:

- Completion of a Dental practice in New Zealand module aimed at orientating practitioners to the New Zealand healthcare system, regulatory and practising environment
- Six months of practice under the oversight of a Council-approved practitioner
- Monthly oversight reports and a letter of recommendation at the end of the oversight period.

The registration conditions will be removed after application by the practitioner with evidence that demonstrates successful completion of all the programme requirements.

[5] For dental technology, practised clinically means undertaking technical work for clinical cases.

Evidence to support proposed Competent authority – registration pathway

The Council has undertaken a detailed analysis of the regulatory systems in the UK, Canada, USA, Republic of Ireland and Australia and has confidence that they have equivalent systems of regulation to that of New Zealand. For example, professional standards including communication skills, and processes to check that practitioners maintain their competence, investigate concerns about competence, conduct and health notifications, and when registering overseas trained practitioners they have policy and procedures to ensure that education requirements are to the same standard as the authorities' accredited qualification(s).

Additionally, a review of the education standards for dental speciality and oral health programmes recognised in the authorities has been undertaken. The analysis indicates that the various programme curricula and education outcomes are "equivalent to or the same as" New Zealand standards. Similarly, the training structures are in line with New Zealand for all but two scopes of practice; oral and maxillofacial surgery (OMS) and oral medicine. Details on the proposed changes to the oral medicine prescribed qualifications follow in section 4 (p21).

For OMS practice in New Zealand, Council holds the position that for patient safety a medicine degree is required. The existing prescribed qualifications already include OMS qualifications from the competent authorities, plus a medical degree. Oral and maxillofacial training in some competent authorities do not include a medical degree. For this reason, they would not be eligible for the competent authority registration pathway.

Unlike the *Competent authority – qualification* processes, Council has not itself accredited or observed the accreditation of these programmes or formalised recognition of these through agreements. For this reason, it is proposed to add these additional disciplines to the *Competent authority – registration* pathway.

Disciplines **currently recognised** in *Competent authority – qualification pathway (existing overseas prescribed qualifications)*

UK	Ireland	Canada	USA	Australia
General Dentist	General Dentist	General Dentist	General Dentist	All oral health practitioners with Ahpra registration via TTMRA
Oral and Maxillofacial Surgery		Oral and Maxillofacial Surgery	Oral and Maxillofacial Surgery	
		Prosthodontics	Prosthodontics	
Dental Hygiene		Dental Hygiene	Dental Hygiene	

Proposed disciplines recognised in *Competent authority – registration pathway*

UK	Ireland	Canada	USA
General dentist	General dentist	General dentist	General dentist
Dental public health		Dental public health	Dental public health
Endodontics		Endodontics	Endodontics
Orthodontics	Orthodontics	Orthodontics	Orthodontics
Oral and maxillofacial pathology		Oral medicine/ pathology	Oral and maxillofacial pathology
Oral medicine		Oral medicine	Oral medicine

Oral surgery	Oral surgery		
Paediatric dentistry		Paediatric dentistry	Paediatric dentistry
Periodontics		Periodontics	Periodontics
Prosthodontics		Prosthodontics	Prosthodontics
Special care dentistry			
Clinical dental Technician	Clinical dental technician		
Dental hygiene	Dental hygiene	Dental hygiene	Dental hygiene
Dental therapy			Dental therapy
Dental hygiene – Dental therapy			
Dental technician			Dental technician
Orthodontic therapist[6]	Orthodontic therapist		

Based on the above, a new pathway for registration across these scopes of practice is proposed: *Competent authority - registration*.

In addition to usual competence to practise and fitness for registration checks that are made upon application for registration, the pathway will provide assurance of competence through a period of practice in a competent authority prior to NZ registration, and completion of an oversight programme following registration in New Zealand.

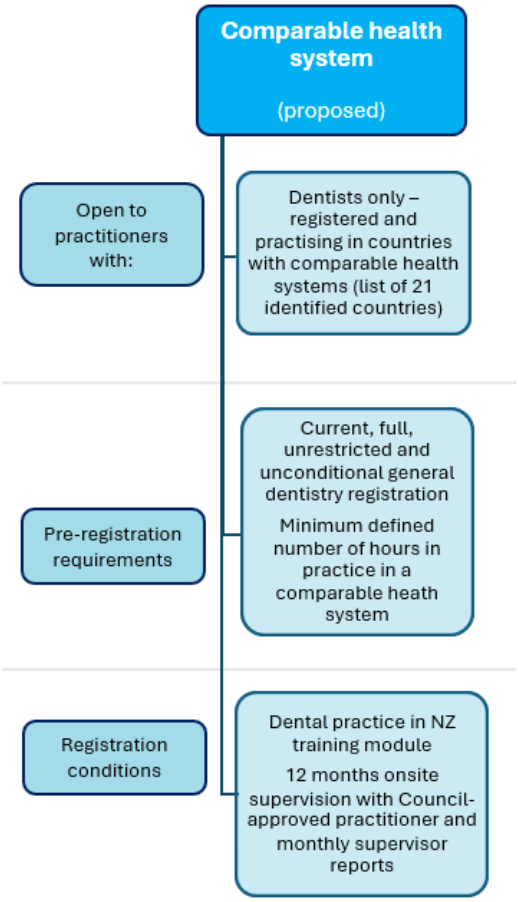
[6] Similar to NZ orthodontic auxiliary scope of practice

3.2 Comparable health system

This new pathway is currently proposed for dentists only. It recognises dentists who are registered and practising in countries with a comparable health system infrastructure, population health outcomes, and health regulatory frameworks.

Countries that have been identified as currently having comparable health systems through our analysis are:

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



This pathway is based on the MCNZ approach to identify countries with comparable health systems and regulatory environments to New Zealand, and overlayed with oral health statistics and outcomes where available.

Registration requirements

- The dentist must hold current, full, unrestricted, and unconditional general dentistry registration with a recognised comparable health system authority(s) and be in good standing with that authority(s)
- They must have practised clinically in general dental practice in a comparable health system(s)[7] for at least 33 months (work 20 hours or more per week) during the 48 months before applying.

Conditional registration

Registration includes a period of supervision as part of a broader supervision programme. This includes:

- Completion of a Dental practice in New Zealand module aimed at orientating practitioners to the New Zealand healthcare system, regulatory and practising environment
- 12 months of practice under direct (onsite) supervision of a Council-approved supervisor
- Monthly supervisor reports and a letter of recommendation at the end of the supervision period.

[7] Competent authority practice experience can count toward this time requirement, if not sufficient for the Competent Authority – Registration pathway

The registration conditions will be removed after application by the practitioner with evidence that demonstrates successful completion of all the programme requirements.

Evidence to support the proposed Comparable health system registration pathway

This pathway is based on the established MCNZ's process to determine if a country has a comparable health system to New Zealand. The analysis is based on a mix of regulatory and health system indicators and population health outcomes.

NZ comparable health system analysis indicators

Indicators
Health system infrastructure
Population health outcomes – such as life expectancy, mortality rates related to disease and injury (World Health Organization (WHO) https://data.who.int/countries)
Regulatory framework – such as regulatory act/regulations, assessment of regulatory system, disciplinary procedures, standards

MCNZ has identified several countries that meet their criteria, and Dental Council's analysis builds on this with an oral health perspective. This was informed by various publications including:

- WHO documents *Global strategy and action plan on oral health 2023-2030*
- WHO *Tracking progress on the implementation of the Global oral health action plan 2023-2030*
- Council of European Dentists *EU Manual of Dental Practice 2015 Edition 5.1*
- Review and mapping of basic dental training in EU member states: Final Report. Gale T, M. Bryce, L. Burns, S. Hanks, D. Zahra. University of Plymouth (2020).

Council acknowledges the challenges the WHO has in collecting oral health data, and the dearth of oral health data globally and, at this stage, can only support the data being attributed to dentists.

Through the Council's analysis, the data shows a correlation with the WHO Oral Health Member Regions and countries that MCNZ recognise as comparable health systems (excluding competent authority countries).

Dental Council **proposed comparable countries** by WHO Oral Health Member Regions

Western Pacific Region	European Region				
Singapore	Austria	Finland	Iceland	Norway	Switzerland
Republic of Korea	Belgium	France	Israel	Portugal	
Japan	Czech Republic	Germany	Italy	Spain	
China (Hong Kong)	Denmark	Greece	Netherlands	Sweden	

The Council analysis indicates that the above listed jurisdictions have comparable health systems, population health and oral health outcomes, including progress on the WHO oral health action plan. Examples include the Western Pacific Region (inc. NZ and Aus) having five of the eight WHO objectives above the global average, and standardised European curriculum outcomes.

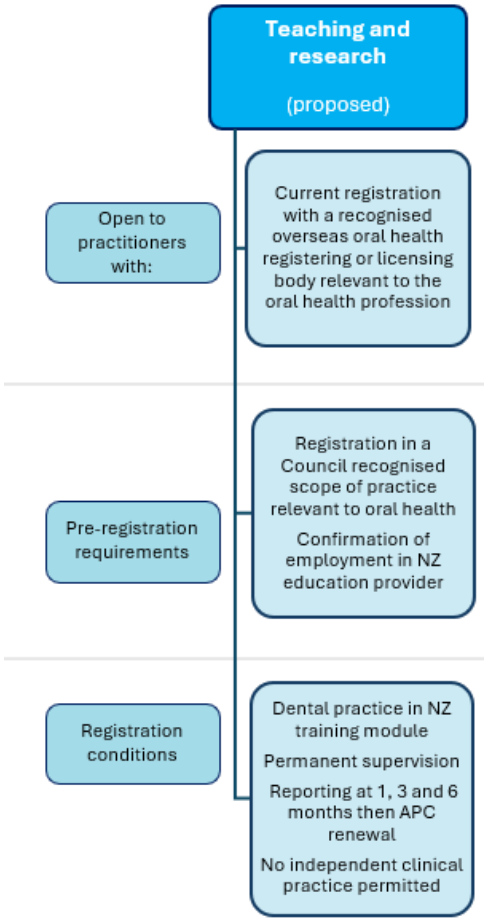
This data was overlayed with an analysis of the health regulatory systems of these countries and shows that these jurisdictions have similar health regulatory frameworks and functions to New Zealand, including registration of practitioners, professional standards, programme accreditation, and practitioner competence, health and discipline processes.

Based on the above, a new pathway for dentist registration is proposed: *Comparable health system*. In addition to usual competence to practise and fitness for registration checks that are made upon application for registration, the pathway will provide assurance of competence through a period of practice in a comparable health system prior to NZ registration, and completion of a supervision programme after registration here. The supervision programme includes a period of direct (onsite) supervised practice to enable the practitioner to fulfil the requirements on their registration.

3.3 Teaching and research

This pathway will introduce a new scope of practice, and is designed for a practitioner who is registered with a recognised overseas oral health registering or licensing body and has a job offer from a New Zealand tertiary education institution to provide clinical learning, teaching and/or research for New Zealand accredited oral health programmes, and cannot meet the requirements of the Competent authority – registration and Comparable health system pathways.

This pathway recognises the specialised nature of these roles, and the existing safeguards built into the tertiary institutes processes - such as their selection criteria in combination with regulatory supervision. Teaching and research registrants cannot undertake any individual clinical practice (manage patients in any location).



Registration requirements

- Applicants must hold current registration with a recognised overseas oral health registering or licensing body in a Dental Council recognised scope of practice, that allows the practitioner to conduct oral health clinical learning, teaching and/or research relevant to the oral health profession; and
- Confirmation of employment by a New Zealand education institution to provide clinical learning, teaching and/or research education for New Zealand accredited oral health programmes.

Supervision requirements

Registration will be subject to **permanent supervision**, specifically:

- Supervision by a Council-approved supervisor who is employed by the same teaching institution as the registrant.
- Supervisor reports are required initially at 1, 3, and 6 months and thereafter with the annual practising certificate renewal, based on the Council's competencies relevant to the registration category.
- Individual clinical practice i.e. management of patients is not permitted in any location, and the pathway does not lead to general or specialist registration.
- Completion of a Dental practice in New Zealand module aimed at orientating practitioners to the New Zealand healthcare system, regulatory and practising environment will be required within the first six months of supervised practice.

In addition to usual competence to practise and fitness for registration checks that are made upon application for registration, the pathway will provide assurance to Council regarding the applicant's competence based on a tertiary institutions' processes such as selection criteria and supervisor's progress reports/requirements, and supervised practice by the institution.

If the scenario changes for the practitioner, then it may impact on their ability to remain registered in the teaching and research scope of practice. For example, if their employment ends, or they want to practise clinically, or they cannot secure a supervisor.

To be eligible to practise independently, the practitioner must apply for registration in their relevant scope of practice following the other available registration pathways.

Rationale and evidence to support the proposed Teaching and research registration pathway

There is a recognised global dental academic shortage. Oral health tertiary education in New Zealand is hampered by the requirement that clinicians involved in clinical learning and teaching, and research be registered in an existing scope of practice.

Currently the pathways to registration, and requirements once registered, are the same for clinical teaching as those for managing patients in practice. However, the requirements for registration rely on currency of practice in the full clinical scope of practice. This does not reflect the reality of many practitioners who have made a career in academia and whose practice experience looks different to that of a clinician in private or public practice.

This restriction has been recognised by other competent authorities such as Australia and the UK who have a limited registration category for education and/or research.

4. Additional changes proposed to the prescribed qualifications

In addition to the new proposed registration pathways for overseas practitioners, further changes are proposed to aspects of the current gazetted prescribed qualifications to ensure that they meet Sections 12 and 13 of the HPCAA.

4.1 Renaming current overseas prescribed qualification registration pathway

With the proposed introduction of the new pathways, we are taking the opportunity to update and re-name the overseas prescribed qualification pathway to Competent authority – qualification. This will provide clarity between the different pathways and be consistent with the newly introduced registration pathways.

4.2 Medical degree for the oral medicine specialist scope of practice

The Council is proposing to remove the requirement for a stand-alone medical degree for registration in the oral medicine specialist scope of practice.

The Council previously agreed that a stand-alone medical degree would not be required for oral medicine registration providing the necessary medical components and clinical training were incorporated into the oral medicine specialist training. This is in-line with international training programmes that do not require a medical degree. The Council remains committed that an accredited programme will have strong medical didactic learning and clinical training essential to achieve the competencies required to practise as an oral medicine specialist, and to meet the health needs of the New Zealand population within our specific health context. To reflect this Council position, it is proposed to update the oral medicine prescribed qualifications. To date, in New Zealand no oral medicine programme has been accredited by Council that embeds the required medical components into the programme.

The prescribed qualification requirement stems from the original New Zealand accredited programme where a medical degree formed part of the conjoint dental specialist qualification offered by the University of Otago (similar to the training offered in the UK at that time). When the conjoint programme ceased to be offered, the medical degree became part of the entry criteria into the oral medicine specialist programme.

Accreditation of the University of Otago oral medicine programme ended in December 2023. New Zealand is currently reliant on registering overseas trained oral medicine specialists. However, the requirement for a stand-alone medical degree is a barrier to registration compared to international oral medicine training. The proposed change would align us with the educational programmes accredited in other international jurisdictions.

The oral medicine programmes accredited in recognised competent authorities i.e. UK, USA, Canada and Australia, have the medical components incorporated into their oral medicine specialist programme (or give prior learning recognition to those who hold a medical degree). The requirement for a medical degree for registration in New Zealand means that most oral medicine graduates from these countries cannot obtain registration in New Zealand under the HPCAA. The only pathway into New Zealand is via Trans-Tasman mutual recognition, based on oral medicine registration held in Australia – which does not require a medical degree.

Given the major structural change proposed to the gazetted oral medicine specialist prescribed qualifications, and to clearly articulate the Council's expectations on the essential medical components to be included in a programme for New Zealand oral medicine practice, it is proposed that the necessary medical components required for oral medicine practice in New Zealand be articulated within the Gazetted qualifications – at least for the medium term. This will be critical to ensure transparency and consistency

for programmes that Council accredits, and will also support the assessors of overseas applicants' qualifications and experience under the individual assessment registration pathway (s15(2) of the HPCAA).

The historic accredited New Zealand oral medicine prescribed qualifications will remain unchanged in the gazette, as the medical degree was required at that time to attain the competence across the full scope of practice.

4.3 Clinical dental technology registration

We are proposing to remove the requirement for registration in the dental technology scope of practice as a prerequisite to register in the clinical dental technology scope of practice. This requirement forms part of the gazetted clinical dental technology New Zealand prescribed qualification.

The approach to require registration in one scope is inconsistent with our approach for registration for other scopes of practice, for example in New Zealand you do not need to be registered as a dentist to register as a dental specialist. It is considered that such requirements place unnecessary barriers to registration.

Clinical dental technology is a stand-alone profession named in the HPCAA, similar to dental technology.

Entry into the NZ accredited postgraduate clinical dental technology training programme requires completion of an appropriate dental technology programme. The competencies for clinical dental technology encompass the technical areas covered in the dental technology scope of practice, which must be met for registration in the clinical dental technology scope of practice.

We already have practitioners on the register who are only registered in clinical dental technology because they have either elected to remove the dental therapy scope of practice after gaining clinical dental technology registration, or registered under TTMR based on their dental prosthetics registration with Ahpra.

Council considers there is no regulatory risk in removing the registration linked to dental technology to register in clinical dental technology. With the primary focus on removing unnecessary registration barriers to meet our legal obligation under section 13 of the HPCAA, Council agreed to proceed to consult on the proposal.

Council is aware of concern by the dental technology profession on financial sustainability of the dental technology profession if practitioners chose to only register in the clinical dental technology scope of practice.

Consideration of the long-term financial sustainability of the dental technology profession, and other smaller professions with decreasing or stagnant numbers such as dental therapy and dental hygiene is an identified project for Council that will be prioritised.

4.4 Examination changes

USA Licensing examinations

Council is aware that some USA licensing examinations have moved entirely to a theory-based assessment and do not have a practical psychomotor clinical skills assessment. This is a significant departure from the mode of US licensing examinations when they were gazetted in New Zealand, and from that of other gazetted registration/licensing examinations that we accept.

In North America, graduates of CODA or CDAC accredited programmes are required to pass a national licensing examination as part of their licensure requirements, and licensing examinations for those

graduates are therefore designed for that purpose. In Canada, overseas graduates must complete a separate examination, which includes clinical skills assessment, to that of CDAC graduates in order to be licenced for practice. In the USA, some licensing providers will permit overseas graduate entry to their theory-based licensing exams, but at the present time there is no pathway to licensure for applicants who do not have a CODA or CDAC accredited qualification.

As a result, clarification has been included in the Gazette that USA registration/licensing examinations for applicants who do not have a prescribed qualification, must include a psychomotor clinical skills assessment.

Dental hygiene, dental therapy and oral health therapy examinations

The current prescribed qualification for registration in the dental hygiene and dental therapy scopes of practice via New Zealand Registration Examinations allows a candidate to sit the examination on the basis of a dentist degree. In 2021, the Council agreed that candidates should only be granted entry on the basis of a formal qualification in the relevant profession. This was in response to poor pass rates for dentists sitting dental hygiene and dental therapy examinations, and recognising the significant cost of running the examination which is passed on to the candidate through the application fee.

Council has reconsidered this position, and agreed to open the examination back up to candidates who hold a dentist degree, allowing the candidate to make their own decision about whether or not to invest in the examination process. Council relies on the assessment outcome as assurance of an applicant's competence.

To ensure consistency across the prescribed requirements for dental therapy, dental hygiene and oral health therapy registration on the basis of the New Zealand registration examinations, it is proposed that admission to the New Zealand oral health therapy registration examination be extended to those holding a dental qualification, in addition to clarification that a candidate holding a combined dental therapy/hygiene qualification can apply to sit the oral health therapy registration examination.

4.5 Administrative updates

The consultation offers an opportunity to revisit and propose some administrative changes to terminology for consistency across all our scopes of practice, and to remove earlier entry pathways that are out of date, and ensure regulatory compliance with section 12(2) of the HPCAA. One of the proposed administrative changes relate to the existing FRACDS(OMS) prescribed qualification. The amended footnote is to be explicit that the prescribed qualification relates to the qualification accredited and gazetted by Council in March 2012, and monitored for ongoing quality assurance. It does not relate to Fellowship the College may award based on their own criteria and processes.

5. Documents to facilitate the proposed changes

5.1 Draft Gazette Notices – prescribed qualifications

To support the introduction of the new registration pathways and additional proposed prescribed qualification changes highlighted in section 4 of the document, draft notices are presented for consultation purposes as required under section 14(2) of the HPCAA.

Proposed changes to the gazetted prescribed qualifications are indicated in the relevant attachments as red text.

The draft notices for consideration:

1. Prescribed qualifications for general dental practice
2. Prescribed qualifications for oral health therapy practice
3. Prescribed qualifications for dental therapy practice and adult care for dental therapy
4. Prescribed qualifications for dental hygiene practice
5. Prescribed qualifications for orthodontic auxiliary practice
6. Prescribed qualifications for clinical dental technology practice and implant overdentures
7. Prescribed qualifications for dental technology practice
8. Prescribed qualifications for endodontic specialists
9. Prescribed qualifications for oral and maxillofacial surgery specialists
10. Prescribed qualifications for oral medicine specialists
11. Prescribed qualifications for oral pathology specialists
12. Prescribed qualifications for oral surgery specialists
13. Prescribed qualifications for orthodontic specialists
14. Prescribed qualifications for paediatric dentistry specialists
15. Prescribed qualifications for periodontic specialists
16. Prescribed qualifications for prosthodontic specialists
17. Prescribed qualifications for public health dentistry specialists
18. Prescribed qualifications for special needs dentistry specialists
19. Teaching and research scope of practice and prescribed qualifications.

5.2 Draft Gazette Notice – new fees

New registration fees are included to support the proposed registration pathway applications. The proposed fees will only come into effect if the proposed registration pathway(s) is accepted following the consultation process.

Once registered, the applicable annual practising or non-practising fees would apply for the relevant profession the practitioner is registered in.

Registration is considered a cost recovery activity under the fees setting principle of 'user pays', meaning the fees for the proposed registration pathways need to be set at a rate that will recover the costs incurred to complete the applications, including during the period conditions are in place and being monitored.

In the first year of implementation, it is proposed that the new fees start from a base of the proposed 2026/27 'Overseas Applicant with Prescribed Qualification' registration fee of $1,597.00 (excluding GST), with the additional requirements for oversight or supervision conditions anticipated and included in each new registration fee.

The proposed fees (excluding GST) for the new proposed registration pathway applications are:

1. **Competent authority – registration** **$1,888.00**

   Fee includes the monitoring of the oversight programme and review of monthly oversight reports for six months.

2. **Comparable health systems** **$2,179.00**

   Fee includes the monitoring of the supervision programme and review of monthly supervision reports for 12 months.

3. **Teaching and research** **$1,743.00**

   Fee includes the monitoring of the supervision programme and review of supervision reports after one, three and six months.

   In additional to the registration fee, a new annual monitoring fee set at one hour of the administrative overheads rate (proposed at $97.00 an hour from 1 April 2026) will be added to the APC fee for practitioners under a teaching and research registration who have a permanent condition requiring supervision reports to be reviewed annually by Council.

   Other fees may apply:

   Where the Council incurs any additional oversight/monitoring costs beyond those included as part of the application fee. The fees payable will be an amount that is sufficient to reimburse the Council for all costs and expenses actually and reasonably incurred by the Council in relation to the supervision/oversight that applies to the practitioner. Such costs and expenses may include, without limitation:

   a) fees for service providers engaged by the Council in relation to the supervision/oversight;

   b) travel, accommodation, and travel-related costs;

   c) administration expenses for Council administration (at the staff administrative overheads rate), teleconference meetings, printing, postage, and communications.

   The variation on the scope of practice fee, proposed at $352.00 (excluding GST) from 1 April 2026, will be payable at the completion of the oversight or supervision programme on application to remove the conditions.

A draft fees notice is presented for feedback.

20. Fees notice for new registration pathways.

5.3 Draft Registration policy

Updates to the Council's Registration policy is proposed to affect the new proposed registration pathways for overseas trained applicants. In particular the broader supervision and oversight requirements that must be met after registration. These do not legally fit under the definition of prescribed qualifications, and is reflected in the Registration policy for transparency and consistent application.

The updates to the Registration policy are included for feedback:

21. Updated Registration policy