

## Removal of Restorative treatment age for Oral Health Therapists

As a Dental Therapist with over thirty years' experience within the public service I have serious concerns with this proposal:

Firstly I suggest this proposal should include Dental Therapists.

Dental Therapists within the community Oral Health Service have a high level of restorative skills due to the number of years of practice. In fact many of these therapists mentor and supervise the Oral Health Graduates and Oral Health Therapy students on placements. There appears to be no proposal to include Dental Therapists which seems discriminatory in my view. Surely they should have the same opportunities and therefore this proposal should include them.

There are Dental Therapists who have been grand-parented into the adult scope. Are they going to be given the opportunity to undergo the same training as an Oral Health Therapists? Again is this discriminating against these current Dental Therapists by denying that training.

I suggest that with the right training and support both Dental and Oral Health Therapists are capable of treating adults and eventually I would like to see this service reaching those most in need in our community. However if the idea of this is to channel Oral Health Therapists into private practice then we are missing the point.

Secondly:

I would want to know if we are comparing apples with apples when quoting other countries. What training do these Therapists receive in these other countries and what support do they have in place upon graduation. Currently a lot of time is invested with new graduates in the COHS. I doubt very much if this would happen to the same degree in private practice which raises the question of the quality of care that is being delivered.

Thirdly:

I think energy needs to be focussed on ensuring the Oral Health Therapists have a training program in place upon graduation whether it is in private practice or within the public service. Perhaps the NZDC would be better to write a proposal to get this in place before moving to increase the current scope.

Finally:

I am also concerned that this would move critical staff out of the COHS to the detriment of our children and put strain on already stretched services.