

[Redacted]

[Redacted]

[Redacted]

Page 2: Your demographics

Q1 Your details

Name	Henry
Company/organisation	[Redacted]
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
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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

My concerns are that if they were to treat adults, then what is to happen to those children that are already in need?

There is already an extremely large demand for oral health therapists to treat children. If they had the ability to treat adults I do not see any incentive for oral health therapists to prioritise those already in need as they will have a financial incentive to treat adults. Many have already shifted to doing hygiene for momentary and quality of life reasons, so why offer another avenue for them to not treat the at risk children?

Another point is that it has been shown that money is the most significant barrier standing in the way for patients to receive dental care. I fail to see how offering another professional to provide restorative care will reduce overhead costs and therefore the cost of the restorations. It seems as though it will not fix the underlying problem of the cost, and so don't seem to really benefit the patient.

Finally, if for some reason the restorative work was to be cheaper through therapists, then why would people see a dentist if they had a cheaper option? My worry from this would be quality of care could potentially drop as they are not seeing professionals that have received an equal level of education. Care that therapists can't do might be missed and therefore be at the detriment of the patient's health.

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? **No**

Page 10: Last thoughts

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