



Page 2: Your information

Q1

Your details

Name	Hayley
Surname	James
City/town	[REDACTED]
Email	[REDACTED]

Q2

dental therapist

Your submission is in the capacity as

Page 3: Name of company/organisation

Q3

Respondent skipped this question

Name of company/organisation

Page 4: Your Person ID number

Q4

Please add your Dental Council Person ID registration number

[REDACTED]

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 believe it is better to have a network of dental professionals that work as a team and can be contacted when needed for support and advice. I have never relied solely on the dentist I have my written agreement with in the ddb as he is too busy and has too many commitments to be easily contactable

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.

We are independently registered and responsible for our practice. This should mean it is our responsibility to know when and who we should be contacting if we require advice or support and when

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.

Adequate training should be in place to ensure this is done appropriately and safely and within the training of the individual

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.

Practice within scope and training is the key here

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.

Again this relies on the individuals level of training

Page 11: General

Q15

Yes

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

Q16

Please comment below

All oral health practitioners are now independently registered and should be practicing within their scope and only in what they have formal training. The written agreement for dental therapists in my experience is more a formality than a practicality. I have never relied solely on my written agreement rather I seek advice from the appropriate professional in a timely manner when it is needed. I think if people are registered and agreeing to the dcnz standards there should be no issue with the changes, if people are practicing outside of their scope, training or agreement then that is a completely different issue
