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Tēnā koe Marie

Re: Consultation on proposed changes to the working relationship requirements for oral health practitioners with dentists, and the practising conditions for dental hygiene activities.

Thank you for the opportunity comment on the Dental Council's (the Council's) consultation document on the proposed changes to the working relationship requirements for oral health practitioners with dentists, and the practising conditions for dental hygiene activities.

Please find my responses to the consultation questions as below.

Consultation questions

Request: Do you agree/disagree with the following proposals? Please detail why.

Working relationship

- 1. Retain a 'working relationship' as a scope of practice requirement for the dental therapy, dental hygiene, oral health therapy and orthodontic auxiliary professions.**

Yes, a good relationship is critical to the success of the partnerships between dentists/dental specialists and therapists and hygienists. There needs to be two-way communication and a working relationship formalises this.

- 2. The current working relationship for dental therapy, dental hygiene and orthodontic auxiliary practice be redefined as a consultative professional relationship, in line with oral health therapy.**

Agree.

- 3. The consultative professional relationship be defined as:**

"The arrangement between an oral health practitioner and dentist to provide professional advice about treating and managing patients, within the oral health practitioner's scope of practice. It provides a clear and reliable way for the oral health practitioner to seek advice, and a potential pathway for referral."

Agree.

- 4. A signed written agreement is no longer be required for dental therapy, dental hygiene or orthodontic auxiliary practice, as it is anticipated that practitioners will reliably meet their responsibilities in the consultative professional relationship, consistent with the position held for oral health therapy. Practitioners may still choose to have a written agreement, or employers may require one.**

Partially agree. In some cases, a written agreement will be sensible to ensure the responsibilities are formalised.

5. Describe the current *working relationship* for dental technology and clinical dental technology practice as a *professional relationship* between a technician and other health practitioners, to acknowledge the professionals involved and the oral health practitioners' professional obligations under the standards framework.

No changes to the nature of this relationship are proposed, or to the current professional responsibilities of practitioners in this relationship.

Agree.

6. Remove the multiple 'working relationship' practice standards from the standards framework for oral health practitioners, and to publish the following two guidance documents to help practitioners understand and meet their professional relationship responsibilities:
 - Guidance for the consultative professional relationship between an oral health therapist, dental therapist, dental hygienist, or orthodontic auxiliary and dentist/dental specialist.
 - Guidance for the professional relationship between a dental technician or clinical dental.

Agree.

Practising conditions for dental hygiene activities

7. All activities in the dental hygiene scope of practice be performed within a consultative professional relationship without the need for clinical guidance or direct clinical supervision for the administration of local anaesthetic and application of prescription preventive agents.

Agree.

Direct clinical supervision will remain for dental hygienists undertaking orthodontic activities currently specified as being performed under direct clinical supervision. The term 'direct clinical supervision' be replaced with a description of the requirements; to be included in the scope of practice wording that prefaces the relevant orthodontic activities (for consistency with the oral health therapy scope of practice).

Agree.

8. The clinical guidance and direct clinical supervision definitions to be removed from the hygiene scope of practice.

Agree.

9. Update the Medical emergencies practice standard to require dental hygienists to have access to and obtain the necessary training to safely administer adrenaline (1:1000) to manage an anaphylactic event (with an implementation period of a year to allow for training to occur).

Agree.

10. Update the dental hygiene scope of practice with the following activity being performed within a consultative professional relationship:

obtaining and reassessing medical and dental oral health histories

Agree.

11. To not replicate the guidance ('should statements') in the current dental hygiene working relationship relating to a patient's initial assessment into the new consultative professional relationship guidance document.

The new consultative professional relationship guidance document contains the following guidance:

Identify any specific circumstances where you expect the oral health practitioner will ask for professional advice or assistance, for example:

- *The interpretation of significant or complex medical histories and their potential influence when providing oral health care, including when planning to administer local anaesthetic.*

Agree.

Minor scope changes for orthodontic auxiliary practice for consistency across activities

12. Make minor wording changes to the orthodontic auxiliary scope of practice to align the description of the same activities across the relevant scopes of practice.

Agree.

General

13. Any further comments not yet made?

The details of each proposal are clearly laid out and well explained. The Ministry supports the Council's proposals and has no further comment to make on these items.

The Ministry is satisfied that the proposed changes are consistent with the Council's ongoing work to promote and facilitate interdisciplinary collaboration and cooperation in the delivery of health services as per section 118(ja) of the Health Practitioners Competence Assurance Act 2003.

Once again, thank you for the opportunity to provide comments on the proposals.

Nāku noa, nā



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