Subject: Therapeutics submission
Date: Friday, 28 January 2011 11:23:49 PM

Dear Sir or madam,

In reply to your request for submissions and comments about the possible new therapeutics regulations.

1. Yes there would be a public benefit in therapeutically endorsing all optometrists, in particular those in rural communities with little or no ophthalmic coverage. It would make access to prescription drugs easier, hence one may assume compliance would be greater with regimens that were initiated by an ophthalmologist. Optometrists are generally easier to access for repeat prescriptions than ophthalmologists or GPs, and they have the equipment and knowledge to monitor and refer back or consult the ophthalmologist when appropriate.

2. No it is not reasonable however to expect all optometrists would wish to be involved in this type of prescribing, some may not wish too. Their wishes should be respected. Some optometrists wish to do behavioural optometry, or orthokeratology or specialist contact lens fitting, and some do not, those that do not should therefore not be penalized and lose their licence to practice because they do not wish to prescribe drugs either. Some may believe that drug prescribing should be limited to ophthalmologists with many years of general practice/medical/specialist knowledge. Our profession has many areas and aspects and different fields of speciality that individuals favour. These specialities should not be forced on everyone. Just because you do not have the drug endorsement does make you a worse or lesser optometrist than one who does have it.

3. No it should not be a general requirement for practice as an optometrist in Australia, the two tiered system will have to in place until all the pre-drugs optometrists either retire or die, and all the recently qualified ones fill all the optometric roles in Australia. Logistically that could take 30 years or more, but those that gained their qualification as it stood at that time of entry into the profession cannot lose it due to failure to have a drug prescribing qualification, it is just not fair to those long serving optometric professionals.

4. If it were feasible to allow every optometrist to gain their qualification in prescribing then the statutory requirements to gain that said qualification will need to be reviewed. You cannot gain a place now on a drugs course, the requirements are maybe a little too stringent. If we have to prescribe we have to be able to gain that qualification without attending an educational institution, without a huge amount of hospital hours with an ophthalmologist, and with either internet or without internet learning (hard copy the old fashioned way) for those who are not computer literate. With almost 4000 requiring the training, it would be the responsibility of the board to provide training facilities to administer the course in a practical way to get through as many optometrists in as short a time period as possible. Otherwise it could take 10 years just to get a place on an approved course. Some optometrists have busy lives too and cant justify the time, or expense required to complete the course in its present format, especially those a long way from a uni, or like myself a single mum of 2 kids that cant just disappear for several weekends to attend lectures, sit exams and go to an ophthalmologist for practice. Some may be frailer and find exams a torture, it would be the responsibility of the board to allow access for every optometrist in Australia to this
course by making the course maybe 12 months by distance ed, module after module, written paper after written paper with maybe 75% course work loading, 25% written exam held via a TAFE type establishment or Uni depending on the location. Day practice with ophthalmologists could be included either with individual ophthalmologist who were willing to participate or at regional centres with mock patient scenarios for 2-3 days at a time. Cost needs to be effective. If this cannot be done then maybe the board could recommend that all optometrists obtain their drugs qualification, but not make it mandatory as in its present format you could not expect to supply the demand before 2030 with so few places available.

5. Yes all overseas graduates should be expected to obtain their qualification before being allowed to practice here in Australia, but not at the expense of places that could be filled by our own optometrists.

6. No to this question, non-clinical optometrists would be driven out of the profession if they were made to do their drugs qualification whilst not in practice. We will have to have a 2 tiered system or we could lose valuable members or part time members. A mum or dad doing 1-day a week in rural queensland would rather probably lose his ability to practice than have to complete the course as it stands in its current format.

7. Impediments can be overcome by a complete overhaul of the current course to gain this qualification. It is too difficult for many to do in rural areas, or those with family commitments or professional commitments, the list could go on... The board needs to produce a new course that could be accessible to all, young, old, practicing for 10,20 or 40 years in the profession, without scaring the pre 2013 registered optometrist out of the profession completely. It has to be module/book based with less visits to capital city unis, less expensive and more user friendly. Imagine the uproar if nearly 4000 optometrists expressed the wish to do the course at the same time in its current format, impossible!!! The ophthalmologists would revolt and all the years of gaining good relations between our two professions would be lost. Not every ophthalmologist would have the time, will or inclination to take optometrists in their practice and provide the hours requires.

It is a great concept with much merit but the logistics of delivery need to be fully debated with regards to how to put this idea into a plan of action that all optometrists could be involved in. Without the set up of a separate educational facility just handling the course throughout the nation it would be an impossible task. That would be only way I could see it being feasible in reality, is for a separate institute which devotes 100% of its time to delivery of the course and with staff that are employed 100% to do this and educate the optometrists, write and mark their study material in a reasonable time frame and organize exams in a reasonable manner. If this sounds cynical personally doing my masters degree by distance ed was a nightmare due to the lack of staff, inability to contact lecturers, assignments not being marked on time etc etc. A 3 year course took 5!! The unis cannot be relied upon to do such a task, they are too busy and the lecturers are too busy with their general duties of classes, practical work, private practice and research to do a good job of this major change. Outsourcing to OTEN or similar or probably the best option would be to set up a complete new facility ourselves and the fees charged to do the course will help fund it.

Hope this is of benefit to you

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