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Page 2: Your demographics

**Q1** Your details

Name	sheila layang
Company/organisation	[Redacted]
City/town	[Redacted]
Email	[Redacted]

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**Q2** Your submission is in the capacity as **dental therapist**

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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 agree**

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Page 4: Your support

**Q4** Please describe why you support the proposal

well if i treatment the kid from young ages and i would like to treat him as adult because me and my patients have the build in relationship that start from young age,where the closeness and the patient will put much trust to me as dental therapist.

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Page 5: Your concerns

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

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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? **No**

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Page 10: Last thoughts

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

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