



Page 2: Your information

Q1

Your details

Name	Annabelle
Surname	Fraser
City/town	[REDACTED]
Email	[REDACTED]

Q2

Your submission is in the capacity as

other (please specify):
Dental Hygienist and Dental Therapist

Page 3: Name of company/organisation

Q3

Name of company/organisation



Page 4: Your Person ID number

Q4

Respondent skipped this question

Please add your Dental Council Person ID registration number

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.

Q6

Please provide comments to support your response.

I feel we are clinicians in our own right and should have autonomy. I know I will still collaborate with my on-site dentists or dental specialists to provide my patients with the best possible oral health outcomes.

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.

Q8

Please provide comments to support your response.

While I agree to the removal of the references to the working/professional/consultative professional relationships. I do like a team approach and working in consultation with my practice dentists to provide my patients with the best possible oral care.

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

Please provide comments to support your response.

As a dental therapist, I don't need to have a dentist on-site for administering local anaesthetic to patients under 18 years. However, for patients over 18 for hygiene practice, I do. It seems a very arbitrary condition and be disruptive if a dentist is not on-site and a patient asks for local during a hygiene appt and I am not able to administer it and then I need to reschedule them.

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

Please provide comments to support your response.

We are trained registered professionals in our own right and I feel we should have more autonomy.

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.

Q14

Please provide comments to support your response.

Yes, I think we are very thorough in obtaining up-to-date medical histories and are aware to ask for assistance or advice when required for either the patient's GP/specialist or our on site dentist.

Page 11: General

Q15

No

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

Follow up consultation on proposed changes to the working relationship requirements for oral health practitioners with dentists, and the practising conditions for dental hygiene activities

Q16

Respondent skipped this question

Please comment below
