

[Redacted]

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Page 2: Your demographics

**Q1** Your details

Name

Kim

City/town

[Redacted]

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

## Consultation on the age limit for restorative activities in the oral health therapy scope of practice

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

New Zealand's aging population and low income adults frequently present with complex medical conditions that require extensive treatment planning and often multidisciplinary care. I do not believe the 3 year BOH degree is adequate training to provide this level of care and responsibility. Nor do I believe any add-on education to the BOH degree will be adequate training to treat such complex cases or make accurate diagnosis. Unless the participants with a BOH complete a Bachelor of Dental Surgery I do not believe they will have adequate training for such cases. Any complications from inadequate diagnosis or treatment will have life long effects for patients and I can not agree to putting them at risk of this.

One of the key roles of the NZ BOH workforce is to provide care to patients under 18. Already it is difficult to get high levels of therapists with a BOH to treat our New Zealand children, with many working as hygienists in private practice. The waitlists at DHBs around the country for dental general anaesthetics for children under 18 continue to increase. Therapists working for DHBs are under a lot of pressure due to short staffing and poor pay to treat our children as it is. Prevention and oral health education of children is fundamental in reducing the burden of disease into adulthood. We should not shift the workforce away from our future generations especially when their care is in such a high demand. More support and funding should be given to therapists working in DHBs to take care of our children and reduce waitlists.

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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? **No**

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### Page 10: Last thoughts

**Q9** Please provide us your feedback **Respondent skipped this question**

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