

13 June 2014

John Hayes MP  
Chairperson  
Foreign Affairs, Defence and Trade Committee  
Bowen House  
Parliament Buildings  
WELLINGTON 6160

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Dear Mr Hayes,

**UNESCO Asia-Pacific Regional Convention on the Recognition of Qualifications in Higher Education**

Thank you for your letter of 20 May 2014 about the UNESCO Asia-Pacific Regional Convention on the Recognition of Qualifications in Higher Education. You advise that some migrants are frustrated when their qualifications are recognised by the New Zealand Qualifications Authority (NZQA), but assessed by the relevant responsible authority (RA), as not meeting its requirements for registration. You also ask about collaboration between NZQA and the Dental Council (Council), and seek information on the current practices in registering internationally qualified applicants.

**Role of health responsible authorities**

Under the Health Practitioners Competence Assurance Act 2003 (the Act), the primary role of Council is to and protect the health and safety of the public by ensuring that registered oral health practitioners are competent and fit to practise their professions.

Council regulates dentists, dental specialists, dental therapists, dental hygienists, clinical dental technicians and dental technicians.

Section 15 of the Act sets out the conditions that an applicant must meet in order to be registered as a health practitioner. It requires applicants for registration to:

- (i) have the qualifications prescribed by the responsible authority for the applicant's intended scope of practice; and
- (ii) be competent to practise within that scope of practice; and
- (iii) be fit for registration, which includes the ability to communicate effectively in the English language, for the purposes of practising within that scope of practice.

If an applicant satisfies the criteria of section 15, Council *may* grant registration.

Council prescribes and gazettes all prescribed qualifications for its scopes of practice. Section 12 of the Act requires accreditation and monitoring of all New Zealand educational institutions offering prescribed qualifications; and Council may monitor any overseas educational institution that it accredits to deliver prescribed qualifications.

### **Dental Council prescribed qualifications**

All Dental Council accredited prescribed qualifications for its general scopes of practice are a minimum of three years full-time undergraduate degrees at NZQF Level 7. Dental specialist accredited prescribed qualifications are a minimum of three years postgraduate programmes at NZQF Level 9. Two specialties' accredited prescribed qualifications require two undergraduate qualifications (dental and medical undergraduates) and a postgraduate qualification – in total the training could take up to 15 years.

### **Accreditation of prescribed qualifications**

Accreditation is the status granted by Council to oral health training programmes that meet prescribed educational quality standards. The purpose of accreditation is both to assure the quality of education and training and to promote continuous programme improvement.

Council and the Australian Dental Council (ADC) have established a joint accreditation committee for the purpose of accrediting and monitoring Australasian educational programmes to enable the maintenance of common standards across both countries.<sup>1</sup>

Synergy between the accreditation processes, and other standards, between New Zealand and Australia is crucial to Council because of the Trans-Tasman Mutual Recognition Act 1997 (TTMR). TTMR recognises Australian and New Zealand registration standards as equivalent, and allows registered oral health practitioners the freedom to work in either country. Alignment, wherever possible, and confidence in the standards must be maintained to protect the health and safety of the public.

Council monitors 19 New Zealand programmes across the oral health professions.

Council jointly approves the accreditation standards for programmes with the Dental Board of Australia, setting the minimum criteria against which education and training programmes will be assessed for accreditation purposes.

Programmes are accredited on a cyclical basis (5-7 years), with annual monitoring of the programmes through reporting. The accreditation teams consist of senior academics (Australian for New Zealand programmes) professionals peers registered in the relevant scopes of practice, and a laymember.

The accreditation standards are regularly monitored and modified, and the two jurisdictions are currently undertaking an extensive review of the accreditation standards. This involves benchmarking against similar international accreditation bodies, best practise guidelines, and research on educational trends and quality assurance. This provides Council with a robust system to assure itself of the quality of its New Zealand and Australian prescribed qualifications.

Council has prescribed qualifications from other overseas jurisdictions. The overseas qualifications recognised as prescribed qualifications, are from jurisdictions where similar accreditation systems for its oral health programmes exist.

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<sup>1</sup> The Australian Dental Council is contracted by the Dental Board of Australia to undertake the accreditation function under the National Registration and Accreditation Scheme.

Acceptance of another jurisdiction's accreditation system involves comparisons of the accreditation body's accreditation standards; accreditation policies and processes; robustness of its governance structures and decision making processes; observing accreditation site visits to ensure the standards and policies are applied; attendance at governance meetings; and various interviews with stakeholders. In addition, comparison of the subject jurisdiction's scopes of practice, sets of competencies for new graduates, and recertification processes are undertaken. The overall objective is to ensure that the accreditation process and level of education is at least the same standing as New Zealand prescribed qualifications; and comparability of scopes of practice (activities allowed to be performed).

Currently, Council recognises prescribed qualifications from the United Kingdom, United States of America, South Africa, Canada, and some Commonwealth countries accredited by the General Dental Council in England. Council is in the process of finalising the recognition of Ireland's accreditation system for oral health programmes. The various prescribed qualifications for the scopes of practice can be accessed on our website at [dcnz.org.nz/dcScopesOfPractice](http://dcnz.org.nz/dcScopesOfPractice).

Council performs its monitoring function of overseas qualifications through periodic revalidation of the jurisdictions' accreditation systems and attendance at accreditation committee and governance meetings between the various jurisdictions.

The accreditation and monitoring processes employed by Council are both comprehensive and robust.

### **The collaboration between NZQA and the Council**

During a recent forum on the review of accreditation standards, Council agreed with the Committee on University Academic Programmes to identify and explore areas for closer cooperation to streamline quality assurance processes.

### **Registration of overseas applicants without prescribed qualifications**

Council has a responsibility under section 15 of the Act to ensure that an applicant who wants to register as an oral health practitioner is fit for registration.

#### *Fitness to register*

The criteria for registration as a health practitioner in New Zealand extends beyond the applicant's qualification. It also relates to the fitness of the applicant to be registered.

Section 16 of the Act sets out the fitness for registration criteria RAs must consider before registering an applicant as health practitioner. These include:

- The ability to communicate effectively for the purposes of practising his/her profession.
- The ability to communicate effectively in written and spoken English for the purposes of practising his/her profession.
- No convictions which may reflect adversely on the applicant's fitness to practise.
- No physical or mental health conditions which may prevent the applicant from performing the functions of a registered health professional.

- The applicant is not subject to professional disciplinary proceedings or under a disciplinary investigation or subject to any professional disciplinary order which may reflect adversely on his or her fitness to practise.
- Whether there is any reason to believe that the applicant may endanger the health or safety of members of the public.

The Council's Policy on English Competence and English Tests sets the English language benchmark to meet the fitness to register criteria.<sup>2</sup> The levels for a Council approved test differ slightly for individual professions, but the majority requires an International English Language Testing 7.5 average, and 7 in each band; or Occupational English Test A or B grade in each component.

### *Competence*

Under section 118 of the Act, Council is required to set standards of clinical competence, cultural competence, and ethical conduct to be observed by health practitioners of the profession. None of these areas fall within the mandate or expertise of NZAQ.

Section 15(1)(c) of the Act requires that before he or she may be registered, an applicant must be competent to practise within the relevant scope of practice.

### **Registration pathways for overseas applicants**

The following registration pathways are available to overseas applicants that do not have an overseas prescribed qualification.

#### *Individual assessment*

Section 15(2) of the Act allows Council to determine if an overseas qualification is "...equivalent to, or as satisfactory as, a prescribed qualification." This allows overseas applicants who do not have a prescribed qualification, but believe their experience and qualifications are equivalent to a prescribed qualification for their scope of practice, to apply for individual assessment.

Individual assessment involves an academic involved in the teaching of a New Zealand prescribed qualification, to which the qualification is compared, to assess the qualification curriculum and any further studies completed, to determine whether it is comparable to the New Zealand prescribed qualification. When undertaking an assessment, the applicants experience is taken into account.

For specialist applications, a professional peer registered in the scope of practice in which the applicant wishes to apply for registration, will also assess their clinical experience since graduation.

#### *New Zealand Dental Registration Examination*

Overseas applicants without a prescribed qualification, and who do not wish to have their qualification and experience assessed, also have the option to sit one of the New Zealand Dental Registration Examination, relevant to their profession. A pass in Registration Examination is a prescribed qualification and entitles the applicant to registration.

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<sup>2</sup> [www.dcnz.org.nz/Documents/Policy/DCNZPolicy\\_EnglishCompetence.pdf](http://www.dcnz.org.nz/Documents/Policy/DCNZPolicy_EnglishCompetence.pdf)

### **Overseas registrant statistics**

During the 2012/13 financial year a total of 297 new oral health practitioners were registered, of which 82 (27.6%) were overseas trained. The 2012 undergraduate cohort from New Zealand accredited programmes was 177. Council's 2012/13 annual report contains a breakdown of the new registrants' countries where their primary qualifications were obtained.<sup>3</sup>

A total of 3 individual assessment applications were received during 2012/13, of which one applicant was registered, one was pending at the end of the financial year, and one declined.

During 2012/13 a total of 52 dentists successfully passed the clinical component of the New Zealand Dentist Registration Examination which rendered them eligible for registration as a dentist. Two dental therapists and one dental hygienist passed the therapy and hygiene registration examinations.

### **Summary**

Council has the statutory responsibility of protecting the health and safety of the public, by ensuring all registered oral health practitioners are competent and fit to practise.

The assessment of whether applicants are fit and competent for registration is much wider than the mere recognition of qualifications.

Clearly defined registration pathways for health practitioners are defined within the Act, including applicants with overseas qualifications. Council has developed registration application processes to support the intent of these provisions.

In Council's view, the NZQA areas of expertise relate to the recognition of qualifications for the purposes of employment and immigration. NZQA has a valuable and complementary role to play within the wider educational sector, but does not have the profession-specific expertise and knowledge to assess whether the oral health programmes are of appropriate quality, reflecting contemporary practice, and fit for purpose.

Please do not hesitate to contact me if you require further information.

Yours sincerely



Marie Warner  
Chief Executive

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<sup>3</sup> Dental Council Annual report 2013; p23. Available on [www.dcnz.org.nz/Documents/AnnualReports/DCNZ\\_Annual\\_Report\\_2013.pdf](http://www.dcnz.org.nz/Documents/AnnualReports/DCNZ_Annual_Report_2013.pdf)