

[REDACTED]

[REDACTED]

[REDACTED]

Page 2: Your demographics

Q1 Your details

Name **Rebecca Chapman**

City/town [REDACTED]

Email [REDACTED]

Q2 Your submission is in the capacity as **dentist or dental specialist**

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**

Page 4: Your support

Q4 Please describe why you support the proposal **Respondent skipped this question**

Page 5: Your concerns

Q5 Please describe your specific concern/s with the proposal

I'm unsure why this change was proposed and do not see how it will benefit the oral health of the New Zealand population. We can all agree that there is great unmet need, particularly in the lower socioeconomic group and that great disparities exist between these groups. However, there is no shortage of dentists/dental specialists in New Zealand currently to provide this treatment. There is also a great unmet need in the paediatric population (long waitlists, being behind in recalls) which dental therapists/hygienists are currently able to treat. The Community Dental Service, which Dental Therapists are working for have an important role in the early stages of dental care for our paediatric population, and my concern with extending their scope is that it will decrease the number of available dental therapists to treat these children and worsen the current state these waitlists are in. I agree that there is greater need for dental treatment for adults in New Zealand but do not think that it should be able to be provided by a group of clinicians with a limited scope of training. I find many of my treatment decisions are based considering all options (not just restorative) and it would be difficult to make the best treatment decision for the patient without the full scope of dental training. The treatment needs of the lower socioeconomic groups of patients, whom I am assuming are who this proposed change is aimed to benefit, are also usually not basic restorative treatments and consists of more oral surgery and prosthodontic rehabilitation procedures which would still remain out of the scope of dental therapists if this change was to go ahead. It is great to see the issues of oral disparities being addressed at higher levels, but in my opinion, this is not the solution.

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**

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**

Page 8: Anything else

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

Page 10: Last thoughts

Q9 Please provide us your feedback

I am concerned that these submissions will not be being considered by the dental council and that changes will be going ahead regardless. The most valuable opinions on this should be from those currently in the work force and I hope that these responses will be considered before any major changes take place.
