Feedback template

Public consultation on proposed entry level competencies for dental specialties

Public consultation

The Dental Council New Zealand (the Council) in partnership with the Dental Board of Australia (the Board) is releasing this public consultation paper on the proposed entry level competencies for dental specialties.

Your feedback

You are invited to provide feedback by email to [consultations@dcnz.org.nz](mailto:consultations@dcnz.org.nz) by close of business on Monday 15 February 2016.

You are welcome to supply a PDF file of your feedback in addition to the word (or equivalent) file, however we request that you do supply a text or word file, in order to meet international website accessibility guidelines.

You are encouraged to complete the feedback template to assist in focussing responses and to ensure clear presentation and interpretation of your submission.

How your submission will be treated

1. All submissions received will be published on the Council’s website shortly after receipt, and will remain there as a public document.  The submissions will be shared with the Dental Board of Australia, and will be published on its website.
2. For submissions made by individuals, only your name and profession, if you are a registered health practitioner, will be published on the Council’s website.  All personal contact details will be removed from your submission.
3. As this is a public consultation, “In confidence” information will only be accepted under special circumstances.  Contact the Council before submitting this material.
4. The Council holds the right not to publish any derogatory or inflammatory submissions.
5. The views expressed in the submissions are those of the individuals or organisations who submit them and their publication does not imply any acceptance of, or agreement with, these views by the Council.

General information about your submission

|  |  |
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| Who is the submission from? |  |
| If we need to follow up with someone, who should we contact? |  |
| Would you like your submission published on the Council’s website? |  |

Feedback template

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| Specific consultation questions and section for responses |
| 1. Do you understand the reason why we have developed the proposed competencies and how we are going to use them? |
| Yes/No |
| Comments |
| 1. Is there any content that you think should be changed or deleted in the proposed competencies? |
| Endodontics |
| Yes/No |
| Comments |
| Oral Medicine |
| Yes/No |
| Comments |

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| Oral and Maxillofacial Surgery |
| Yes/No |
| Comments |
| Oral Pathology |
| Yes/No |
| Comments |
| Oral Surgery |
| Yes/No |
| Comments |
| Orthodontics |
| Yes/No |
| Comments |
| Paediatric Dentistry |
| Yes/No |
| Comments |

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| --- |
| **Periodontics** |
| Yes/No |
| Comments |
| **Prosthodontics** |
| Yes/No |
| Comments |
| **Public Health** |
| Yes/No |
| Comments |
| Restorative Dentistry |
| Yes/No |
| Comments |
| **Special Needs** |
| Yes/No |
| Comments |

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| 1. We are proposing that the competencies be reviewed in five years time with the option to review earlier if needed. Do you agree? |
| Yes/No |
| Comments |
| 1. Do you have any other comments? |