



COMMONWEALTH OF AUSTRALIA

PARLIAMENTARY DEBATES



HOUSE OF REPRESENTATIVES

DENTAL BENEFITS BILL 2008

**DENTAL BENEFITS (CONSEQUENTIAL
AMENDMENTS) BILL 2008**

Second Reading

SPEECH

Monday, 16 June 2008

BY AUTHORITY OF THE HOUSE OF REPRESENTATIVES

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Questioner
Speaker Cobb, John, MP

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Mr JOHN COBB (Calare) (7.34 pm)—I rise to speak on the Dental Benefits Bill 2008 and the Dental Benefits (Consequential Amendments) Bill 2008. The issue of dental services in regional Australia, certainly in western New South Wales—and I am sure, Deputy Speaker Scott, in your own electorate in south-western Queensland—is a huge one. Anything that helps the people of our regions with their dental health has got to be a good thing. However, the program that we initiated in November 2007—where patients who were assessed by GPs as having complex medical conditions which required dental services could go and see private dentists or whoever and receive over \$4,000 worth of treatment over two years—was a break in the nexus. It allowed people who would have otherwise been unable to get treatment to do so. An earlier speaker today talked about dental health becoming part of normal health, and I think there is a case for that. Certainly, the people described by our scheme had health issues requiring dental surgery and other services, and they were able to get those under that scheme; otherwise, they might not have been able to.

Other members have talked about the extent to which that service was used. People were able to line up for it up until March of this year. A lady in my electorate of Calare, from Orange, had gone through the step-by-step process to be assessed to be able to use that scheme. She came to see me and said that the scheme had been cut without warning, as it were, and, even though she had met all the requirements, the current government had said that she could not take advantage of it. That was a lady who had done a lot of work to go through the process, and she had every reason to be upset about it—as a lot of people were, obviously, right around Australia but particularly in regional areas such as western New South Wales.

I am thankful for anything that my constituents can get to ease their path into dentistry. The Labor Party—the current government—is introducing a scheme as part of this bill whereby young people can get \$150 for a check-up; but, as the member for North Sydney, the shadow minister for health, said earlier, given that the Labor Party itself has said in the past that the cost of a check-up is well over \$200, I am not quite sure what it is going to do except perhaps tell someone they have a problem. They will still have to pay a bill for the value of that check-up. Then what the heck do they do? They have not got any money to have the procedure done. I am not quite sure where this is leading.

I would like to get back to the regional issues. Without doubt, an enormous problem in the regions, whether it be Kalgoorlie, south-western Queensland, Calare or Parkes—wherever these electorates are—in the provision of dental services is having dentists available to do the work. We have a big problem especially in some of our smaller towns, our regional areas, where people do not have great access to public transport or any other form of transport.

I think one of the big things that we as a government did was to make it easier for our regional kids to get into medicine or nursing without necessarily having to go to Sydney, Melbourne, Brisbane or Perth to do their training. Dubbo used to be in my electorate and Orange is now in my electorate. We are setting up a dental school in Orange with outreaches in Dubbo and Bathurst. Wagga has another part of that dental school. Last year we set aside \$65 million to set up that dental school. That will make it much easier for kids from country regions in particular to do their training to become dentists. It is a known fact that if you get kids from regional areas into dentistry they are far more likely to practise in those regions. This is what we did with medicine. We created in places like Orange and Dubbo rural clinical schools which took kids from the University of Sydney. I think the same thing happened in Western Australia. They have been a huge success. We have to continue to train our young people from regional areas. Over 10 years our initiatives took the percentage of regional kids entering medicine from around eight per cent up to about 26 per cent today. That is a huge thing. Last year we set up projects to enable the same thing to happen in dentistry. I think that is enormously important. As I think about it, Mr Sidebottom, the member from Tasmania—I forget his seat—

Mr Haase—The member for Braddon.

Mr JOHN COBB—Thank you very much.

Mr Crean—He is a very good member too!

Mr JOHN COBB—I am sure he is. The member for Braddon said that we did not do anything. The Regional Partnerships program is something the Labor Party likes to chuck rocks at because it was so popular, but I remember that last year we gave \$125,000 to put a dental chair in Narromine, where they are besieged with people looking for dental treatment without their having to go to major cities such as Sydney. Obviously it is a terrible thing to make dental services available to people in the bush! It is obviously one of the bad things that Regional Partnerships did!

Mr Crean—They did some good things.

Mr JOHN COBB—That is wonderful to hear. Let me just point out a few of the other things that are coming to fruition which are so important to regional dental services. We put \$12.5 million into the six major universities that teach dentistry in Australia. I am very, very pleased to find out that, finally, Griffith University have come to an arrangement with the bureaucracy as to how they will spend their \$1.8 million. They are going to set up in the town of Brewarrina, which is a town in my electorate with a very high Indigenous population. My electorate has one of the higher percentages of Indigenous Australians, and we are very proud that we have well over eight per cent of the descendants of the original Australians in our electorate. Brewarrina does have a real issue with dental health, as do Bourke and the far west. I am just delighted that Griffith University are going to be spending part of their allocation in Brewarrina in western New South Wales. Every two months they will be taking eight students there for three weeks as part of their training to do dental work, and that is fantastic. I implore Greater Western Area Health to do their bit in the recurrent funding for that. It is all very well for the Commonwealth to fund this and for Griffith University to provide the transport, but I call upon Ms Roxon, the Minister for Health and Ageing, to fulfil the \$250,000 promise our government made to Brewarrina to make this a permanent situation. I am just delighted that Griffith University are leading the way and are going out to western New South Wales—in this case to Brewarrina—to make that happen. If the Labor government want to put money towards young people's health, that is fine. I think it is ridiculous to fund what is in the order of half the cost of a dental check. It still does not leave them with any money to pay for the other half or to actually get the necessary work done. To say that we wiped out a program for which there was an obvious need, as the member for—what was it again?

Mr Crean—The member for Braddon.

Mr JOHN COBB—Thank you. For the member for Braddon to say that it was—

Mr Crean—There is something wrong with your memory.

Mr JOHN COBB—Yes, I know. It is a problem, isn't it? For the member for Braddon to say that we did nothing on this is ridiculous. There were 300,000 services. Of course, it is not 300,000 people, but people who needed genuine work were able to get it done. As I said earlier, people in my electorate are coming to me wanting to know why it is, when they have done all that work, that suddenly they have been cut dead on a program which was obviously so necessary, simply going on the number of people who have taken advantage of it. I think it is shocking that that program is being cut. If the government want to bring in a new one, I think they should fund it rather than throw people half the cost of a dental check-up and then give them nothing to follow it up afterwards. Mr Deputy Speaker Scott, regional health is a huge issue—as you, I and the member for Kalgoorlie are well aware—and we will pursue it and do our level best to keep the government on their toes on it.