

[REDACTED]

[REDACTED]

[REDACTED]

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Page 2: Your demographics

**Q1** Your details

Name	Jack Lintern
Company/organisation	[REDACTED]
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

<b>Q3</b> 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).	<b>Strongly disagree</b>
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Page 4: Your support

<b>Q4</b> 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

OHTs will not have the sufficient training to adequately treat complex dental issues that the adult population may present to them with. The ability to accurately diagnose, plan and treat complex dental issues is not able to be taught in a short course which is what is being proposed.

To gain entry into the Bachelor of Dentistry involved a very strict selection criteria and then 5 years of intensive study to then be able to adequately perform treatment. If OHTs scope is expanded I think it will lead to substandard dental care being provided to people who are most at risk and this will lead to treatment needing to be redone which will put further burden on the industry therefore ultimately having the opposite effect of why this is being proposed.

The effect that this proposal will have on the paediatric dental population is also worrying. Dr Bill O'Connor, NZDA president, reported at the most recent NZDA conference that in 2018, 29000 children had their teeth extracted and 7000 required dental treatment under general anaesthetic. This to me indicates that the school dental service is already failing and not able to meet the needs required of children in NZ. If OHTs are able to treat adults this will reduce the number of clinicians in the SDS which would further compound the current problem.

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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

This proposal has many flaws and will negatively effect both the adult and paediatric population. At present the SDS is struggling to provide effective treatment to children in NZ which is putting a huge burden on the public health sector. Takng clinicians out of this service to provide treatment(that they aren't trained to provide)to adults will only have a negative effect of both of these groups. If more focus is put on prevention by OHTs in children it will have a flow on effect to adults in future generations and lead to better oral health in NZ over all, which as Dentists is our ultimate goal.