

Subject: Comments on Therapeutic Endorsement
Date: Tuesday, 1 February 2011 5:37:26 PM

Hi,

I just wanted to comment on the implementation of Therapeutic Endorsement.

I don't think we need to rush into endorsement for all optometrists. The general public has survived for many decades without Optometrists being able to prescribe therapeutics. There are systems in place in communities throughout Australia to provide for adequate therapeutic care for a vast majority of the public, particularly in built up areas. I know the Sunshine Coast has multitudes of Ophthalmologists most with a very good working relationship with optometrists. Even routine referral is available in around 2 weeks and urgent referral or advice is very readily accessible.

I do think that the implementation of Therapeutics is a fantastic thing, but I don't feel it should become mandatory for a long time. Qualification in Therapeutics is a very expensive and time consuming activity, for full time and part-time optometrists.

As a part-time optometrist, I dedicate over 1 month's pay to registration, OAA membership and one conference a year. A therapeutics course would require several months of financial investment (on top of still having to meet Registration and OAA fees), not to mention time away from my young family whilst attending lectures in Brisbane. I agree that eventually this will be the standard of care but would like to argue that the time frame be more like 8-10 years, giving optometrists plenty of warning and preparation time. The people whose practices would benefit most would be endorsed quickly (indeed many of them already are) and those who have less need have time to address the issue, along with increasing access to colleagues who will be endorsed.

This is all keeping in mind that 13 or so years ago, I attended and completed a therapeutic course when I was younger and had more disposable income and less family commitments and am not incredibly impressed with having to repeat the process in the short term – although I recognise that the information is now quite old and primarily unused in my practice life and definitely needs review.

Thank you for your consideration.

Kind regards

