

To Whom It May Concern,

I am writing to comment on the proposed removal of the age restriction for the oral therapy scope of practice, which is currently under consultation with the New Zealand Dental Council.

I can see advantages to the removal of the age restriction, in that, where oral health therapists are currently offering simple restorative treatments to those below 18, it may extend the status quo for these patients where simple restorative procedures are required. It will enable easier access to preventive care in those patients who do not have complex medical, social and oro-facial concerns. I see that the age restriction has been removed in other countries with positive effects.

However, there are also several possible negative consequences to removing the age restriction. My greatest concern is that the workforce who hold a BOH and are dual trained may lean their focus towards adult patients, to the detriment of the thousands of children who already need, and are waiting for, dental care. We have appallingly long waitlists for children's dental care in many DHBs around New Zealand - surely it makes sense to continue therapists' focus towards treating the unmet need in children, rather than redirecting their care provider towards treating adults, when there are already other providers available to treat adults.

We all know the funding issues associated with privately funded dental care for adults. Perhaps a government subsidy for low- and medium-income adults would better enable more adults to access high-quality dental care and encourage more preventive visits. It is hard to imagine that oral health therapists will be able to provide lower cost dental care for adults compared to such care being provided by a dentist. Overhead costs such as operator, sterilising, materials and staff remain the same, regardless of who is providing the care.

Suitability of an oral health therapist to provide high quality care is also a concern for many dentists, including myself. This is not said to devalue our oral health therapists - hygienists and oral health therapists have fantastic and unique roles in providing oral health care in our community, are fabulous at what they do, and are certainly valued by myself and my peers. The concern I hold relates to the relative differences in both the admissions process to Bachelor or Oral Health compared to Bachelor of Dental Surgery, and with the comprehensiveness of the training involved in each degree. Dentists are trained firstly with sound understanding of chemistry, biology and physics, which lead up to understand the complexities involved with many health conditions, medications' effects and interactions, medical emergencies and their management, risk management, ethics, biomaterials use, radiography and oral diagnoses and treatment planning, as well as a far more comprehensive development of our restorative skills compared to the BOH programme.

While for low-risk and non-complex dental patients, the skills of oral health therapists may be totally appropriate, for those most at risk in our community who tend to be poorer, sicker and have more complex treatment needs and fewer resources, I am concerned that oral health therapists will not have the skills and depth of understanding to treat such complex patients without causing more harm than good. A comment seen recently, made by an oral health therapist stated that the removal of the age restriction will help increase access of relief of pain by those most vulnerable. To me this shows a lack of understanding of much of the

above, as true dental pain is rarely alleviated by simple restorative measures that are included in the existing scope. It is clear that this person does not represent all oral health therapists, but it does raise my scepticism to the issue of this aspect of our workforce being suitable to treat our most vulnerable.

Primum non nocere - first do no harm.

I trust that my submission will be treated in good faith, and our Dental Council will explore other avenues for increasing accessibility of high quality dental care to all members of our community.

Yours faithfully,

Catherine Gill
Dentist