



Page 2: Your demographics

Q1 Your details

Name	jennifer pelvin
Company/organisation	[Redacted]
City/town	[Redacted]
Email	[Redacted]

Q2 Your submission is in the capacity as **professional body**

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 agree

Page 4: Your support

Q4 Please describe why you support the proposal

We believe that that the barriers to oral health therapists providing services to adults are based on commercial barriers rather than professional abilities.

Page 5: Your concerns

Q5 Please describe your specific concern/s with the proposal **Respondent skipped this question**

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**

Page 7: Specific comments on the proposal

Q7 Please provide us specific comments related to the OHT scope, qualifications and competencies.

There are currently no age limits in restorative care being delivered by oral health therapists who have completed an approved course in Australia. Subsequently, Australia has not seen any adverse outcomes since it was established in 2009 in Victoria and in 2010 nationally. Graduates' ability and scope of practice should rest on their educational preparation and competency for practice and not on artificially imposed age limits without evidence. There is good evidence to show that oral health therapists can reliably determine the boundaries of their own practice and act accordingly. Sanctions for unprofessional practice are in place to manage deviations from expected standards. New Zealand was among world leaders when it removed age limits on dental therapy practice in 1988 and, despite the current lack of educational opportunities, this was a positive move. We strongly suggest that Dental Council of New Zealand regulation should not impose age limits on practice but enable practice to match educational preparation and competence: regulation should not contain wording that limits patient age and dental caries diagnosis and restorative procedures for oral health therapists

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

People in New Zealand are living with chronic dental pain and the lack of access to oral health care is a key concern for the practitioners and public. Having a highly skilled workforce of oral health therapists' to assist in meeting the oral health needs of New Zealanders should also be taken into consideration when making the final decision on this consultation. We agree with Council that having this exclusion of scope removed for oral health therapists is a start to better access for primary dental health care for the general population. This will also assist in improving outcomes for Maori. This will also help dental therapists who have completed an approved course be able to deliver primary health care as well in the future. Our population is ageing and it is evident that the needs of older New Zealanders will not be met by the existing workforce and current model of dental care for over the age of 18. The role of oral health therapists (and dental therapists) in addressing the unmet need in older adults would be vital for good oral health for all; for life.
