

Page 2: Information about the person or organisation completing this submission

Q1 This submission was completed by:

Name	Brynley Paul Pearce
Q2 Are you making this submission	as a registered practitioner
Q3 Please tell us which part of the sector your submission represents	a registered clinical dental ,
submission represents	technician a registered dental technician
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Page 3: Area one: new core recertification programme

Q4 What, if anything, do you like about our proposed core recertification programme?

Area 4. Registration, qualifications, and CPD should be maintained at all times

Phase two consultation on recertification

Q5 Is there anything about our proposed core recertification programme you would change?

Yes,

Please explain .:

Area1. I believe annual CPD and peer-contact should remain and a minimum set number of hours. Current CPD year attendance could be set to 15 guite easily. Area 2. A mandatory 2 year mentoring does bring to question the qualifications standards set by the qualifying authority. Should the teaching /learning programme be extended? Otherwise who mentors and what cost would be associated and who regulates the mentor group - not everyone can teach! Area 3. I support the eye checks but not every 2 years- there are costs as well as ongoing CPD and CPR recert every two years. make the eye check three yearly for 50 and overs. I believe cataracts and glaucoma issues arise in the 5th decade. Area 4.- Clearly there are serial offenders who will require extended recertification programmes. Unless practitioners are qualified and registered then flouting of these requirement should be met with significant penalties.

Q6 Do you support our proposal to change the recertification cycle to 12 months?

Yes.

Please explain.:

For some practitioners it can be difficult and or costly to find CPD providers. I believe 2 year cycles would be the way to go and that would allow for changes in a practioners working routine - illness, holidays etc. Either way the CPD and per -contact is still kept up to date.

Q7 Do you think our proposed core recertification programme should include a requirement for practitioners to complete an online open-book assessment of their technical and clinical knowledge and skills?

No,

Please explain .:

There are no guarantees that online assessment is completed by the practitioner. So you wouldn't necessarily be getting an accurate assessment. Far better they attend say local branch meetings and maybe present a single case study. It need not be onerous but would at least have them thinking about what they are doing and how they practice - after all the best way to learn something is to teach it!

Q8 If a proposal about an online open-book assessment of a practitioner's technical and clinical skills and knowledge is supported, how often should practitioners be required to complete an assessment?

Respondent skipped this question

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Q9 Do you have other proposals about our proposed core recertification programme you would like us to consider? Please explain.

I believe the accreditation for the various oral health practitioner programmes could be more fully established and that many of the concerns raised here could be settled. As we have moved to a more academic qualification the loss of the apprenticeship of learning appears to have created some voids or and a few bad habits. I believe the practitioner who signs the fitness to perform their duties should be accountable and responsible to meet those requirements. In an ageing population maybe practitioners over 60 should have a two yearly health check from their Gp. Some are prepared to leave it go and problems could arise. After all patients should be treated by practitioners who are mosly healthy and have their finger 'on the pulse' so to speak.

Page 4: Area two: support for new registrants

Q10 What, if anything, do you like about our draft proposals for supporting new registrants?

Yes support new registrants - we could offer them 'good mentor' contacts and for the first years arrange a 'drop-in' to assess their needs or answer questions - they need 'critical -friends'

Q11 Is there anything about the draft proposals for supporting new registrants you would change?

Yes,

Please explain.:

I believe the qualifications currently in place should enable our graduates to be 'safe' - I believe the mentorship should come from suitable qualified teaching persons who have mentoring experience and be empathic with the process of evaluation and mentoring

Q12 Do you think the proposed two year minimum period for the mentoring relationship is:

too

long

Please explain.:

I think it could be a variable process where some new practitioners are 'very good' and others might be a little slower.

Q13 Do you think all new registrants should participate in a mentoring programme, or are there some new registrants who should not be required to participate in a mentoring programme?

Yes,

Please explain.:

Yes I think all could participate in a form of mentoring programme unless other found to be highly incompetent.

Q14 Do you have other proposals about supporting new registrants you would like us to consider? Please explain.

Maybe supporting documentation about their personable skills, patient handling, process, file keeping etc.

Page 5: Area three: addressing health-related competence decline concerns

Q15 What, if anything, do you like about our draft proposals for addressing health-related competence decline concerns?

Respondent skipped this question

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Q16 Is there anything about the draft proposals for addressing health-related competence decline concerns you would change?	No
Q17 Do you have other proposals for addressing health-related competence decline concerns you would like us to consider? Please explain.	Respondent skipped this question
Page 6: Area four: addressing recurring non-compliant Q18 What, if anything, do you like about our draft proposals for addressing recurring non-compliant practitioner behaviours?	ant practitioner behaviours Respondent skipped this question
Q19 Is there anything about the draft proposals for addressing recurring non-compliant practitioner behaviours you would change?	No

Page 7: Final thoughts and comments

would like us to consider? Please explain.

Q20 Do you have other proposals for addressing

recurring non-compliant practitioner behaviours you

Q21 Do you have any other comments, suggestions or information you want to share with us about the draft proposals for improving our approach to recertification?

Respondent skipped this question

I believe- the CPD is kept up, at least one case presentation every two years either at local or national level, CPR and first aid courses attended every two or three years. A critical friend/mentor for the graduands for one year but extended to two where required.