

[REDACTED]

[REDACTED]

[REDACTED]

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## Page 2: Your demographics

### Q1 Your details

Name	MaryAnne Costelloe
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

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

Restorative dentistry on financially compromised is inherently very difficult in my view after having spent over 30 years doing this in a rural practice The skills acquired with a BDS would be the bare minimum in my view eg collapsed occlusion, Medically compromised but also the knowledge base for lateral thinking for problem solving and creative solutions for such patients

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? **Yes**

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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.

Comparing this exercise to that of orthodontic auxiliaries is unwise. Orthodontic patients are generally more affluent younger healthier without concurrent medical or social issues that would complicate treatment. I have also worked in a DHB alongside very capable therapists undertaking adult scope practice and noted many issues. Also with the greater no of BDS graduates I note that there will be almost an oversupply of dentists. It is already much easier to attract new dental graduates to a rural area

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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

Happy to answer other questions

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