



EXCL

ABN 98 729 112 634

Mr Tan Nguyen

Executive Director

Coburg Hill Oral Care

Shop 1 & 2, 153-167 Elizabeth Street

COBURG NORTH VIC 3058

AUSTRALIA

(03) 9041 5301

26th May 2015

General Manager

Small Business, Competition and Consumer Policy Division

The Treasury

Langton Crescent

PARKES ACT 2600

E: competition@treasury.gov.au

To whom it may concern,

I am writing on behalf of DEXCL as the Executive Director in relation to the Competition Policy Review's Final Report.

I am a registered oral health therapist working in Melbourne with 6 years' experience clinical experience. I am currently completing the Master of Public Health at The University of Melbourne, and the Master of Science (Clinical Education) with The University of Edinburgh. My current roles include clinical supervision to Bachelor of Oral Health students at the Royal Dental Hospital of Melbourne and with The University of Melbourne, and work private practice. I am the current President of the Australian Dental and Oral Health Therapist Association Victorian Branch Incorporated, and the Vice-President and National Councillor for the National Branch. Our vision at DEXCL is to deliver dental excellence in evidence-based public health research, and provide leadership for innovation in dentistry.

I support the recommendations published in the final report, of particular interest is Recommendation 2 – Human services and Recommendation 8 – Regulation review, in which I will discuss in further detail below.

Recommendation 2 — Human services

Each Australian government should adopt choice and competition principles in the domain of human services.

Guiding principles should include:

- User choice should be placed at the heart of service delivery.
- Governments should retain a stewardship function, separating the interests of policy (including funding), regulation and service delivery.
- Governments commissioning human services should do so carefully, with a clear focus on outcomes.

- A diversity of providers should be encouraged, while taking care not to crowd out community and volunteer services.
- Innovation in service provision should be stimulated, while ensuring minimum standards of quality and access in human services

Dental hygienists, dental therapists and oral health therapists (DH's, DT's and OHT's) play a significant important role in the provision of dental services to the Australian community. They work in many outreach communities where there is high unmet need in disadvantaged populations. In the current environment, there is a 'monopoly' of dental service providers by dentists and dental specialist. The existing regulations restrict the dental practice for DH's, DT's and OHT's because they cannot work as independent practitioners, as regulated by the Dental Board of Australia. DH's DT's and OHT's must be registered to practice and hold appropriate professional indemnity insurance. At present, there is a limitation on consumer choice to a diversity of dental providers, who have expertise in oral disease prevention and health promotion skills, which complement their clinical practice qualifications.

Recommendation 8 — Regulation review

All Australian governments should review regulations, including local government regulations, in their jurisdictions to ensure that unnecessary restrictions on competition are removed. Legislation (including Acts, ordinances and regulations) should be subject to a public interest test and should not restrict competition unless it can be demonstrated that:

- the benefits of the restriction to the community as a whole outweigh the costs; and
- the objectives of the legislation can only be achieved by restricting competition.

Factors to consider in assessing the public interest should be determined on a case by-case basis and not narrowed to a specific set of indicators.

Various State and Territory regulations related to the practice of DH's, DT's and OHT's are inconsistent with the accreditation standards by the Australian Dental Council. Specifically, DH's, DT's and OHT's are generally not permitted to obtain and administer some therapeutic goods that are relevant to their practice or take dental radiographs without the supervision of a dentist. In addition, the inability for DH's, DT's and OHT's to obtain Medicare Provider Numbers mean they must claim for dental services under the dentists' provider number. It is clear the restrictions on dental practice imposed on DH's, DT's and OHT's is a breach of the Competition Policy objectives.

I appreciate the opportunity to make a submission in support for Recommendation 2 and 8 as outlined in the Competition Policy Review's Final Report.

Yours sincerely,



Mr Tan Nguyen
Oral Health Therapist
BOraHlth, MCHSM, FHEA