

30/09/2011

Colin Waldron
Optometry Board of Australia
GPO Box 9958
MELBOURNE 3001



Dear Mr Waldron,

RE: Response to consultation paper on requirements for therapeutic qualifications for general registration.

I would like to present my viewpoint on the requirement for currently registered optometrists to be therapeutically endorsed by 2029.

I am **strongly opposed** to this requirement regardless of the extended timeframe of 18 years from 2011. Here are my reasons below:

1. Time Requirement

As a small sole independent practitioner and small business operator I am extremely busy with the day to day running of the practice. As I don't have the assistance of another Optometrist and I don't have the resources to employ a number of staff to perform admin functions, I am ultimately left with the bulk of the work.

I don't have the time to complete the Therapeutics course, as I cannot leave the practice unattended to complete the course. I cannot spare the time to complete assignments, research, study and undertake clinical placements when I am working at my practice full time and well after closing time. I think the Therapeutics course is an unfair burden on my time, not to mention the costs (which will be discussed later on).

2. Costs of the course and lost earnings

It is all well and true to make therapeutics a requirement but have you considered lost earnings for the time taken to undertake the course?

As a sole practitioner, like a self-employed tradesman, if we don't work we don't get paid, as simple as that. So the time dedicated to the course is ultimately unpaid.

Furthermore, if I take the course up, who would perform eye examinations at my own practice? I am not as lucky to work in a corporate company where there is a pool of Optometrists that can move between branches to cover for me when I am out of the office. Ultimately I would have to employ a locum, which would add more costs that most likely would never be recouped even if I do have the Therapeutic qualification.

By my calculations, even if I write 1-2 scripts a month (if any) at \$29.10 per patient this would add up to approximately: \$29.10 x 2 patients a month x 12 months = \$698.40 per year in extra revenue, it would take me 17 years to even get the cost of the \$12,000.00 course fees back.

It would be more cost effective if I leave the profession by 2029 than shelving out \$12,000, taking 17 years to recoup it which I most likely will be retired by then.

Unless the government subsidises the course fees substantially and pays for relief/locum cover so we can undertake the course, otherwise I WILL NOT BE COMPLETING IT!! Furthermore the fact that the therapeutics course requires face-to-face learning means it cannot be completed by correspondence at home.

3. No added benefit to my practicing style and unnecessary duplication of services.

I have been practicing for nearly 10 years and I have not seen many opportunities to prescribe therapeutics. It has no added benefit to my practice. I am located in metropolitan location, well serviced by local Ophthalmologists and GPs, not to mention an abundance of therapeutic Optometrists in a short vicinity of my practice if a referral was required. The waiting list to see a private Ophthalmologist is no more than 2 weeks

and urgent cases can be seen immediately.

It is an unnecessary duplication of services in metro areas when there is no lacking of resources or avenues for a patient to be treated.

Therefore I have not had a great need to write a script. It is unfair to make therapeutics a requirement when I see no need to use it.

4. The policy will force Optometrists to cease practicing and force them into early retirement.

This policy will certainly not affect older practitioners in their 50's now and they would most likely be retired by 2029. But this policy will affect practitioners between mid 30's to mid 40's who are not ready to retire but would be forced to retire or cease practicing if this policy was passed.

It is unfair to make therapeutics a requirement and there should be a grandfather clause to cover existing practitioners who are not endorsed to continue practicing till their retirement instead of pushing them out of the work force if they choose not to take up the course.

5. The current system is working well, the public won't be disadvantaged.

The current system of Optometrists providing primary eye care, refraction, disease diagnosis, writing referrals and monitoring of conditions has been very beneficial to the public, even without a therapeutic qualification. I see no reason to change; we are still providing a high quality and comprehensive eye examination.

I do not feel that without therapeutics I have been disadvantaged or providing care that is inferior to the public.

We should leave the therapeutics to the Ophthalmologists, just like they would rather leave the refraction for us. Otherwise there would be a duplication of services.

6. Non-adequate rebate from Medicare for the extra Therapeutic skill.

As you are aware the fees for Medicare are relatively low and capped. We cannot charge more for our expertise and time in therapeutically managing a patient.

Unless Medicare services are uncapped, we will be financially disadvantaged, firstly through the low fees we receive and the loss of earnings from actually undertaking the course. So ultimately we lose out on both accounts, and the same situation which is occurring now will continue which is spectacles/optical products subsidizing the costs of consults. Our loyal patients would be paying for customers who don't purchase but come in continuously for therapeutic management.

RECOMMENDATIONS:

- Current Optometrists who are not therapeutically endorsed should have this noted on their registration (which is fair) but should not be forced to undertake the course if they do not wish to, regardless of the 18 year time frame given. Even if they completed the course, they may not utilize these skills or write any scripts, which is ultimately a waste of time, resources and money to undertake the course.
- Overseas trained Optometrists of course should have the therapeutic qualification as they are making an active and informed decision to enter Australia and they will need to meet the current standard of newly graduating Optometrists, which is therapeutic endorsement.

I hope the board takes this into account before making a decision in this issue.

Yours Sincerely,

OPTOMETRIST
(Anonymous)