

## INQUIRY INTO DENTAL SERVICES IN NSW

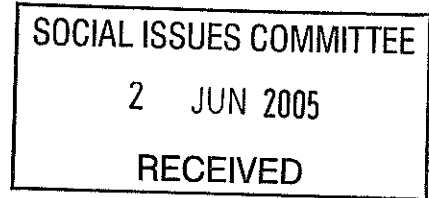
**Organisation:** Wagga Wagga Community Health Dental Clinic  
**Name:** Ms Jennifer Lang  
**Position:** Oral Health Promotion Officer  
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**Theme:**

**Summary**

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The Standing Committee on Social Issues,  
Legislative Council,  
Parliament House,  
Macquarie St,  
Sydney,  
NSW 2000.

To whom it may concern,  
I am writing this letter in regards to the inquiry into Dental Services in NSW.

In 1979 I was successful in my application to attend Shellharbour School of Dental Therapy. My interview took place in Wagga and there were 4 ladies selected from this area alone for a class of 30. The year consisted of 15 students from Country areas from all over NSW and 15 from the Wollongong/Sydney area. The idea was to ensure that the country students would be interested in coming back to their "Home Town". This worked very well.

I graduated from the Shellharbour School of Dental Therapy in 1982. There were 20 other graduates in my year, as well as 20 from each of the Training Schools in Westmead and Sylvania. This year I believe there were 10 graduates from the only Training School in NSW at Westmead.

In my day we were "sent" to an Area Health Service. This ensured a regular turn over of staff to isolated areas. Some of my friends are still working in regions way out west. In my year there were 4 graduates sent to the Wagga area alone. Three of the four selected for Training came back to the Wagga area. The system worked!! There were others "sent" to Griffith, Hay, Deniliquin. Many are still there- marrying local boys and staying in the area.

This arrangement of being sent to an area, finished some years later and we have not had a new graduate come to the Wagga clinic since 1993. That therapist is still working in the area. The Wagga clinic is fully staffed to budgetary requirements with Dental Therapists- but with more staff, then more Oral Health Promotion could be achieved to try to reduce the cause of the tooth decay disease.

Also, we are an aging group of ladies. We have 6 Dental Therapists with an average age of 40 years. The earliest Graduated is 1975- the most recent 1993! We are concerned that there will be no Therapists ready to take our positions when we want to retire. There are so few positions for interested people at Dental Training Schools. I suggest that the few people who do get accepted into the Training, are people who do not come from a rural background and will not be interested in coming to the Rural areas after training. There needs to be a huge increase in the number of positions available, and some incentive for Rural People to qualify for those positions.

The Wagga clinic carries out the NSW Oral Health directive of the Information System for Oral Health program (ISOH). We also have the Child Priority Oral Health Program where we travel to all Primary Schools in the area and carry out a Dental Risk Assessment Session on children with parents consent. This identifies children in most need of treatment. Presently, children with identified problems are able to seek treatment within 7-10 days. There is only a short waiting list for preventive treatment. But the tooth decay situation has begun to change- with statistics showing an increase in tooth decay for the first time in 40 years. Today's junk food and fast lifestyles are to blame. There is no time for Oral Health Promotion to address this situation. At the moment we are only treating the tooth decay disease- not the cause. We are not planning for the future, with an increase in Oral Health problems.

In my role as Oral Health Promotion Officer, I work 3 days a week to organise the School Assessments and develop Oral Health projects in the whole of the previous Greater Murray Area Health Service. I have recently helped to develop the Pre-School Oral Health Promotion Package, which is targeted at our priority group of Pre-schoolers. This is an excellent program, not only targeted at the children, but also their parents. Topics covered include Diet, Toothbrushing and Regular visits. If more staff were available, then I believe we could really make a difference to the Oral Health of young children in the community with this program.

No money is available for resources to provide this Pre-School Promotion. I have photocopied and produced my own resources, which could be made look much more professional with funding. I am using posters many years old- but no money for new ones. We have no access to a photocopier in our large clinic- I have to walk to the next building in Community Health to do any photocopying. I have proven time and time again the value of having technological support- but again- no money! Even the FAX machine is well past its use by date- but again- no money.

The High School child is also an area that is in desperate need of Oral Health Promotion that is targeted towards them as teenagers- again, no time to address this issue. If these children were given appropriate information, then real change could be made in their Oral Health. More Dental Therapists in the Rural Areas could reduce the number of adults seeking treatment in the years to come.

For the past 2 years, Wagga has only had the one Dentist working in the Adult section of our clinic. There are thousands of eligible Pension or Health Care Card holders for him-alone to see. These people tend to not regard Oral Health as terribly important, until they have a toothache. Then they become very demanding of our service, which can put heavy demands on our staff. Luckily our sole Dentist is a dedicated fellow, but his role includes a huge area- from our Tumut clinic in the East to our Cootamundra Clinic in the South. This involves travelling to these outlying centres- or the patients travelling to us. This presents a range of problems in itself. The average distance travelled would be 100km.

This Dentist is expected to see a huge number of people eligible for treatment. Only emergency patients are seen- people who are in pain. Broken fillings or routine dental work can not be offered due to heavy demands on his time. He is on his own, with no one to share ideas- or the workload. More Dentists coming to the Rural Areas would support him in this role. The AIHW released figures in 2000 stating that only 12% of Dentists work in the public sector for an eligible population entitled to free dental care of 40% of the NSW total. In fact, less than 10% of the eligible population receives dental care in any year. The dental care they receive is only relief of pain, and does not include any preventive Oral Health regimes, such as an annual check up. We also have some non-fluoridated areas in our region, who could benefit from some intensive pro-fluoridation discussion, to encourage their local councils to fluoridate the town water supply. But again, we are flat out offering relief of pain appointments- people don't want to hear about why they should have fluoride in their water when all they want is their tooth removed. Time spent on preventive dental treatments, would relieve this situation.

This year, Wagga was lucky enough to be selected to be part of the Rural Graduate Rotation Program. 8 newly graduated Dentists are rotated from further training at the United Dental Hospital and Rural locations. 2 Dentists come to Wagga for 5 weeks each, then rotate. This alone has changed the climate of the clinic, where emergency patients can actually get an appointment and receive treatment. There is still no time available to reward people for looking after their mouth by offering an annual check up. These graduate dentists bring with them new information and techniques. They are also sharing the workload for our lone Dentist. These Dentists also get a taste of our Rural Area and find out that we are not as backward as perhaps thought. We do have universities, colleges, theatre, arts and shops- even Myers. All have enjoyed their short stay with us and speak highly of Wagga Wagga. This is only a trial program and could finish this year- but is one that should be given priority to be extended and expanded to cover all NSW Rural Areas. What a great way to get new staff to Rural Areas, by helping with work placements and accommodation. It would be a shame to see this lost due to lack of funding. Also, the AIHW reported that there are insufficient numbers of Dentists graduating to replace those currently leaving the workforce.

With our aging population it is also essential that the issue of staffing be addressed to cope with the complex oral health conditions that will be presented in the older patient. At present there is no service offered to any Nursing Home in Wagga. Patients must be brought into the clinic- sometimes in wheelchairs. Ideally, there should be Preventive Oral Health Programmes to encourage good Oral Health whilst in the care of our Nursing Homes. Staff would visit on a regular basis, to update nursing staff, and help with the complex problems involved once a patient is no longer able to care for their own mouth. There is no money or time available for this.

I mentioned earlier the patient who is in need of treatment often becomes demanding of that treatment. A huge problem for our clinic has become the abuse of our staff by irate persons demanding treatment on the spot. These people expect that because it is a Public Dental Clinic, that they should be seen immediately. The correct procedure is to ring for an appointment and be given a time when best suits the clinic- but no- these people will come to the front desk and demand treatment immediately. They then become aggressive and abusive. In the last year we have had several critical incidents involving these patients and our reception staff.

Upgraded security measures were forced to be put into place to protect our staff. Police have been called. We now have barriers between office and waiting areas to protect our staff. We were also forced to install an Emergency Duress Alarm system as these incidents were happening so often. Security staff now call in regularly to be a presence in the clinic. Sometimes it is only an angry sentence about not getting an appointment- other times security has to be called to remove the patient from the waiting room. This is all in front of other patients who are waiting for treatment- including young children. We have had to relocate waiting patients to staff room areas for their own safety.

These incidents have led to Workers Compensation claims for stress and depression. It is only a matter of time before this happens again. There is also constant abuse over the telephone, when an appointment can not be offered to people due to them "not being in pain". This is an Emergency only clinic. Why can't we deal with small problems *before* they become emergencies. You should not have to be abused at work whilst doing your duties.

These abusive patients are people in pain with low management and tolerance levels. If we were able to keep an appointment every day for this type of person, then it would relieve a lot of stress in the clinic. But we are so fully booked with people already in pain, who have waited for their appointment, that this is not possible. If more staff were available then this situation would be resolved.

No routine dental work is offered to eligible adults. We have many people on our waiting lists for Check ups and broken fillings. Many of these people have looked after their mouths, but are now on the pension and are unable to afford private dentists fees. Surely these people should be rewarded for doing a good job over the years and offered annual check ups? A small amount of prevention is far better than years of neglect. A broken filling picked up early is much cheaper to repair than the same tooth that has been left for many years, due to being on Public Dental Waiting Lists. This tooth then becomes chronically infected, and the only treatment offered is extraction. If more Dentists were available in the Public system, then Prevention would become a high priority, and reduce costs overall- not only in money, but in pain prevention.

In looking back over my letter, I might seem to paint a gloomy picture, but can I say that the quality of the staff working in our clinic is top class. We are a very hard working group of people trying to do our best for our patients. Most of the time this is not appreciated, but we work on, knowing that we are doing a good job for the public health. The quality of care given to patients is also of an excellent standard. We would love to see everyone wanting dental treatment, and do all the work for them -but time, staffing and budget constraints prevent this happening .

There are many issues with which I am concerned. I hope I have highlighted some of these concerns. I am available to discuss these in greater depth, if required. I hope my letter is of help to your inquiry. I hope this inquiry will lead to the Government accepting it's responsibility for ensuring adequate dental health for the residents of NSW.

Yours Sincerely,

A handwritten signature in black ink, appearing to read 'JLang', written in a cursive style.

Jennifer Lang.