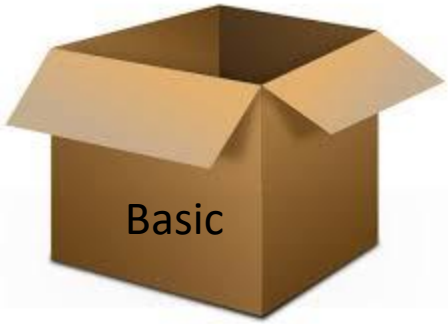
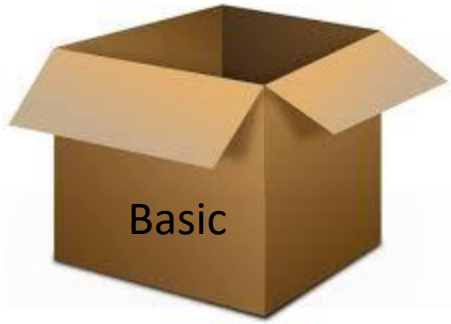
Framework



Who decides on which box the procedures go into
Potential for over-reaching by those in authority

Who has access to each box
Restrictions



Can procedures be moved from one box to another?
Technology can simplify procedures over time.
Can procedures be moved to a “higher” box due to higher complaints?

IF we have a very complex procedure in one box, will that restrict access for the whole box? Can’t we have clear instructions instead?
Eg; If a high morbidity, possible mortality procedure introduced into the box, will it restrict those who have access to it?
Can we have clear competency requirements for each procedure rather than a general categorisation?

HOUSE TO VOTE

DO WE NEED THESE BOXES?

Is a framework for competency needed?

Certificates of Competency

TWO QUESTIONS

1. Is there an issue with quality of care
2. Is CoC the **best** way to improve clinical quality

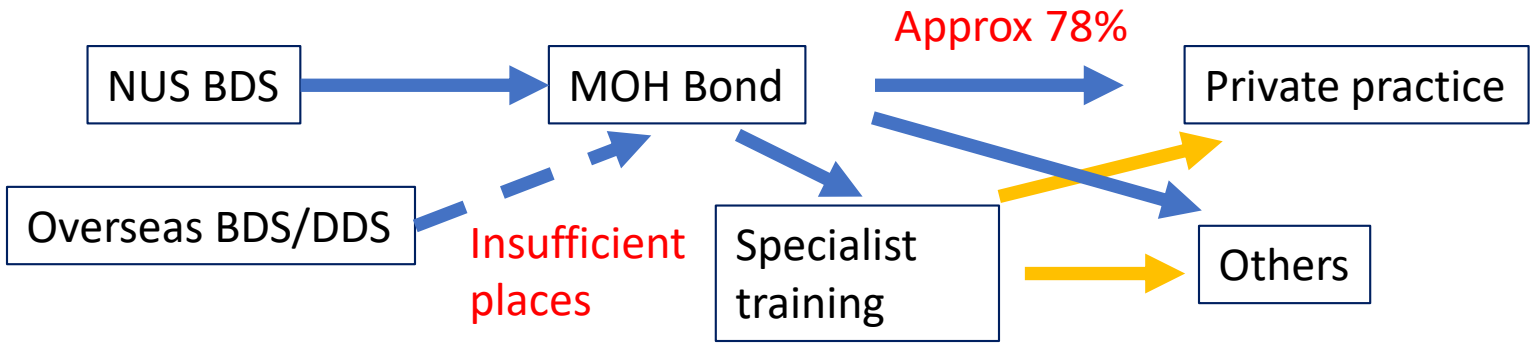
Is there an issue with quality of care

Complaints -

- Inaccurate and incomplete assessment of quality of care.
- Likely a result of poor communication, ethical problems, services lapses rather than clinical lapses

Is CoC the best way to improve Clinical Quality

1. Who is responsible for training GPs to meet the needs of the population?



Is CoC the best way to improve Clinical Quality

2. Better training opportunities for Dental Officers

- Previous generations of GPs used to do many advanced procedures under bond
- Today, GPs under bond no longer carry out as many advanced procedures, if at all
- What has gone wrong and how does CoC solve this?

Is CoC the best way to improve Clinical Quality

3. Can CoCs meet the training needs of GPs

Eg; 85% of GPs carry out wisdom teeth surgeries and 46% of them do more than 4 monthly

Will there be sufficient CoC courses to train 85% new GPs in Wisdom teeth surgeries?

Is CoC the best way to improve Clinical Quality

4. Can CoCs be a form of restrictions and double standard

- CoC training places affected by CPE provider criteria and renewable accreditation by SDC
- COE for both training provider and GP with CoC

- Specialist training places determined by university
- no need to satisfy the specialist register retention criteria