

[Redacted]

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Page 2: Your demographics

**Q1** Your details

Name

**Charlene Borges**

Email

[Redacted]

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**Q2** Your submission is in the capacity as

**dentist or dental specialist**

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Page 3: The proposal

**Q3** Do you agree or disagree with the proposal to remove the 18-year age limit for restorative activities from the OHT scope of practice including: accredited, gazetted programmes allowing oral health therapists to perform restorative treatment on patients 18 years and older an exclusion, such as "Restorative treatment on patients 18 years and older", being placed on oral health therapists' scopes of practice until they complete an accredited adult restorative programme which will allow them to apply to have the exclusion removed (noting that the activities registered oral health therapists can currently perform within their scope of practice remain unchanged).

**Strongly disagree**

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Page 4: Your support

**Q4** Please describe why you support the proposal

**Respondent skipped this question**

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Page 5: Your concerns

**Q5** Please describe your specific concern/s with the proposal

There is already a great need for our children population to be treated which is not being addressed. OHTs mostly want to work in private practice as hygienists but not in the community also addressing the oral health needs of under 18yos, which they are already trained to do. There are a sufficient number of trained dentists to treat the adult population

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Page 6: Details about OHT scope, qualifications and competencies

**Q6** Do you have any specific feedback on the proposed amendments to the OHT scope of practice, prescribed qualifications or competencies as set out in appendices 1 & 2? **No**

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Page 7: Specific comments on the proposal

**Q7** Please provide us specific comments related to the OHT scope, qualifications and competencies. **Respondent skipped this question**

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Page 8: Anything else

**Q8** Do you have any further comments on the proposal? **Yes**

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Page 10: Last thoughts

**Q9** Please provide us your feedback

I get children referred to me that OHTs cannot/ do not want to treat but I manage to treat. Why do these children need to be referred when OHTs are trained to work with children. I also would not be comfortable with an OHT diagnosing and doing full scope adult treatment, which takes 5 years of training and ongoing continuous learning.

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