

February 2nd 2007

NZIDT

NEWS LETTER

New Zealand Institute of Dental Technologists Inc.

With the 2006 Conference and Scientific programme not much more than a memory, planning is already underway for the 2007 event. General consensus seems to indicate that the 2006 programme was successful, and satisfied the expectations of most participants. There are always going to be some who feel disillusioned, and that has to be accepted. Regardless of how hard the organizers try, they will never please everyone. Members need to inform the programme organizers of their concerns and make some suggestions for future events. Conferences are one of only a few opportunities to gather the requisite number of CPD points, and all Dental Technicians should be very aware by now that these points are absolutely essential to their continuing to practice as Dental Technicians. As has been noted before, this is not just a New Zealand problem. Health authorities around the world have introduced these schemes to develop and maintain a safe environment for all patients and consumers. An article on page 3 inside gives a graphic example of the serious nature of this 2003 Act of Parliament. Thanks to the NZDA and Dr Symes for allowing this reprint.

Another case in January's "DCNZ News" illustrates again how seriously we all need to take these new requirements. The Dental Council website is a great source of information, but branch meetings to discuss and work through these topics will give a greater insight, and at the same time should qualify for peer contact points.

Watch the NZIDT website for any information that the executive feels may be important for you to know about early, or that may need your comments on.

From Your President

Greetings Techo's

Another year ahead with all the usual challenges. One of this industry's big challenges that is very concerning, is the amount of work going off shore. This affects us all, employers, employees, self employed, students and even academics. We are all in this big boat together. Huge dental laboratory factories in China, the Philippines, Indonesia and Mexico, all with very cheap labour, are becoming more sophisticated with their techniques, quality control and marketing. In these days of global free trade, government intervention is extremely unlikely. So for us to succeed in business we need to excel in our quality and service and hope that these factors are sufficiently out weigh the pricing issues, and keep the work in New Zealand.

The dental technology world is now really global, and the opportunity for technicians to travel overseas for study or to work, has never been better. Currently two overseas dental technician organizations are corresponding with the NZIDT and both are advertising their conferences. The Australian Dental Prosthetists Association is very active, and partly because of "Continuing Professional Development" requirements, are holding numerous events, all of which are advertised on their website www.adpa.com.au. Next and by far the largest is the "International Federation of Denturists" (IFD) who are presently advertising their AGM and "World Symposium on Denturism and Dental Technology" to be held in Great Britain during May. Their website is www.denturism2007.com

Have a happy and prosperous new year

Wendy McMillan

HENRY SCHEIN SHALFOON

MOUTHGUARD SEMINAR & HANDS ON WORKSHOP

(limited to 30 persons)

Date Saturday 24th February 2007 - 9-00am - 5-00pm

Cost \$395.00 + GST

Presenter :- Dr Brett Dorney

a general practitioner from Sydney with a passion for sports dentistry

Accreditation Approved

For further information please contact "Bronwyn" at Henry Schein Shalfoon

Phone 0800 SMILES 0800 764 537

KIND SPONSORS OF THIS NEWS LETTER

THE KIWI SAVER BILL

Whatever your views on the Kiwi Saver Bill, it is fait accompli, and due to start on 1st July 2007

The employer has to bear the full compliance costs of running this scheme, as well as the full responsibility of advising their staff of their rights. Getting things wrong or neglecting to inform new staff adequately can result in a \$4500-00 fine.

Any employer needs to study the Bill now, so as to be ready to implement the scheme on time and correctly come July 1st. Early discussions with your accountant would seem prudent.

More bad news for the employer is that the employer can not join the scheme by being self employed, neither can a partner in a partnership join, or a shareholder employee join. Sadly this means the employer can not gain any direct benefit from the scheme, even though he bears all the cost.

The major features of this scheme are:-

Employers can contribute to the scheme on behalf of their employees.

Employees may contribute either 4% or 8% of their salary to the scheme.

New employees will automatically be enrolled in the scheme but will have the opportunity to leave the scheme after 8 weeks.

The government will contribute \$1000 per member on registration, but this sum is locked in until the member reaches age 65.

members can arrange that some portion of their contributions can be directed towards paying of their mortgage.

The IRD will collect the contributions via the PAYE system, so late Kiwi Saver payments will be treated with the same vigor as late PAYE payments and with similar penalties.

As employer contributions will be a tax free bonus for the employee and a tax deductible item for the employer, there will no doubt be pressure to include employer contributions during wage negotiations

During the early middle ages in Europe (500-1000 AD), surgery, medicine and dentistry were generally practiced by Monks, the most educated people of that time.

Between 1130 and 1165 a series of Papal edicts prohibit Monks from performing any type of surgery, bloodletting or dentistry. Barbers often assisted Monks in their surgical duties by providing sharp instruments. After the edicts, barbers assumed many of the Monks surgical duties, blood letting, lancing abscesses, extracting teeth etc. In 1210 a guild of barbers was established in France. From there barbers evolve into two distinct groups, surgeons who were trained to perform complex surgery, and lay barbers who performed more routine services, including basic dentistry, blood letting and shaving.

Dental Council of New Zealand Codes of Practice Compliance Audit

The Health Practitioners Competence Assurance Act 2003 (HPCAA) requires the Dental Council to protect the public by ensuring that registered health practitioners are fit, safe and competent to practice.

Under the HPCAA the Dental Council is responsible for setting the standards of clinical competence, cultural competence and ethical conduct to be observed by practitioners. These professional standards are set out in the Codes of Practice and in Council Statements and are available from the Professional Standards section of the Councils website www.dcnz.org.nz.

All practitioners should be familiar with the codes and ensure they are adhering to the minimum standards set out within the codes. Practitioners who are employees and limited from meeting all aspects of a code by their provided working environment are advised to ensure that they are complying with all areas where they have control and responsibility. Refer to the Council policy statement on compliance with codes of practice and Council statements on the "what's new" page of the DCNZ website.

2006 saw the first round of compliance monitoring for dentists and dental specialists. During the 2007 APC round the compliance monitoring, including a small number of practice audits, will be extended to all workforce professions. The attached article (NZDA News Vol132 Nov. 2006) was written by Dr Graham Symes, a Wellington dentist, following an audit of his practice and is rewritten with permission from the NZDA. *Dr Symes has kindly offered to be a contact point for those practitioners randomly selected for audit during the 2007 round of compliance monitoring.* please contact DCNZ on :- (04) 499 4820

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Vehicle Leasing

Owning or leasing ?? Which option will deliver you the best results ?

From a tax point of view, the difference between ownership and leasing is small over the total term of the lease.

As a result of the newly introduced higher depreciation rates for motor vehicles, ownership offers better tax advantages in the first two or three years. Brand new vehicles depreciate at 36% in the first year.

Tying up capital funds in motor vehicles can mean a significant deficit in cash flow, and leasing will come in to its own then.

Did you receive your 2007 NZIDT Diary ?
If you were at the conference, it was with your registration
If you were not at the 2006 conference and want a diary now
ring the president, Wendy McMillan on
(09)-846 8886

How I Survived a DCNZ Code Compliance Practice Audit

by Graham Symes

The Health Practitioners Competence Assurance Act 2003 has brought about many changes in the way the dental workforce is regulated, most noticeably the formation of the separate boards for dentists, dental therapists, dental hygienists and dental technicians, and defining scopes of practice for these workers. The main effect of the Act on practicing dentists has been the requirement for continuing professional development (CPD) and the recording of a minimum number of CPD hours and peer contact interactions. A little known but no less important effect of the Act has been the instigation by the DCNZ of random practice audits to assess compliance with NZDA/DCNZ joint codes of practice (CoPs). These joint CoPs are NZDA codes that have been deemed crucial enough to be adopted by the DCNZ as the minimum standard of practice expected of dentists. The joint codes are: Patient Information and Records, Conscious Sedation for Dental Procedures, Medical Emergencies in Dental Practice, Informed Consent, Cross Infection in Dental Practice, and Working Relationships with the other dental professionals.

The DCNZ is shortly expected to adopt the NZDA code on Transmissible Major Viral Infections as a joint code, and we can expect that more joint codes will be added to the list in the future and be subject to the audit process

On receiving my application form for this year's Annual Practicing Certificate, I also received a letter from the DCNZ advising me that I was one of 80 dentists (5% of the work force) chosen at random to complete a checklist to assess compliance with the joint codes. The Council also informed me that a further five practices would be randomly chosen for a visit to assess compliance. The checklist was a series of questions relating to the codes with a requisite yes or no answer. Although I had some concerns over the correct interpretation of the codes, or indeed the relevance of some of the questions asked, I duly completed the checklist with a yes for every question and mailed it back to the DCNZ

I thought at the time that as there would only be five practices visited, the likelihood of my practice being chosen for a random audit was very low. I was rather amazed to receive a further letter advising me that I was to have a practice audit.

This letter advised me that DCNZ's professional advisor, Dr Dexter Bambery, would call me over the next few days to arrange a suitable time for the audit with the aim of causing minimal interruption to my practice. Waiting for the call I began to wonder about all the things I could improve on, and how long it would take me to implement any changes. However rational thought indicated that the audit was inevitable and that I should

not change anything; if my practice had shortcomings then the audit would reveal these and I could take any remedial steps.

The following week I arranged to have Dexter first meet my practice manager and head nurse for about one hour to review my practice procedures, and then to meet me individually. Dexter looked into our handling of patient information and the security and storage of that information. As my practice is computerized, my records are legible and time-logged, and information recorded at an earlier date could not be modified.

Infection control was closely scrutinized by Dexter including; the single use gloves, decontamination of instruments prior to sterilization, appropriate handling of contaminated waste, and appropriate storage of instruments. Validation of my autoclaves was also closely inspected. Dexter and I had differing views on what is the best way to validate (steam clocks vs. spore incubation), but we agreed that validation should be regular and frequent.

Dexter and I then had a meeting for a further hour where we worked through the checklist. As I provide intravenous sedation I had to prove I had completed the required postgraduate training in sedation, the New Zealand Resuscitation Council level 4 qualification with intubation skills, and that my emergency kit was appropriately stocked and readily accessible.

I was also required to produce the signed working relationship agreements that I have with my hygienists, naming the individual dentists in my practice responsible for providing clinical guidance and also the procedures for referral of patients to them for treatment which was within their individual scopes of practice.

The outcome was that my practice was compliant with all the joint codes of practice and Dexter has congratulated me for this. Thus far I have resisted using, as part of my marketing strategy, the fact that my practice is one of only five practices in the country validated and certified by DCNZ!

Overall the process was not unlike visiting the dentist; you are worried and get worked up in the lead up to the event, but when it is all over you realize it was not that bad after all. It is pleasing that the audit has had a very positive effect on my practice; my staff have become more acutely aware of the joint codes and what is expected of them. I am sure this has made my practice a better place for all my staff and also for supporting public confidence that dental practice in New Zealand is up to world class standards.

2007 executive

President

Wendy McMillan
P O Box 15 518
New Lynn
Auckland 09-486 8886

Vice President

Craig Metcalfe
383 State Highway North
Levin 06-368 8451

Immed Past Pres.

Sherrian Barr
P O Box 14 151
Kilbirnie
Wellington 04-387 9000

Treasurer

Barry Albury
1996 Akatarawa Road
RD 2
Upper Hutt 04-526 8191

Committee

Graham Askew
P O Box 556
Whangarei 09-438 3671

Anne Collis
Oral Health Centre
16 Tuam St
Pvt Bag 4710
Christchurch 03-364 1961

John Aarts
University of Otago
Dept. Oral Rehabilitation
P O Box 647
Dunedin 03-479 7060

Andrew Devine
17 Oak Place
Poriti
Napier 06-844 8024

Stephen Hellberg
P O Box 3059
Christchurch 03-365 5208

Steve Russell
P O Box 39 004
Petone
Wellington 04-566 4712

Barry Williams
17 A Lincoln Court
Palmerston North 06-377 6658

Avian Flu

The Avian Flu scare has waned, but not gone entirely away. Deaths are still being recorded that are definitely Avian Flu, but the virus has not yet developed the ability to jump from human to human. Indonesia, which is not too far away, has recorded almost 60 known deaths from this strain of flu, the most recent in the second week of January this year. Winter is when we experience most flu epidemics, and now is winter in the Northern hemisphere.

Good hygiene practiced by everyone is the most effective way to minimize flu outbreaks.

YOUR HAPPY HEART ?

Cardiovascular disease remains top of the list for deaths annually in New Zealand, but it doesn't need to be. Most heart disease is preventable. Most people can significantly reduce the risk of heart disease by improving their lifestyle. Simply by increasing their amount of regular physical activity, eating a heart healthy diet and if they smoke, quitting, will put most people on the road to better heart health. Some risk factors, like gender, age, ethnicity and a family history of heart disease can not be easily altered. Dental technicians, because of the sedentary nature of their occupation, probably have an increased risk, and should heed the heart foundation advice. The Heart Foundation is running a campaign during Valentine's week (12 to 18 February) to highlight the Foundation's message of a healthy lifestyle, and is encouraging all New Zealanders to **wear red for heart** on Valentine's day

Waikato/Bay of Plenty Branch

This Bay of Plenty/Waikato branch was resurrected in 2005 prior to the introduction of the new Dental Act. A number of Technicians from the wider Bay of Plenty / Waikato area, gathered at a local watering hole in Hamilton for discussions on the new Act and the repercussions we could expect. It was effectively from those meetings that the local Branch was reformed. We now have 23 financial members, consisting of Clinical Dental Technicians and Dental Technicians. We currently meet 4 times a year, where we enjoy a meal together followed by the meeting, some even managing to get a round of golf in before the meeting.

The committee is endeavoring to organize speakers for these meetings from the local dental fraternity, as well as Dental Company presentations, but we also encourage peer discussion on cases of interest.

We are a proactive branch and our aim is to help and encourage our members to earn their CPD points, while increasing our knowledge base and making us all more effective and efficient professionals in our chosen fields

President:- Chris Bell - Rotorua
Secretary:- Derryn Brunton - Hamilton
Treasurer:- John Parkin - Hamilton

This News Letter is published quarterly if possible. Items of interest are earnestly sought, as are advertisements for buying or selling, situations vacant or situations wanted etc. Please forward anything even slightly relevant to :-

The Secretary NZIDT, P O Box 568, Blenheim

Phone (03) 578 4275 Fax (03) 578 4230 email nevillebrown@clear.net.nz