

Subject: comment on proposal for optometrists to have compulsory therapeutic qualifications  
 Date: Friday, 28 January 2011 3:00:53 PM

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To whom it may concern,

These are some answers to the questions posed on the letter I received from the Optometry Board.

1. **Is there any public benefit???** Although I feel that there is some public benefit for optometrists in remote areas to have therapeutic qualifications, there is definitely no real benefit for patients where I work on the Sunshine Coast QLD. We have many ophthalmologists working in the area, all easily accessible. In the small number of times I have needed my patient to use prescription eye drops, I have called their local GP and organised this easily. Since the changing of Chlorsig to OTC, this rarely occurs now. I would imagine this would be the case in many areas of Australia. And in terms of glaucoma medications I really feel this is better handled by the specialists. I wouldn't want to take over these cases. ( I would like to clarify that I work in a medical – type optometry practice, not a chain store).
2. **Is it a reasonable expectation???** From my own point of view (working part-time only – also caring for children) I think this is a tough ask. My annual income is about 20-25K. Therapeutic qualifications would cost about ½ of this, and a significant amount of time, for no real benefit to myself or my patients. I think it also is a tough ask for my 50+ year colleague who is looking at retirement in the next 10 years.
3. **Should it be a requirement for practice?** For the reasons stated above I don't think so for the time being.
4. **Period of Grace?** – It would have to be pretty long I feel if you were going to bring it in – 10 years? To cover those retiring?
5. **Yes**
6. **Non – clinical roles.** Well if optometrists like myself are required to , so should they. I would use it as rarely as them!

OTHER POINTS – I realise that the cost of any university course is high, but this is a real deterrent, for people like myself. Some optometrists have this paid for by their employers, but this is too much to ask for small private operators (such as my boss). And for all this extra knowledge and responsibilities, are we still going to be paid the same measly fee from medicare, that already doesn't cover the equipment required for our standard obligations? I'm not sure how this is going to go.

Thank-you for considering my points,

Cheers, Tanya Revell.