Subject:	Public consultation for therapeutic endorsement requirement for optom reg
Date:	Sunday, 30 January 2011 7:38:48 PM

To Optom Board Aust,

Thanks for your letter and have provided following answers to questions in your letter Jan 2011, about Public consultation for therapeutic endorsement requirement for optom reg.

1 Public benefit requiring all optoms to have therapeutic endorsement: - limited benefit in urban Australia where most of population resides, esp in chain stores and small optical retailers where limited diagnostic service exists but good accesible ophthalmology service exists

- good ophthal services and increasing number of local graduates will gain therapeutics

- perhaps rural practice would most benefit from therapeutic endorsement requirement

2 & 3 Requirement expected of all optoms in Australia?
- not yet, only 800 out of 4000 are therapeutically endorsed at present and will take at some years for this to alter the balance
- endorsement courses are very expensive, not very accessible (few places available and only in some states),

 require huge time commitment that may not be practical for remaining 3200
 if overseas optom wishes to be therapeutically endorsed in Australia, it would be worthwhile having courses/assessment available that includes current relevant laws and local therapeutic knowledge

4 Period of grace for endorsement could be 2-3 years, subject to negotiation The time course for Melb Uni course has been 10-18 months, depending on availability of ophthalmology assistance/tuition.

A reasonable time taken to apply and to completion should be reflected in grace period.

5 Overseas optoms require therapeutic endorsement for 2014? Perhaps not yet compulsory but optional.

Need to consider if there is enough opportunity for overseas optoms to update Aust optometry law/current practice knowledge via bridging courses (both practical and theoretical teaching, perhaps with mentoring or supervision too) before undertaking assessment for registration is more important than therapeutic knowledge alone.

6 Optoms in non-clinical roles may or may not require therapeutic endorsement: depending on role,

eg all teaching optoms would benefit from therapeutic endorsement as much of certification requires updating ocular disease knowledge anyway)

eg admin only or advisory may have limited benefit eg advisory to ocular therapeutics listing /legislation would definitely benefit from therapeutics endorsement

7 It would be too challenging to provide accessible, affordable, adequate and rigorous ocular therapeutic skills to 3200 optoms in various practice mdoes and expect them to have therapeutic endorsement within the next 5 years.

More opportunity for therapeutic update should be available to these remaining optoms regardless of this survey.

It could be worthwhile reviewing this concept in 5 years as all local schools will have incorporated ocular therapeutics practice into the

undergrad courses soon and providing more opportunities for therapeutic update are made available to these remaining optoms.

8 Some need to encourage therapeutic update 2 yrly would be reasonable for those that are already endorsed, for practical and quality implementation.

Thanks for your time.

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