

From: Dianne George [REDACTED]
Sent: Sunday, 6 May 2018 7:32 PM
To: dentalboardconsultation <dentalboardconsultation@ahpra.gov.au>
Subject: Proposed revised Scope of practice reg standard and guidelines

Dear staff

Thank you for the opportunity to submit my opinion on the proposed changes.

I (therapist) established my dental practice from scratch 2 years ago, after being employed for 25+ years with the Government, in a rural area.

Immediately prior to opening my practice, I combined both Government employment .6FTE rural, with private .4FTE in a remote area of SA, and am very familiar with the difficulty both Govt and private practices have in recruiting and retaining quality dental professionals in these areas.

In all employment scenarios, and whilst operating under the "structured professional relationship" I have on many occasions had no dentist immediately on hand, and have utilised my network of dental professionals, and relied on the great relationship I have with them, to manage the issues outside my scope of practice. My clients have never been deprived or compromised of the quality professional care they deserve. I have instances where the "competition" practices have willingly assisted in service provision.

I do not believe the proposed changes would negatively impact on providing quality care within my scope of practice. I pride myself in showing respect for all dental professionals, valuing the skills and knowledge each offers, and in turn am respected.

In particular I would like to highlight the obstacles I have encountered operating under the current registration standards and guidelines.

My practice was delayed opening, when Medicare initially refused to allow me to operate without my own provider number. Despite many phone calls, stressing that this was practice throughout Australia, including Government services, they insisted I would be acting illegally. I was told providing a service as a therapist, and using a dentist's provider number was wrong. It was eventually approved with the words "I was on my own". Additionally, having our own provider numbers would allow more accurate data; reflecting services, workforce, distribution and treatment trends etc. Many dentists could be seen to be overservicing due to OHT's working under their provider number, and this is not a true reflection of dental service provision within the Australian workforce.

Having been operating for approx 9 months, and only a week before a fully booked school holidays, the dentist with whom I had a "structured professional relationship", very unexpectedly died. As the sole remaining clinician, I was faced with cancelling over 100 children at short notice, (being aware I am in a location where access to services is quite difficult anyway). His brother, a dentist, with whom I had also worked with in the past, offered to assume the role of "my structured professional relationship", however we were not able to process a new provider number, site specific, in the short timeframe required. I felt intrusive requesting his assistance at a time of grieving. Should I have been able to operate independently, I could have continued to practice, and access my current network of dental professionals to assist in managing issues outside my scope of practice.

I do not believe we need formal terminology defining our "structured professional relationship". Allow us to work within the limits of our competence and scope of practice, acknowledge the code of conduct, and provide the same status as dentists and dental prosthetists. Do not treat us differently to others, as we are no less responsible, nor less professional.

I sincerely hope the changes are viewed favourable and we can recognise and respect the professional role of all dental practitioners and their regulations.

Regards

Di George

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