



MPI Speech Tuesday, 18 September 2007
House of Representatives
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The Crisis in dental care caused by the Government's distorted funding priorities.

Two pensioners in my electorate, Salvatore and Carmela Raiti of Merlynston, recently visited the Brunswick dental health clinic seeking a new set of dentures. They were told they would have to wait for three years for a new set of dentures.

They could have the dentures made privately, for between \$3,000 and \$5,000. They do not have \$3,000 - \$5000, and so they wait. Mr Raiti aged 78, says his wife, who is disabled, has been left in constant pain and is unable to eat many foods because of the poor state of her teeth.

Another pensioner in my electorate, 86 year old Vito Romeo of Coburg, also visited the Brunswick Dental Health Clinic and was told he would have to wait 4 years for a new set of dentures to replace his 15 year old set. He is a widower who lives alone. He was quoted \$4,000 if he wanted to get a new set of dentures through a private dentist. He said "I can't wait much longer because of the pain, it hurts very much".

It is disgraceful that my constituents should live like this – living a third world life in a first world country. There are currently two dental care centres in Wills. Residents who go to the Moreland Community Dental Service, in Brunswick, or the Dianella Service in Glenroy, face waits of anywhere between 2 and 3 years for check ups for natural teeth and even longer for dentures. This is not the fault of these services.

It is scandalous that in a prosperous country, in a prosperous era, Australia's teeth should be in such dismal shape. There are 650,000 people on waiting lists for public dental care, with an average waiting time of 27 months.

Tooth decay ranks as Australia's most prevalent health problem. Untreated dental decay in the Australian population stands at over 25%. Incredible. More than a quarter of Australians are not getting the dental care that they require.

Even worse, about 50,000 Australians a year are being hospitalised – hospitalised for preventable dental conditions. What a false economy. We don't give people timely dental treatment, and then we have to treat them in hospital, picking up the pieces of our earlier neglect. It is pure folly.

And from my point of view most disturbing of all is the evidence now coming out about the decline in the dental health of our kids. In the mid 1990s Australian kids had the world's best teeth.

But from 1996-1999, five year olds experienced a 20% + increase in tooth decay. And between 1994 – 2004 hospitalisation rates for children under five increased by over 90%, according to the New South Wales Chief Health Officer, hospitalisation for the purpose of removal or restoration of teeth.

The health insurance company MBF recently released information which showed a 42% increase in children being treated in private hospitals for dental cavities.

Now there are two reasons why we have these third-world dental care arrangements in Australia. The first is the lack of funding, which has been severely exacerbated by the action of the Howard Government. The second is a workforce shortage issue – a lack of trained dentists – this is entirely the responsibility of the Howard Government. As to the first issue, the under funding, Members opposite, in their typical blame game way say that this is the fault of the States. They are interested in playing the politics of the issue; this is what they've done for the past decade.

If they get re-elected it will happen all over again for the next three. We'll get finger pointing and blame shifting, instead of what we need, a genuine, co-operative attempt to solve the problem.

And it ought to be remembered that Labor had a Commonwealth Dental Health Program back in 1996, but when the Liberal and National Parties came to power they scrapped it. They ripped out \$100 million a year from Australia's public dental system. They said we couldn't afford it. They said the axing was necessary to deal with budget deficit, but when the budget went into surplus was the Dental Health Program restored? No it was not. And so we see now hundred of thousands of Australians languishing on dental waiting lists.

In July 2004 – was 2004 an election year? I do believe it was – in July 2004 the Government came up with what it called the Medicare dental program for people with chronic conditions and complex care needs. Now how many people has this program – trumpeted loudly in 2004 – actually assisted? In fact the answer is 7,228 – just 7,228 people assisted in over 3 years, when we have a dental waiting list of 650,000.

And the reason for this is simple enough. This program has been narrowly targeted to people with chronic conditions and complex care needs. It has

required high co-payments from patients and a system of complex referrals between GPs and dentists.

And when I use the word complex, I mean complex. Let me read to the House the eligibility guidelines which have been in operation for Medicare dental services through the past three years.

Present Eligibility for Medicare dental services:

- a) the service is provided to a person whose dental condition is exacerbating a chronic and complex condition that is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under an Enhanced Primary care plan; and
- b) the service is recommended in the person's EPC plan as part of the management of the person's chronic and complex condition;
BUT WAIT THERE'S MORE, AND
- c) the person is referred to the eligible dental practitioner by the medical practitioner using a referral form that has been issued by the department (of Health and Ageing) or a referral form that substantially complies with the form issued by the Department;
THERE'S STILL MORE, AND
- d) the person is not an admitted patient of a hospital or day-hospital facility; and
- e) after the assessment, the eligible dental practitioner gives a written report to the referring medical practitioner;
WE'RE STILL NOT THERE YET, AND
- f) in case of a service in respect of which a private health insurance benefit is payable – the person who incurred the medical expenses in respect of this service has elected to claim the medicare benefit in respect of the service, and not the private health insurance benefit;
IF YOU'VE NEGOTIATED YOUR WAY THROUGH THE MAZE;
- g) to a maximum of 3 services (including any services to which this item or item 10976 or 10977 applies) in a calendar year.

It's easier for a camel to pass through The Eye of the Needle (in language the Health Minister may be familiar with).

Easier to extract a tooth. Little wonder some people are reported to have resorted to do-it-yourself methods, like the old piece of string tied to the door handle, and done their own!

Now this Government hasn't been able to find \$100 million a year to look after people's teeth but it has been able to find \$200 million a year – twice as much – to engage in self-promotion by way of government advertising.

I remind the House that in September 1995 - 12 years ago – then Opposition Leader John Howard promised that a Liberal Government would “ask the Auditor-General to establish a set of guidelines” for government advertising and said “We will run our advertisements past the Auditor-General and they will need to satisfy those guidelines”. This turned out to be one of the Prime Minister's notorious non-core promises, a deceptive piece of propaganda designed to get voters to support him. It spent a staggering \$1.7 billion in the past decade on such notorious propaganda campaigns as the GST Unchain My Heart ads, the Strengthening Medicare campaign, and the Work Choices campaign.

After the Unchain My Heart campaign, the Auditor-General, to his credit, produced a set of guidelines designed to draw the line between bona fide government advertising, and political advertising, for which the Liberal Party should be paying, not taxpayers. The Government ignored those guidelines.

Two years ago, in September 2005, I presented to the Parliament a Private Member's Bill, which would have delivered on the Prime Minister's 1995 promise to bring to bear the independent authority of the Auditor-general on government advertising.

The Private Member's Bill of 2005, like the Auditor-General's Report of 1998, was ignored.

And what have been the consequences? While the polls are indicating the electorate wants the government to listen to it more, to pay more attention to it, instead the Government is out there with a taxpayer-funded megaphone, a taxpayer-funded loud hailer, screaming into the electorate's ear because they think the electorate will get the message if only the government yells a little louder. We have had a renewed avalanche of Workchoices advertising.

As the Member for Kingsford-Smith has pointed out, since the last election we've seen

- \$93 million spent advertising Workchoices, the policy that dare not speak its name,
- \$63 million spent on superannuation advertising,
- \$27 million spent advertising private health insurance, and the
- \$25 million climate change campaign, to which I've just referred.

\$200 million of taxpayers' money in just this year - never before has so much money been hosed up against a wall, by so few, in so short a time.

In stark contrast, Labor has a vision for the future.

A Rudd Labor Government will fund up to **one million additional dental consultations for Australians** needing dental treatment by establishing a Commonwealth Dental Health Program.

Labor has today pledged to invest up to \$290 million in a Commonwealth Dental Health Program.