I noticed in one of the briefs that there was a proposal to extend the range/ age of patients Dental Therapist/ Oral Health Therapist can treat.

While the therapist would be keen on this proposal, it would be a mistake for the industry.

1- We train our dentist for 5 years for a reason - medially, scientifically and dentally

2- If we wish to have the therapist become dentists then offer them the additional years Of training in the relevant areas that were missed in their traineeship.

3- Therapist in private practice are subject to the abuse of that situation by entrepreneurial dentist

or businesses that have set up dental practice. We already see this happening to young inexperienced dentist.

4- In most private practice with a therapist they are passed off to families as 'The Children's Dentist'. This implies a

Paediatric Dentist.

5- I have worked with therapist in the Public service and in private both in Queensland and South Australia. The training they

Receive is adequate for the scope they have been given to treat children with a dentist in a supervisory role.

6- In private the supervisory role is far less defined.

7- HAS THE BOARD AND INTERESTED PARTIES WORKED OUT WHAT IS GOING TO HAPPEN WITH THE HUGE NUMBER OF DENTAL

GRADUSTES COMING OUT AT THE END OF 2013 AND THE 5 YEARS BEYOND.

8 – While it is easy to attempt to plug a perceived hole in the system with a cheaper alternative – long term, once done it is almost irreversible.

Dental therapist do not provide a cheaper alternative for service provision in either public or private practice.

In private – their fees are usually charged the same as the dentist. The owner of the practice keeps the profit as it is cheaper to hire a therapist rather than a dentist.

Sincerely

Rosemarie Kirkland