

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

Q1 This submission was completed by:

Name J Neil Waddell

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 technician

a registered dental technician

Page 3: Area one: new core recertification programme

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

Nothing

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

### Yes.

Please explain.:

You are imposing a huge compliance burden on practitioners which will not necessarily result in improvement in competence. I doubt that it will reduce the number of complaints, just push up compliance costs. You are further compounding the problem by the proposal for - "We will require every practitioner to upload a written attestation prepared by their professional peer when they renew their APC". This places a further burden on the practitioner's peers. How do you know that it is not the blind leading the blind. How is the Council going to assess these attestations and PDPs and PDAs? Who is going to decide what is the minimum standard? I can see any move by Council to sanction a practitioner ending up in court. Council should drop the peer review component.

# Phase two consultation on recertification

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

## No.

Please explain .:

A 12 month cycle is too short. It should be at least 24 months to allow practitioners time to achieve their planned outcomes.

**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.:

The process of passing an open-book exam will not in itself improve competence. Just impose a time consuming burden on the practitioner. The moment you write the book it is out-dated and who is to say the Council's book is correct? The cost to the Council of updating the book each year will be high, which will be passed onto the practitioner in APC fees. If you really want to measure a practitioner's competence, you need to physically supervise/assess them in their practice. Anything short of this is just a "paper shuffling" / "copy the answer" exercise.

**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?

# **Every five**

## years

Please explain.:

If the Council insist on this process, delay it as long as possible. Also gives time for Council to update the book.

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

Respondent skipped this question

Page 4: Area two: support for new registrants

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

Respondent skipped this question

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

Respondent skipped this question

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

Respondent skipped this question

**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?

Respondent skipped this question

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

Respondent skipped this question

# Phase two consultation on recertification

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?

Nothing

**Q16** Is there anything about the draft proposals for addressing health-related competence decline concerns you would change?

## Yes,

Please explain.:

Drop the whole proposal. It is draconian, not workable and will simply enrich the optometrist industry. Best practice today is for the practitioners to wear a magnification system while working on a patient or working on fine detail tasks in a laboratory. I would estimate that at least half of practitioners under the age of 40 are already wearing glasses for normal day time use, yet most use a magnification system to carry out their practice when appropriate. Just because you mandate an eye examination, doesn't mean the practitioner or even buys a magnification system, does not mean they will routinely use it in practice. How are you going to police that?

**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 practitioner behaviours

**Q18** What, if anything, do you like about our draft proposals for addressing recurring non-compliant practitioner behaviours?

Respondent skipped this question

**Q19** Is there anything about the draft proposals for addressing recurring non-compliant practitioner behaviours you would change?

Respondent skipped this question

**Q20** Do you have other proposals for addressing recurring non-compliant practitioner behaviours you would like us to consider? Please explain.

Respondent skipped this question

Page 7: Final thoughts and comments

**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