Australian Dental Council

July 6, 200

Mr Robert Fitzgerald AM Commissioner Productivity Commission PO Box 80 Belconnen ACT 2616

Dear Mr Fitzgerald.

I write on behalf of the Australian Dental Council (ADC) to confirm items discussed at our meeting of yesterday (July 5th) at the office of the ADC and to express the thanks of the Council for time given by you and your colleagues.

The ADC membership includes the Dental Boards of the States and Territories, the Committee of Dental Deans of Australia and New Zealand, the Royal Australasian College of Dental Surgeons, the Australian Dental Association Inc, the Dental Therapists' Association of Australia and the Dental Hygienists' Association of Australia.

There is an extremely severe shortage of dentists, dental hygienists and dental therapists in Australia, particularly in the public sector and in rural and remote areas. These shortages will become more acute in the next decade. There are one third less dentists graduating at present than in the 1970's and there is an ageing profile among those practising. There are insufficient dental therapists to maintain the extremely valuable School Dental Services and dental hygienists numbers come from a very low base as training programs arc only now expanding.

There is no shortage of potential entrants for the training programs of each of these professions. Restrictions of funding severely limit the number of places available. In the past two years, the numbers in dentistry have increased including increased HECS funded places, the introduction of fee paying local students and markedly increased numbers of overseas students. However, the numbers of graduates must be calculated as a nett figure as overseas students will return to their county of origin and some local fee paying students will have debts ranging from\$125,000 to \$200,000. It is most unlikely that such graduate: will pursue careers where remuneration is lower eg. academia, public sector.

The training programs for the professions allied to dentistry are now almost all university based degree programs and training is conducted in a coordinated manner with dentists, dental hygienists and dent it therapists training "under one roof". This gives substance to the concept of "Team Dentistry".

The ADC has no policy of opposition to extended duties of dental therapists and dental hygienists providing that it is accompanied by appropriate additional training. With significant training in addition to their 3 year degree courses, questions must be raised as to the cost effectiveness of such training if the range of duties that can be carried out is still less than comprehensive c and if such change further reduces the effectiveness of fine services such as the School Dental Service

While credit for prior learning should be given it is not sound to assess this in terms of competencies. For this to he sound the competencies of two programs must be shown to be equivalent for movement between disciplines.

No discussion of dental workforce should be conducted without acknowledging that the common dental disease:, are amenable to prevention. To have a sustainable workforce, the numbers of practitioners mast increase and the quantum of disease to be treated must be reduced. This; is not only c possible but has been clearly demonstrated in the markedly different levels and patterns of disease among varied socio-economic groups. To increase workforce without reducing disease is equivalent to pouring water into a rapidly leaking bucket.

Overseas Trained Dentists sire making a very significant contribution to the supply of services but the present large number seeking to practise in Australia is unlikely to be maintained. This must be regarded as a short term measure and must not substitute for increased support for the training of Australian dentists, dental hygienists and dental therapists.

Yours sincerely.

Ross King Chief Executive Officer