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Page 2: Your information

**Q1**

Your details

Name	Julie
Surname	Jenkins
City/town	[REDACTED]
Email	[REDACTED]

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**Q2** district health board

Your submission is in the capacity as

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Page 3: Name of company/organisation

**Q3**

Name of company/organisation

Child and Adolescent Oral Health Service, Midcentral DHB

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Page 4: Your Person ID number

**Q4** Respondent skipped this question

Please add your Dental Council Person ID registration number

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Page 5: Proposal area 1: The requirement for a professional relationship

**Q5**

**Agree**

Do you agree/disagree with the proposal to remove the mandated requirement for a professional relationship (dental therapy), working relationship (dental hygiene, orthodontic auxiliary practice), and a consultative professional relationship (oral health therapy) from the respective scopes of practice. Please detail why.

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**Q6**

Please provide comments to support your response.

MidCentral DHB Child and Adolescent Oral Health Service support the proposed changes for removal of mandated professional relationship. Within the District Health Boards organisational employer/employee structure there are mechanisms in place where staff are strongly supported i.e. policy, procedures, and process for referral, alongside Management and Leadership teams which endorse professional and collaborative approach to enable good oral health outcomes for patients within the dental service.

It is envisaged that the above proposed change is testament to the maturation of Registration Model for oral health practitioners. It reconfirms that oral health practitioners are registered practitioners in their own right. This proposal also aligns with Dental Council's new direction for recertification program – nomination a professional peer "The professional peer must be able to provide knowledge and credible feedback" ensuring personal accountability and professionalism.

Therefore we support proposed changes to working relationship

Regards

Julie Jenkins

Professional lead

Child and Adolescent Oral Health Service

Midcentral

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Page 6: Proposal area 1: The requirement for a professional relationship

**Q7**

**Agree**

Do you agree/disagree to remove references to working/professional/consultative professional relationships from the dental therapy, dental hygiene, orthodontic auxiliary practice, oral health therapy, dental technology and clinical dental technology scopes of practice? (as detailed in Appendices A – F). Please detail why.

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**Q8**

Please provide comments to support your response.

MidCentral DHB Child and Adolescent Oral Health Service support the proposed changes for removal of mandated professional relationship. Within the District Health Boards organisational employer/employee structure there are mechanisms in place where staff are strongly supported i.e. policy, procedures, and process for referral, alongside Management and Leadership teams which endorse professional and collaborative approach to enable good oral health outcomes for patients within the dental service.

It is envisaged that the above proposed change is testament to the maturation of Registration Model for oral health practitioners. It reconfirms that oral health practitioners are registered practitioners in their own right. This proposal also aligns with Dental Council's new direction for recertification program – nomination a professional peer "The professional peer must be able to provide knowledge and credible feedback" ensuring personal accountability and professionalism.

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Regards

Julie Jenkins

Professional lead

Child and Adolescent Oral Health Service

Midcentral

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Page 8: Proposal area 2: Practising conditions for dental hygiene activities

**Q9**

**Agree**

Do you agree/disagree with the removal of the requirement for direct clinical supervision for administration of local anaesthetic and prescription preventive agents? Please detail why.

**Q10**

**Respondent skipped this question**

Please provide comments to support your response.

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Page 9: Proposal area 2: Practising conditions for dental hygiene activities

**Q11**

**Agree**

Do you agree/disagree with the removal of clinical guidance for the remainder of the dental hygiene scope activities? (excluding the orthodontic activities currently defined as being performed under direct supervision). Please detail why.

**Q12**

**Respondent skipped this question**

Please provide comments to support your response.

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Page 10: Proposal area 2: Practising conditions for dental hygiene activities

**Q13**

**Agree**

Do you agree/disagree to align the description of the following scope activity with current dental hygiene practice in the following way: obtaining and reassessing medical and dental oral health histories? Please detail why.

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**Q14**

**Respondent skipped this question**

Please provide comments to support your response.

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Page 11: General

**Q15**

**No**

Are there any further comments you would like to made on the proposals?

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**Q16**

**Respondent skipped this question**

Please comment below

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