

Fair Work Commission
Four Yearly Review of Modern Awards
Health Professional and Support Services Award
Matter No: AM2016/31

STATEMENT OF GREGORY ROCHE

1. I am employed by Dental Health Services Victoria (DHSV) as a dental prosthetist at the Royal Dental Hospital of Melbourne ('the Hospital'), in a full-time role. I am covered by the *Allied Health Professionals (Victorian Public Health Sector) Single Interest Enterprise Agreement 2016-2020* ('the EA'), at the level of Dental Prosthetist Grade 3. This is the highest level for Dental Prosthetists under the EA.
2. I am accredited with the Dental Board of Australia which is governed by the Australian Health Practitioner Regulation Agency (AHPRA).
3. I started my career as an apprentice dental technician in 1971, through the Royal Dental Hospital of Melbourne and the Royal Melbourne Institute of Technology (RMIT).
4. I worked as a dental technician at the Hospital from 1975 until 1992. Dental technicians work in the laboratory doing the technical work of making dentures. Dental technicians can only work under the prescription of a dentist or dental prosthetist. Dental technicians are not required to be licensed or registered with AHPRA.
5. I started an Advanced Dental Technician training course in 1981 through the Royal Dental Hospital of Melbourne, which I completed in 1983. I qualified as an Advanced Dental Technician in 1983, which is the title that previously applied to Dental Prosthetists.
6. I believe it was the ADPA who lobbied to have our professional title changed from Advanced Dental Technician to Dental Prosthetist. Other countries, such as in Europe, use the professional title 'Denturist'.
7. When I started my career, you had to be a technician for at least 2 years before being able to undertake the Advanced Dental Technician training course. I believe this has now changed and dental technicians can advance immediately after training as a dental technician to undertake the Dental Prosthetist course at RMIT.
8. From 1983 I began working in private practice, self-employed, as advanced dental technician/dental prosthetist a part-time basis. I originally worked with a colleague who was a dental technician and owned a laboratory. He performed the technical work while

I performed the clinical work with patients. After my colleague himself qualified as an advanced dental technician, I started my own solo private practice where I worked until approximately 2015.

9. In or around 1988 I began working part-time with the Advanced Dental Technician training course at the Hospital as a technician. I was later asked to work demonstrating clinical work to students who were training to become Advanced Dental Technicians.
10. In mid-1992, a dental prosthetist role opened up at the Hospital, and I began working as a dental prosthetist at the Hospital.
11. In 1995 I finished a Bridging Course in Partial Dentures. Before that course was made available, dental prosthetists were only qualified to make full dentures, and only dentists could make partial dentures.
12. In my role at the hospital I see and treat patients in a clinical setting. This includes carrying out repairs of dentures and relines of dentures, but mainly involves the provision of new dentures to hospital patients.
13. In my first consultation with a patient, I will ask the patient for their medical history, perform an oral exam, take an impression of the mouth, and may consult with their previous dentist or a senior dentist about their case.
14. Then I will begin to work on the provision of their denture. The impression I take is sent to the laboratory to make a plaster cast of the mouth, then I ask them to make a special tray for the patient. At the next consultation, I will take a second lot of impressions using the special tray.
15. Next I will ask the laboratory to create registration rims, which is a wax-shaped denture. At the next consultation, I will fit this in the patient's mouth, and make some adjustments to get a good relationship between the upper and lower jaws. The patient then has a say in choosing the teeth colour, shape and size, and I will send this back to the laboratory to set the teeth into the wax.
16. The next consultation is called a 'try-in'. At this stage you will try the wax denture in the patient, check the bite and height where the teeth meet, and make sure the patient is happy with the look and aesthetics.
17. The denture is then sent back to the laboratory to change the denture from the wax to acrylic and finish the denture.
18. The next consultation involves fitting the denture to the patient's mouth at the insert stage, making sure it is comfortable and there is sufficient space between teeth.

19. Approximately a week later I will have the patient return for a final 'check' visit. At this final visit I will check for sore spots, over-extension of denture, and perform any adjustments if required. The patient may need further review appointments if they have ongoing trouble.
20. There is no difference in the substance of the work I did in my private practice to the work I do now in the Hospital, except that when I worked for myself I was both the dental technician, which involved the laboratory work, and the dental prosthetist, which involved the clinical work attending the patient. Most dental prosthetists start out that way.
21. I previously was a member of the VDPA (the predecessor to the ADPA). The VDPA mainly looked after the interests of people who are self-employed with regard to increasing and improving our scope of practice.
22. It was the VDPA that argued and pressed for a bridging course for partial dentures, which I completed. This meant that dental prosthetists no longer had to send patients to the dentists to get a partial denture.
23. I left the VDPA around seven or more years ago because I was finishing up with my private practice, and I had reached the full scope of practice. The VDPA didn't provide anything for employed dental prosthetists, it only looked after the interests of the self-employed.
24. I consider myself a health professional. I am registered under AHPRA along with other health professionals. My role is to attend to the health needs of patients who don't have some or all of their natural teeth, and to improve their health outcomes.
25. I want to be covered by the *Health Professional and Support Services Award* ('the Award'). My colleagues working in other health professional roles are covered by the Award or our Enterprise Agreement which is based on the Award. I think dental prosthetists should be included too.
26. I am aware that dental therapists are listed in the Award. There is some similarity in the roles of dental therapists and dental prosthetists, though we have different scopes of practice. A dentist may refer a patient to a dental therapist to carry out work on their own within their scope of practice, just as a dentist may refer a patient to a dental prosthetist. Both professions can work independently and do not need to be overseen by a dentist. A patient can also consult privately with a dental therapist or dental prosthetist without referral from a dentist. By contrast, dental hygienists can only work with a dentist's supervision.

27. I am concerned that if dental prosthetists are not covered by the award, then this would mean we wouldn't be able to advocate effectively for our interests. Without being covered by an award I believe our rights would be trampled on.

28. I understand the ADPA does not want dental prosthetists covered by the Award. But the ADPA is not there to represent the industrial interests of employees, they don't have the interests of employees at heart.

Gregory Roche

9 April 2020

