



Royal Australasian College
of Dental Surgeons
Let knowledge conquer disease

27 January 2026

Ms Marie MacKay
Chief Executive Officer
New Zealand Dental Council
Level 7, 22 The Terrace
Wellington 6011
New Zealand

By E-mail: consultations@dcnz.org.nz

Dear Ms MacKay

Thank you for providing the Royal Australasian College of Dental Surgeons (the College) with the opportunity to contribute to the consultation on the three new proposed registration pathways for overseas practitioners and updates to the existing prescribed qualifications.

As the College is not involved in the assessment and registration of general dentists, we do not wish to make any submission or comment in relation to the changes to the registration pathways other than to say that we do not have any significant objection.

As the Dental Council of New Zealand is aware, the College is currently going through a process to have several specialist programs accredited in New Zealand: one of which will lead to recognition of specialist registration in Oral Medicine. That program has been designed on the basis that potential applicants must have successfully completed undergraduate medical training.

While we note that our application for accreditation will be considered against the current policy framework, requisite knowledge from a medical degree was an important consideration in the design of the proposed RACDS Fellowship Program in Oral Medicine. The Learning Outcomes of this program have been carefully designed for the three-year training period with no consideration given to how to also cover knowledge assumed to have been gained as part of an applicant's formal medical training (as was part of the existing framework).

As such, we are concerned that additional training time may be required to adequately cover the additional medical components listed in the consultation which we feel will be contrary to the intention of the proposal, which is to increase workforce supply. In this context, the College also notes that any changes to prescribed qualifications would benefit from consideration of transitional arrangements. There may be individuals who have undertaken or are nearing completion of medical training in anticipation of pursuing oral medicine specialty training under the currently prescribed framework. Such individuals represent a potential near-term



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contribution to workforce supply. A transitional approach that preserves the availability of the dual-qualification pathway for those already on that trajectory would support workforce continuity while allowing time for any new pathway to be fully developed and implemented.

The development of any new pathway would also require significant lead time. The College anticipates that we will need at least 12 to 18 months to convene a working group and develop this content, and it is unknown, until this work commences, what additional time would need to be added to the training program to accommodate the attainment of the additional competencies. We would welcome clarification on the Council's expected implementation timeline for any changes, to ensure alignment with curriculum development processes.

The Consultation paper notes correctly that there is currently no accredited oral medicine program in New Zealand and there is a reliance on international graduates. Graduates with the requisite qualifications are entering and successfully registering in New Zealand via existing registration pathways. Based on the last available data on registrations published by the Dental Council of New Zealand, the workforce numbers remain low so the need for locally prepared graduates remains high. The College program seeks to address this workforce need.

It is also noted that the proposed solution for the medical components to be articulated within the Gazetted qualifications is a 'medium-term' solution. It is unknown exactly what timeframe this refers to and what longer term solution is being considered. The College would be supportive, however, of a more detailed framework outlining the specific components of each topic that are deemed by Council to be relevant to Oral Medicine.

The College appreciates the complexity of the issues faced by the Council in trying to meet workforce needs while still maintaining high standards of accreditation. The College remains committed to working collaboratively with the Dental Council.

Should you wish to discuss any aspect of this response, please contact our CEO, Ms Eithne Irving on ceo@racds.org or by mobile on +61 419 550.

Yours sincerely,

Dr Erin Mahoney
President