
Page 2: About your submission

Q1

First name

Roddy

Q2

Last name

McMillan

Q4

Are you primarily based in New Zealand or overseas?

Overseas,

If overseas, where?:

United Kingdom

Q5

Company/organisation name

Specialty Advisory Committee for the Additional Dental Specialties (SACADS)

Q6

Professional body

In what capacity are you making this submission?

Page 3: About your submission

Q7

Respondent skipped this question

What is your profession?

Q8 Respondent skipped this question

Please enter your Dental Council Person ID, if applicable

Page 4: Proposed registration pathways

Q9 Yes

Do you believe the proposed changes will help reduce barriers to registration for suitably trained overseas practitioners?

Q10

Please tell us why:

The model you propose is somewhat like the previous European Union policy of allowing transferrable skills and qualifications across various countries - this opened up the UK to European trained dentists.

Page 5: Introduction of the proposed 'Competent authority - registration' pathway

Q11 Partially support

Do you support the introduction of the 'Competent authority - registration' pathway? [Click to learn more about the proposed pathway](#)

Q12

Please tell us why:

You are comparing apples and pears here - just because the listed countries have similar healthcare systems and speak English does not make their dental specialists comparable. As an example, the practice of oral medicine in the UK and Ireland is roughly similar to ANZ; the practice of oral medicine in the US and Canada is not (a variable mixture of special care dentistry, oral medicine and oral pathology) - indeed the scope of practice in the US and Canada varies from within and they have yet to unify their various curricula and have a standard syllabus.

Page 6: Introduction of the proposed 'Comparable health system' pathway

Q13 Partially support

Do you support the introduction of the 'Comparable health system' pathway for dentists? [Click to learn more about the proposed pathway](#)

Q14

Please tell us why:

I presume this is for the primary dental registration and not specialist practice? You don't mention an English language assessment - this would be standard in the UK and makes sense given that you are opening the doors to a host of non-English speaking countries. The supervised 12 months is a good idea, but more detail on what is being assessed and how it will be assessed is required.

Page 7: Introduction of the proposed 'Teaching and research' pathway

Q15

Partially support

Do you support the introduction of the 'Teaching and research' pathway?[Click to learn more about the proposed pathway](#)

Q16

Please tell us why:

Again, English language assessment has not been mentioned.

Page 9: Proposed removal of requirement for a medical degree for oral medicine specialist registration

Q17

Partially support

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?[Click to learn more about the proposed changes.](#)

Q18

Please tell us why:

In short, yes, this is a good idea, but there are significant caveats. The UK went through a similar process in 2008, where the GDC guillotined through the removal of the medical qualification for oral medicine specialism. This created a lot of issues at the time and was not handled well by the GDC who did not carry out a consultation process - well done for not making the same mistake. In the short term, this change was rounded on by many specialists who suggested it would force a drop in standards - there was a lot of posturing, vulgar displays of ego and arrogance from many in the specialty, who wrongly assumed that singly qualified specialists will not be of the required standard. In the longer term, these assumptions have been proved wrong - we have the majority of our new specialists are now singly qualified, training standards appear to have improved and we now have much healthier numbers of specialists working in UK oral medicine.

The caveats - there are medical competencies that will be required in order to become a specialist in oral medicine and you will need to have a framework in place for how these can be obtained without a medical degree (the UK went through an iterative process in how to achieve this and a semi-formalised multimodal modal is currently in place). We will of course be happy to share all if asked to do so.

Page 10: Proposed removal of requirement to register in dental technology before registering in CDT

Q19

No opinion/NA

Do you support removing the requirement to register in dental technology before registering in clinical dental technology? Click to learn more about the proposed changes.

Q20

Respondent skipped this question

Please tell us why:

Page 11: Proposed changes to the New Zealand registration examination requirements

Q21

No opinion/NA

Do you support the proposed changes to the New Zealand registration examination requirements? Click to learn more about the proposed changes.

Q22

Respondent skipped this question

Please tell us why:

Page 12: Proposed administrative changes to the prescribed qualifications

Q23

Oral medicine

Do you have feedback on the proposed administrative changes to prescribed qualifications for any of the scopes of practice, as reflected in the draft Gazette notices?

Q24

Please tell us your feedback. When discussing multiple scopes, please indicate clearly which scope of practice you are referring to in your comment.

Already provided oral medicine specific feedback earlier.

Page 13: Proposed fees for the new registration pathways

Q25

No opinion/NA

Do you find the proposed fees for the new registration pathways reasonable? Proposed fee notice

Q26

Respondent skipped this question

Please tell us why or why not?

Page 14: Thank you for your time

Q27

Respondent skipped this question

Is there any additional feedback you would like to share on the consultation?
