Review of

Review of National Competition Policy Reforms, Public Inquiry

September 2004

The Dental and Oral Health Therapist Association of Queensland (DOHTAQ) has been actively involved in advocating for legislative changes with regard to the delivery of dental services in Queensland. Our Association has also written submissions to lobby for legislative changes with regard to the delivery of dental services in other states and territories in Australia.

Our members were very pleased when the Health Legislation Amendment Bill was passed in the Queensland Parliament on 15 October 2003. We acknowledge that this was a direct consequence of National Competition Policy Reforms. Dental and oral health therapists now have to be registered, are represented on the Dental Board of Queensland, dental therapists are allowed to work in private practice, we can own a dental practice and dental hygienists are not restricted to 1:1 ratio with a dentist. The ability of dental therapists to treat adults is also being discussed. Our members risk breaching professional standards and loss of registration and the ability to practice if they do not adhere to certain levels of conduct.

Interestingly, our members' concerns are not the same as the members of the Australian Dental Association (Federal). Corporatisation has not really hit the dental industry yet and we wonder if it will ever be a big issue for us (Key Issue 2). The fear of non-health owners of dental practices has not really materialised yet. In fact, dentists are just coming to terms with dental therapists, dental hygienists and oral health therapists being able to own a dental practice. Thanks to National Competition Policy Reforms, these oral health professionals are now also subject to standards of professional practice and codes of conduct – similar to dentists (Key Issues 3 and 6).

With reference to the submission from the ADA (Federal), our Executive members are supportive of steps to "increase the number of dental students and dental graduates to service those areas of the country where delivery of dental services suffers through lack of a workforce" (Key Issue 7). This includes specialists, dentists, dental therapists, dental hygienists, oral health therapists, dental technicians and dental prosthetists.

Our Executive members are also supportive of "increased mobility within the nation ought to be facilitated by easing some of the administrative burden involved in the State/Territory registration process" (Key Issue 8). Once dental therapists, dental hygienists and oral health therapists are required to be registered in all states and

territories of Australia, mutual recognition and adherence to the Trans-Tasman Agreement with New Zealand should be streamlined as much as possible.

Our Executive members are also supportive of the ADA (Federal) suggestion "that any such funds that State and Territory Governments receive as a result of the perceived increase in competition in the dental profession should be quarantined for use exclusively to improve dental health" (Key Issue 9). Queensland has the largest and most comprehensive public dental service in Australia but we are acutely aware that other states and territories cannot offer dental services to those in need.

One area of disagreement with the submission by the ADA (Federal) is the suggestion that "corporate owned dental practices will focus on lucrative facets of dentistry" and it will "become difficult to find dentists prepared to provide services under government sponsored schemes or for the financially disadvantaged" (Key Issue 4). Our Executive would suggest that it is already difficult to find enough dentists prepared to provide services under government sponsored schemes or for the financially disadvantaged persons. This is because the needs are so great and the dental workforce is so small. Moreover, with increased competition from dental therapists, dental hygienists and oral health therapists in the private sector, we are hoping that dental fees will be lowered so that more people will be able to access dental services in the private sector.

In relation to dental therapists, dental hygienists and oral health therapists treating patients in the private sector, the professional bodies need to liaise with the Australian Health Insurance Association and the Department of Health and Ageing to establish a clearer, fairer and more transparent process of reimbursement for dental services.

The benefits of National Competition Policy Reforms in the Dentistry industry are as follows:

- Increased **choice** and options for consumers regarding providers of dental services as dental therapists and oral health therapists can now work in the private sector.
- Increased **convenience** when consumers can now be treated as a family unit at a private dental practice by dentists, dental therapists, dental hygienists and oral health therapists.
- Increased **business** opportunities as dental therapists, dental hygienists and oral health therapists can now own a dental practice in Queensland.
- Increased opportunity for dental **fees** to be reduced as dental therapists, dental hygienists and oral health therapists are less costly to educate/train than dentists.
- Increased opportunity for dental therapists and oral health therapists to be able to treat adults in Queensland. This has the potential to have a significant **impact** on long waiting lists for public sector dentistry in Queensland, particularly on the Gold Coast and in rural and remote areas.

Thanks to National Competition Policy Reforms, members of the Dental and Oral Health Therapist Association of Queensland are now able to work in a more competitive dental industry. Our Executive is keen to see that the benefits of increased competition are now passed on to patients via reduced dental fees. An open

competitive market in dentistry should be inclusive of provider numbers, item numbers and private health insurance rebates for dental therapists, dental hygienists and oral health therapists along the lines of those already established for dental specialists, dentists and dental prosthetists in Australia. Any assistance from the Productivity Commission to enable our members to work in a more competitive market in dentistry would be appreciated.

In summary, National Competition Policy Reforms have opened up a whole new world in the private sector for dental therapists and oral health therapists in Queensland – for that we are most grateful and appreciative. Membership of our Association, the Dental and Oral Health Therapist Association of Queensland, has never been so high. It may have taken ten years and caused al lot of pain and hardship on the way but, with your guidance, we got there! Thank you, it was worth it.