Submission No 209

Inquiry into Dental Services in NSW

Organisation:	•
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Telephone:	
Date Received:	1/07/2005
Theme:	
Summary	

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

RE: The Inquiry By The Standing Committee on Social Issues Into Dental Health

Dear Sir / Madam,

As an academic staff member of the former Diploma of Dental Therapy Program and current Bachelor of Oral Health Program, I would like to express my personal concerns for public dental health in NSW. In particular, I would like to state my perspective in relation to Dental Therapy.

Historically, the funding for the Diploma of Dental Therapy program was heavily subsidised by NSW Health. In return, the practice of Dental Therapy was limited to the public sector. It must be noted that this restrictive practice is not found in other countries or any other states of Australia.

In recent years, I have witnessed new graduate Dental Therapists' experiencing increasing difficulty in gaining employment. The College of Dental Therapy records detail the following post graduation information for the 16 graduates in 2005. This was the final graduation prior to the introduction of the Bachelor of Oral Health Degree.

F/T NSW Dental Therapist employment	5
P/T NSW Dental Therapist employment	1
Dental Therapist interstate	1
Studying Dental Hygiene conversion	4.
Unable to gain Dental Therapist employment -	
metropolitan	

Therefore, less than one third of the graduates are working for NSW Health. The reasons behind this are many and include:

- Restricted practice sole employer is NSW Health
- Public sector salary private sector dental hygienists hourly rate is approximately three times the hourly rate of a public sector dental hygienist
- Positions unavailable particularly in metropolitan areas

Providing conditions that do not attract and retain new graduates has been a waste of taxpayers' money, since they have provided the initial funding for training. It is also facilitating de-skilling, as it is vastly important that new graduates utilise & further develop their clinical skills in a relatively short time span after graduation.

The attraction and retention of new graduate Dental Therapists is of grave concern when the waiting list for dental treatment is viewed. The following data was sourced from the call centre of Sydney West Area Health Service.

- 1895 children (0-18 years) are waiting to have a dental assessment in Mt Druitt, Blacktown & Westmead dental clinics. These people have been waiting since February 2004. It is highly probable that the minor dental problem that needed assessment over a year ago could be considerably more extensive requiring more invasive treatment.
- 4967 children are waiting to access treatment in Mt Druitt, Blacktown & Westmead dental clinics. These people have been waiting since January 2003. As stated above, the dental treatment required will only need to be more extensive & invasive the longer a patient has to wait.

With such an enormous need by the community for dental treatment and insufficient staff to meet the demand, it becomes extremely difficult to provide dental care of a follow up or preventive nature in the public sector. This adds to the frustration of the Dental Therapist, the child patient and the parent of the child.

For the past thirty years, Dental Therapists have provided essential dental care for children in NSW. Without the services of Dental Therapists', it is anticipated that many of these children would not have

received dental care. The current waiting lists for children are unacceptable. The potential impact for the child who does not receive adequate or timely dental care is:

- Pain
- Fear & anxiety
- Infection
- General health issues
- Future orthodontic needs
- Lowered self esteem
- Negative concept of oral health transferred to future generations

There will not be any more graduate Dental Therapists. The Bachelor of Oral Health will produce a graduate in 2008, with dental therapy & dental hygiene qualifications. With current limitations & remuneration in the public sector, it would be reasonable to assume that public sector attraction & retention rates for new graduates will remain low. This in turn impacts negatively on waiting lists and access to treatment.

As lecturer of the new Bachelor of Oral Health Program, I feel disheartened by the current state of dental services in NSW. It can be extremely difficult to maintain a positive front for the students when you are acutely aware of the difficulties they will face in the public sector. I am pleased for the Upper House Inquiry and look forward to positive steps by the Government to improve public sector dental health services.

Yours Sincerely

Tanya Schinkewitsch

Lecturer

Bachelor of Oral Health Program