**BREWARRINA SHIRE COUNCIL**

**Agenda Submission for Ordinary Meeting held on 28 February 2014**

<table>
<thead>
<tr>
<th>TITLE:</th>
<th>BREWARRINA / BOURKE REGIONAL DENTAL PILOT PROGRAM</th>
<th>DOC REF:</th>
<th>Item 13</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>REPORT BY:</th>
<th>Belinda Colless</th>
<th>Economic and Corporate Development Officer</th>
<th>DATE:</th>
<th>14 January 2014</th>
</tr>
</thead>
</table>

**IPR REFERENCE:**
Theme 3: A Caring Community - C3.1 Medical and dental services: C3.1.1
Maintaining and expand existing services

**PURPOSE:**
Update Council on progress relating to the proposed Brewarrina / Bourke Regional Pilot Program.

**RECOMMENDATION:**
That:
1. Councillors accept and table the Brewarrina / Bourke Regional Dental Pilot Program report for information.

**CONTENT:**
See attached Brewarrina / Bourke Regional Dental Pilot Program document for Council information.

**GOVERNANCE IMPLICATIONS:**
Nil – for Information.

**CONCLUSION:**
Nil – For information.

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Dan Simmons
General Manager

**ATTACHMENTS:**
- Brewarrina / Bourke Regional Dental Pilot Program February – September 2014
- Outback Adventure
- Brewarrina Rural & Remote Dental Placement
- The Dental Centre – Brewarrina advertisement
Brewarrina/Bourke Regional Dental Pilot Program
February – September 2014
“Providing permanent dental care to communities that need it most”

John Skinner, Acting Director, Centre for Oral Health Strategy NSW
Leif Svensson, CEO, The Dental & Hearing Centre

17th January 2014
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Acknowledgement

This paper has been written by John Skinner (Centre for Oral Health Strategy NSW) and Leif Svensson, (Dental & Hearing) in consultation with Local Government, Aboriginal Health Services, Medicare Local and local health providers that service the local government areas of Bourke, Brewarrina and Walgett. This paper outlines important background information relevant to a regional dental service partnership and outlines a staged implementation of a number of key strategies in 2014.

The writers of this proposal would like to acknowledge and pays their respects to the traditional owners and their nations of the Bourke, Brewarrina and Walgett local government areas including the Murrawarri, Ngemba and Kamilaroi people. The contributions of earlier generations, including the elders, who have fought for their rights in managing the land, is valued and respected. It is acknowledged that the traditional owners and their nations of the north western NSW have a deep cultural, social, environmental, spiritual and economic connection to their land.

The health professionals who have been consulted and have contributed to this project understand the need for recognition of traditional owner knowledge and cultural values in the development of the Brewarrina / Bourke Regional Dental Pilot Program and support the belief that by working together we can provide beneficial outcomes for traditional owners and all people of the Brewarrina, Bourke and Walgett shires.

Professional acknowledgement is extended to the following contributors for advice and guidance in developing this proposal; Dr Sandra Meihubers (Bila Muuji), Hellen Mannix (Brewarrina AMS), Leigh Leslie (Walgett AMS), Jess Richardson (Walgett AMS), Linda Cutler (RFDS), Boe Rambaldini (NSW Health Sydney), Paul Manning (Western NSW Local Health District), Jenni Floyd (Western NSW Local Health District), Stuart Gordon (Western NSW Medicare Local), Judy Caswell (Brewarrina Health Service), Vivian Slack-Smith (Ochre Health), Phil Johnson (Bourke Shire Council), Ross Earl (Bourke Shire Council), Don Ramsland (Walgett Shire Council), Bill Murray (Walgett Shire Council), Dan Simmons (Brewarrina Shire Council), Matthew Slack-Smith (Brewarrina Shire Council), Dr Hitoshi Sataka (Dental & Hearing) and Dr George Tsai (Dental & Hearing).
Background

Meetings held in November (Brewarrina) and December (Walgett) 2013, identified a need for the expansion of dental services in north western NSW, particularly in the local government areas (LGAs) of Bourke, Brewarrina and Walgett. This need has become acute with the withdrawal of the Brewarrina dental service in June 2013, when Griffith University withdrew its Rural and Remote Dental Service from Brewarrina (4 dental chairs for 24 weeks / year). A common goal was agreed; improving access to dental services in these LGAs, for both private and public patients, with less reliance on fly-in fly-out services would provide a holistic approach to improving health in these LGAs. As a minimum service, regular dental services at Lightning Ridge, Bourke and Brewarrina would be required to achieve this goal.

Dental & Hearing, a private dental practice based in Sydney, has received funding under the Dental Relocation and Infrastructure Support Scheme (DRISS) to commence dental services in Cobar in 2014, for a minimum period of two years. At the two meetings with key stakeholders, this dental group expressed an interest in partnering with local stakeholders to provide additional services in the LGAs of Bourke, Brewarrina, and Walgett. At these meetings, there was clear agreement on the need for sustainable local dental services and agreement that a model be developed that didn’t duplicate or cut across existing dental services.

Clinical Oral Health Services in the North Western NSW

An analysis of current oral health services being provided in the Local Government Areas of Bourke, Brewarrina and Walgett and dental clinic facilities is outlined in Table 1 (Page 10). There is consensus among stakeholders for an immediate need of increased clinical service provision in the towns of Brewarrina, Bourke and Lightening Ridge. The need in Walgett is lessened by the contribution being made by the Walgett Aboriginal Medical Service, however prosthetic were identified as a future need and could be investigated at a later stage of this project.

Investigations by Dental & Hearing, with the assistance of local stakeholders, has estimated the unmet demand for oral health treatment in the LGSs of Bourke, Brewarrina and Walgett is about 2.5 clinical full-time equivalent positions.
Issues Analysis

A number of issues have been identified as part of the discussions between key stakeholders and from data available from a range of sources. These issues include:

- The populations of each LGA are relatively low socio-economic status, with a high proportion of Aboriginal residents (Table 2, page 11);
- There is likely to be high unmet dental demand among residents with a limited capacity to pay for private oral health treatment;
- Populations in the LGAs of Bourke, Brewarrina and Walgett are relatively small with long travel distances between them and to the closest regional centre of Dubbo. This means these communities and any private practitioners are isolated from specialist treatments that are found in larger, regional hubs (Tamworth, Dubbo or Orange);
- Clinical infrastructure in each LGA is generally poor, with the exception of the Brewarrina Council Clinic and Walgett Aboriginal Medical Service. Capital investment will be required in the short and medium term particularly in the communities of Bourke (est $80,000) and Lightning Ridge (est $120,000);
- Funding for existing dental services is provided by a range of sources; Commonwealth (Medicare and Dental NPA), State, Aboriginal identified State and Commonwealth funding, and from not-for-profit organisations. Funding is difficult to aggregate into useable amounts in each town as there is a mix of funding sources;
- Stakeholders agreed that there is a need for prevention and early intervention strategies, including the implementation of water fluoridation in Walgett (approved but not implemented) and Brewarrina (yet to be approved by Council) and other oral health promotion activities undertaken in some locations by Bili Muuji and the Poche Centre for Indigenous Health.

Identified Challenges

In terms of service access there are a number of issues to consider:

1. Availability of dental services;
2. Affordability and accessibility of services;
3. Clinical need/motivation;
4. Cultural safety and appropriateness of services for Aboriginal people.
There are clearly issues surrounding access to dental services, both the affordability and the physical location. Many of the residents in the LGAs of Bourke, Brewarrina and Walgett are from low socio-economic backgrounds. Barriers to dental care include access to transport, language barriers for non-English speaking residents, financial hardship and many specialised services associated with dental care are not accessible locally - many residents have to travel 100s of kilometres to access treatment.

All these issues are well-documented in various publications. The most recent data on dental visiting behaviours of adults suggest that at best around 50% of patients will visit in any given 12 month period, while for children this is slightly higher at around 60%. This will obviously vary on lifestyle circumstance and how they apply to particularly individuals and families (Table 3, Page 11). Based on the eligibility data and profiles of each community we can model and estimate the likely pool of patients to visit in any given year. This is only an estimate that can be refined in future modelling and pilots.

Pilot Rationale – February to September 2014

The primary rationale of this pilot program is to gain a better understanding of how quality oral health care can be achieved to the local communities involved in the pilot and subsequently to communities further afield. Addressing oral health issues will improve the overall health of the patient and subsequently improve the health of a community – achieving this goal is paramount to the success of the program.

This program seeks to construct the framework for a microcosm of what could potentially be rolled out to further locations in future. This micro environment will allow for first hand analysis and refinement of systems, staffing, community take-up and involvement prior to taking the larger regional solution live.

Locations

The locations for the pilot program geographically are Brewarrina and Bourke. Brewarrina is currently a confirmed location for project kick-off and we are in the process of finalising a presence to undertake quality oral health services to Bourke. It should be noted that the Bourke AMS dental clinic would be the most logical location to undertake services. Dental
& Hearing staff have expressed the desire to work with the Walgett AMS if a future opportunity arises.

**Equipment and Resources**
The Brewarrina dental surgery is currently ready for treatment with the exception of consumables which will accompany the dentist at each visit. The AMS surgery at Bourke is complete and ready for treatments and can be utilised if agreement for services can be reached.

**CSU Dates and potential tutoring**
Charles Sturt University has indicated that it is able to send final year students to Brewarrina from March 2014, some discussion has been centred on Dental & Hearing Group staff mentoring and supervising these students. Dental & Hearing are in the process of initial talks for this to occur and hope to reach an agreement when various stakeholders return from annual leave in coming weeks. It should be noted that several of the Dental & Hearing clinical staff currently are part-time clinical tutors at Sydney University. Dr Hitoshi Sataka will be present at the inaugural session in March at Brewarrina and further information will be gathered on curriculum requirements after this session.

It should be noted that in order to authenticate this trial and maximise the sustainability of this health care model, CSU student treatments should be carefully defined as to not minimise potential income which otherwise would have been derived from the private practice model we are seeking to establish.

**Appointment Scheduling**
The Dental & Hearing Group has received very positive feedback from both the Brewarrina Aboriginal Health Service and Ochre Health Brewarrina, indicating that they would be interested in facilitating on-the-ground bookings and other basic administrative functions. As a result, ongoing negotiations of these specifics will be given as they eventuate.

Bourke AMS has the proven capacity to book, manage and monitor the patient appointments as discussed in a recent meeting with Bourke AMS. If Bourke AMS is interested in being involved in this program they could comfortably manage day-to-day on the ground patient management functions.
**Initial Costings**

Dental & Hearing are in the process of finalising costing for this program. As it stands the day rates that are costed for clinical staff are listed below and are based on estimates given by the Poche Centre. We feel that these rates are fair and will cover reasonable costings (Table 4, page 11).

Due to the expedited nature of this pilot program some additional expenses will need to be factored into the costing matrix which will not be present in the expanded regional program. With the local placement of clinical resources, air travel expenses will be greatly minimised as will accommodation expenses. Dental & Hearing Group will provide additional information to this paper when necessary on-costs, in addition to the day rates above, are confirmed. Regardless of these expenses, the day rates estimated by the Dental & Hearing Group of $1,850 per day will cover most costs of delivering these services. Costs over and above this will be covered by Dental & Hearing Group and reported at the completion of the pilot program to show if this program can be self-sustaining (Table 5, page 11).

**Cultural Awareness Training**

Dental & Hearing staff will be required to undertake several sessions with respected local Aboriginal people in each of the pilot sites prior to working on this pilot program. Boe Rambaldini (Centre for Oral Health) has offered to assist with liaison between key staff and local Aboriginal communities prior to project commencement as well as ongoing mentoring. It is hoped that this will prepare Dental & Hearing Group clinical and ancillary staff in their work in these communities.

**Denture Sessions**

Throughout this project a rapid denture creation session will be scheduled. We will seek to complete 5-7 acrylic denture cases per location within a 2 day period. To complete this, a portable laboratory will be present at each treating location complete with 2 x prosthesis’s and 1 x experienced dental technician. Scheduling for these sessions will be discussed at length prior to treatments to ensure that clinical scheduling is rostered to meet this treatment goal. Patients may be seen upwards of 4 times per day ensuring a complete denture being issued the following day of treatment commencement.
Dental & Hearing Clinical Team Credentialing

All clinical staff working with patients will have the following checks undertaken prior to commencement:

- Criminal History Checks
- Working with Children Checks
- Up to date registrations
- Up to date insurances
- Up to 3 professional referees
- Personal clinical vision statement

Future Assistance – Post trial period

No assistance is required during the “pilot period” however it is envisioned that this project will confirm the likelihood for financial assistance to ensure a sustainable future commitment can be made in supplying permanent dental services to Bourke, Brewarrina and Walgett Shires. Examples of this could include;

- Upgraded dental facilities and equipment
- Access to vouchers for underprivileged residents for basic or necessary treatments
- Access to vouchers for dentures
- Access to training and education to up-skill local people in oral health (Dental assistants and administration training programs)
- Dental Mentoring Program (for new graduates interested in relocating to the region)

Detailed reports will be gazetted and distributed to relevant project stakeholders outlining requirements at the completion of this pilot initiative. It is to be expected that there will be unforseen expenses to the project which will in effect justify the rationale of undertaking this exercise.
<table>
<thead>
<tr>
<th>Town/Community</th>
<th>Fluoridated Water</th>
<th>Clinical Facilities as at Dec 2013Jan 2014</th>
<th>Current services as at January 2014December 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bourke (LGA)</td>
<td>Yes</td>
<td>AMS has a 2 chair dental clinic with limited space. Shire has a 2 chair dental clinic – in poor repair and currently used for eye services.</td>
<td>No private dental practitioner. All services delivered from AMS clinic: 2 days per month Poche (priority is Aboriginal clients) Two days per month (3 days including travel to/from Dubbo (WNSW) – adult and child. 1 day per week Dentist (RFDS) 1 day per week Dental Therapist (RFDS) – children only More services could be provided but with a very small clinic with only two chairs, the AMS cannot really accommodate any additional visits unless FIFO single days.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brewarrina (LGA – includes Goodooga).</td>
<td>No</td>
<td>Shire has a small 4 chair dental clinic in good condition.</td>
<td>Currently no service (Griffith University student placement program ended June 2013) however an offer of service in 2014 has been made by Charles Sturt University to supply visiting dental students although a supervisor and consumables would need to be sourced.</td>
</tr>
<tr>
<td>Goodooga</td>
<td></td>
<td>Health Service has one dental chair and portable equipment</td>
<td>Two single days over a 6 week period - Dentist (RFDS) Two single days over a 6 week period – Dental Therapist (RFDS)</td>
</tr>
<tr>
<td>Walgett (LGA – includes Collarenebri &amp; Lightning Ridge).</td>
<td>No (gazetted but not yet actioned by Walgett Shire Council)</td>
<td>WAMS has a 2 chair dental clinic WAMS has a Dental Therapist 3 days per week</td>
<td>30-35 weeks – locum dentist. 3-6 days per month (3 day visits monthly or fortnightly) - Dental/Oral Health Therapist (WNSW – children only)</td>
</tr>
<tr>
<td>Collarenebri</td>
<td>No (gazetted but not yet actioned by Walgett Shire Council)</td>
<td>Health Service has one dental chair and portable equip.</td>
<td>One day per fortnight Dentist (RFDS) One day per fortnight Dental Therapist (RFDS) Linkages to Walgett Aboriginal Medical Service who also provide transport for Aboriginal patients to access services at Walgett.</td>
</tr>
<tr>
<td>Lightning Ridge</td>
<td>No</td>
<td>Health Service has a one chair dental clinic.</td>
<td>Part-time dental private dental practice &amp; 1 day per week Dentist (RFDS) 1 day per week Dental Therapist (RFDS)</td>
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### Table 2 - Population analysis - based on 2013 population estimate and Centrelink concession card data

<table>
<thead>
<tr>
<th>LGA Area</th>
<th>LGA Total</th>
<th>Eligible adults</th>
<th>Non eligible adults</th>
<th>Total adults</th>
<th>% adults eligible</th>
<th>Children</th>
<th>% Pop eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bourke</td>
<td>3037</td>
<td>927</td>
<td>1285</td>
<td>2212</td>
<td>42%</td>
<td>825</td>
<td>58%</td>
</tr>
<tr>
<td>Brewarrina</td>
<td>1865</td>
<td>643</td>
<td>706</td>
<td>1349</td>
<td>48%</td>
<td>516</td>
<td>62%</td>
</tr>
<tr>
<td>Walgett</td>
<td>6861</td>
<td>2943</td>
<td>2413</td>
<td>5356</td>
<td>55%</td>
<td>1505</td>
<td>65%</td>
</tr>
<tr>
<td>Western NSW LHD</td>
<td>270486</td>
<td>78604</td>
<td>125336</td>
<td>203940</td>
<td>39%</td>
<td>66546</td>
<td>54%</td>
</tr>
</tbody>
</table>

### Notes.
- *Up to half of adults are also eligible for public dental services; #all children are eligible for public dental services and the majority would also be eligible for the Child Dental Benefits Schedule (CDBS) under Medicare from 1 January 2014.

### Table 3 - Estimates of possible annual visit numbers, by child/adult and location

<table>
<thead>
<tr>
<th>LGA Area</th>
<th>LGA Total</th>
<th>Total adults</th>
<th>Annual visits based on 50%</th>
<th>Children</th>
<th>Annual visits based on 60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bourke</td>
<td>3037</td>
<td>2212</td>
<td>1,106</td>
<td>825</td>
<td>495</td>
</tr>
<tr>
<td>Brewarrina</td>
<td>1865</td>
<td>1349</td>
<td>675</td>
<td>516</td>
<td>310</td>
</tr>
<tr>
<td>Walgett</td>
<td>6861</td>
<td>5356</td>
<td>2,678</td>
<td>1505</td>
<td>903</td>
</tr>
<tr>
<td>Total</td>
<td>11763</td>
<td>8917</td>
<td>4,459</td>
<td>2846</td>
<td>1708</td>
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</table>

### Table 4 – Overview of Service Costs

<table>
<thead>
<tr>
<th>Resource</th>
<th>Day Rate</th>
</tr>
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<tbody>
<tr>
<td>Dentist</td>
<td>$1850.00</td>
</tr>
<tr>
<td>Hygienist</td>
<td>$1100.00</td>
</tr>
<tr>
<td>Specialist (Perio or other expert practitioner)</td>
<td>$3000.00</td>
</tr>
<tr>
<td>Prosthettian</td>
<td>$1100.00</td>
</tr>
<tr>
<td>Dental Nurse/Steri Tech</td>
<td>$ 450.00</td>
</tr>
</tbody>
</table>

*Consumables and laboratory fees are exclusive of the above rates.

### Table 5 – Estimated expenses covered by Dental & Hearing

<table>
<thead>
<tr>
<th>Expense</th>
<th>Amount</th>
<th>Detail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accommodation</td>
<td>$300 per person per session</td>
<td>Waiting on costings from AMS Brewarrina and Bourke</td>
</tr>
<tr>
<td>Travel – Air</td>
<td>$600.00 per person per session</td>
<td>New flight schedules to be announced for Sydney to Cobar, costings to follow</td>
</tr>
<tr>
<td>Travel – Car Initial</td>
<td>$20,000 (once off)</td>
<td>Capital purchase</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Travel – Car day rate for 3-4 days per fortnight</td>
<td>$117.00 per day</td>
<td>Fuel, insurance, maintenance</td>
</tr>
<tr>
<td>Admin Brewarrina</td>
<td>TBA</td>
<td>In discussions with AMS and OCHRE Health Brewarrina</td>
</tr>
<tr>
<td>Consumables</td>
<td>TBA</td>
<td>Upon commencement and demand generated through pilot program</td>
</tr>
<tr>
<td>Lab Fees</td>
<td>TBA</td>
<td>Based on demand for ceramic and prosthetic appliances</td>
</tr>
</tbody>
</table>

**Table 6 - Proposed Dates and Scheduling**

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>24th &amp; 25th of Feb 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>26th &amp; 27th of Feb 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>3-7th of March 2014</td>
<td>CSU - Brewarrina</td>
<td>1 Supervising Dentist</td>
</tr>
<tr>
<td>10th &amp; 11th of March 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>12th of March 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>24th &amp; 25th of March 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>26 &amp; 27th of March</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>31st – 4th of April 2014</td>
<td>CSU - Brewarrina</td>
<td>1 Supervising Senior Dentist</td>
</tr>
<tr>
<td>7th &amp; 8th of April 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>9th &amp; 10th of April 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>22nd &amp; 23rd of April</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>24th of April 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>5th – 9th of May 2014</td>
<td>CSU - Brewarrina</td>
<td>1 Supervising Dentist</td>
</tr>
<tr>
<td>5th &amp; 6th of May 2014</td>
<td>Brewarrina</td>
<td>1 Treating Dentist</td>
</tr>
<tr>
<td>5th &amp; 6th of May 2014</td>
<td>Bourke</td>
<td>1 Treating Dentist</td>
</tr>
<tr>
<td>19th of May 2014</td>
<td>Brewarrina</td>
<td>Dentist and Hygienist Team</td>
</tr>
<tr>
<td>20th &amp; 21st of May 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>Date Range</td>
<td>Location</td>
<td>Team Description</td>
</tr>
<tr>
<td>----------------------------</td>
<td>--------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>2nd &amp; 3rd of June 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>4th &amp; 5th of June 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>16th of June 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>17th &amp; 18th of June 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
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<tr>
<td>30th &amp; 1st of July 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
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<tr>
<td>2nd &amp; 3rd of July 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>7th &amp; 8th of July</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
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<tr>
<td>9th &amp; 10th of July</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>11th of July</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>14th – 18th of July 2014</td>
<td>CSU - Brewarrina</td>
<td>1 Supervising dentist</td>
</tr>
<tr>
<td>14th of July 2014</td>
<td>Brewarrina</td>
<td>1 Treating dentist</td>
</tr>
<tr>
<td>15th &amp; 16th of July 2014</td>
<td>Bourke</td>
<td>1 Treating dentist</td>
</tr>
<tr>
<td>28th &amp; 29th of July 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>30th &amp; 31st of July 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>11th – 15th of August 2014</td>
<td>CSU - Brewarrina</td>
<td>1 Supervising dentist</td>
</tr>
<tr>
<td>11th of August 2014</td>
<td>Brewarrina</td>
<td>1 Treating dentist</td>
</tr>
<tr>
<td>12th &amp; 13th of August 2014</td>
<td>Bourke</td>
<td>1 Treating dentist</td>
</tr>
<tr>
<td>25th &amp; 26th of August 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>27th &amp; 28th of August 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>8th &amp; 9th of September 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>10th of September 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>15th – 19th of September 2014</td>
<td>CSU - Brewarrina</td>
<td>Supervising Dentist</td>
</tr>
<tr>
<td>22nd &amp; 23rd of September 2014</td>
<td>Bourke</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
<tr>
<td>24th &amp; 25th of September 2014</td>
<td>Brewarrina</td>
<td>Either 2 Dentists or Dentist and Hygienist Team</td>
</tr>
</tbody>
</table>

Pilot program completion and review with relevant stakeholders on project success and continuation authority.
Table 7 – Key Partners
The key partners involved in discussions to date have a range of resources (human, financial and physical) that can be used to further this regional partnership. These partners and their resources are summarised in Table 1 below.

<table>
<thead>
<tr>
<th>Partner Organisation</th>
<th>Representative</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Far West Medicare</td>
<td>Stuart Gordon</td>
<td>Local support, publicity and assistance with integration with other services.</td>
</tr>
<tr>
<td>NSW Ministry of Health</td>
<td>John Skinner</td>
<td>Project coordination and management assistance along with policy and planning advice.</td>
</tr>
<tr>
<td>Western NSW LHD</td>
<td>Jennifer Floyd</td>
<td>Clinical staff from Dubbo for services in some locations; clinical supervision of students; access to Oral Health Fee for Service Scheme for Private Providers.</td>
</tr>
<tr>
<td>Bila Muuji</td>
<td>Dr Sandra Meihubers</td>
<td>Advisory organisation in upper cluster of NSW AMS’ – no infrastructure</td>
</tr>
<tr>
<td>Walgett AMS</td>
<td>Christine Corby</td>
<td>2 Chair dental clinic, prosthetics lab and fixed X-ray</td>
</tr>
<tr>
<td>Bourke AMS</td>
<td>Judy Johnson</td>
<td>2 Chair dental clinic</td>
</tr>
<tr>
<td>Brewarrina AMS</td>
<td>Hellen Mannix</td>
<td>No dental clinic in AMS however Shire Council Clinic is available</td>
</tr>
<tr>
<td>Walgett Council</td>
<td>Don Ramsland</td>
<td>Local support, publicity and assistance with integration with other services.</td>
</tr>
<tr>
<td>Bourke Council</td>
<td>Ross Earl / Phil Johnson</td>
<td>One chair dental clinic in need of new equipment and refurbishment.</td>
</tr>
<tr>
<td>Brewarrina Council</td>
<td>Dan Simmons</td>
<td>Four chair dental clinic</td>
</tr>
<tr>
<td>Poche Centre for Indigenous Health</td>
<td>Kylie Gwynne</td>
<td>Currently providing fly-in fly-out services to Bourke AMS; Sydney University Student placements.</td>
</tr>
<tr>
<td>Charles Sturt University</td>
<td>Dr Heather Cameron</td>
<td>Student placements at Brewarrina Dental Clinic in 2014 have been offered.</td>
</tr>
<tr>
<td>Royal Flying Doctor Service</td>
<td>Linda Cutler</td>
<td>Fly-in Fly-out dental services on a limited basis. Currently attending Bourke AMS, Goodooga Hospital, Collarenebri Hospital (need to check these)</td>
</tr>
</tbody>
</table>
Lightning Ridge
A wonderfully crazy place to visit!

Artesian Baths
A trip to the Ridge would not be complete without a visit to the free Artesian Bore Baths. At the end of a hard day fossicking and exploring, there is nothing quite as therapeutic as a long soak in the naturally heated thermal baths.

Astronomer’s Monument
Take the time to browse this incredible feat of engineering and truly experience the eccentric mind of one of the Ridge’s late characters. The walls of this ‘concrete folly’ have been carefully and lovingly inscribed and you can journey through the mind of its creator and wonder....A private residence, available to see through Black Opal Tours

Australian Opal Centre
Meet a life-like dinosaur face to face! Examine rare opalised fossils from long ago, when dinosaurs and other wondrous creatures lived in streams, billabongs and mighty pine forests at the place we now call Lightning Ridge.

Bevan’s Black Opal & Cactus Nursery
Said to be the largest display of old and rare cactus in the southern hemisphere, this garden is a labour of love and well worth a look! Meet the only black opal mining cactus farmers in the world!

Big Opal - Underground Mine Tour
Visit a genuine working opal mine. First licensed opal mine open to the public in Lightning Ridge.

Black Queen Theatre
"I believe Legacy & Light to be the most important work I will ever do. The breath-taking beauty of the extraordinary collection of ancient and antique Light, is a world first experience. You will love our show!"

Bottle House
A unique structure and an intriguing example of innovative architecture. Originally a miner’s camp, the Bottle House now houses an astonishing collection of artefacts and other items of interest.

Coopers Cottage
Coopers Cottage is an authentic abode of the early miner, built in 1916 & embraces the living conditions of miners.

Fossicking Heaps
Whether you are old hat or it is your first time - there is nothing more exciting than that first bit of colour appearing beneath your fingertips as you scratch through the seemingly endless piles of white opal dirt. Good Luck!

Historical Society & Heritage Cottage
Features: Local history, books and souvenirs. 1932 Miners cottage and 1915 Cottage Hospital Gallery. Historical displays books and crafts.

Olympic Pool and Water Theme Park
The 5 Star Olympic Pool and Water Theme Park operates during the summer months. The Olympic Pool is handy for keeping fit and the Water Theme Park for keeping the kids entertained.

Walk in Mine
At the Walk In Mine you will be able to take a trip underground and experience for yourself an opal mine, view a fascinating film of the many Lightning Ridge characters and their lifestyles at the ‘Ridge’.

John Murray’s Art Gallery
Situated in the main street, John Murray Art Gallery is full of the vibrant paintings that have made John Murray one of Australia’s leading outback artists. Entry is free; the gallery is full of large and small original paintings and hosts a wide range of reproductions, posters, cards and art souvenirs.

Lightning Ridge Car Door Tours
Strung in trees and leaning in easily seen places, the car doors will lead you to some of the Ridge’s greatest attractions. You will find Charlie Nettleton’s first-hand sunk shaft at the end of the green car door tour and on the red car door tour you will find Amigo’s Castle and the Astronomers Monument. Departs at your leisure.

Preferred Place to Stay

For more information Contact;
Lightning Ridge Visitor Information Centre
Phone: 02 6829 1670
Facebook: www.facebook.com/lightningridgetourism
Web: www.lightningridgeinfo.com.au
Brewarrina

Ancient Aboriginal history

The Fishtraps
Come and see Brewarrina’s famous 'National Heritage Listed' Fishtraps. Brewarrina is well known for the 40,000 year old Aboriginal fishtraps which are located just below the weir in the Brewarrina township. These traps are constructed from carefully placed rocks in a circular arrangement. This elaborate network of rock weirs and pools stretches for around half a kilometre along the Barwon riverbed from the town weir as built by the Ngemba people to catch fish as they swam upstream.

Baiame’s Footprint
The Fisheries also hold spiritual significance to the Ngemba people and is home to Baiame's Footprint. The Dreamtime legend of Baiame states that in the beginning, everything was different. There was no river, there were no fisheries, this was the Dreamtime. This was the time of Baiame, the spiritual leader or great Wirrinun, who came to the people through a tremendous upheaval in the centre of the land. The earth opened and gigantic rocks were thrust out and scattered on the flat red ground, as Baiame entered the land of the sun and the moon. These giant rocks, rounded and smoothed over time. It is told on his walkabouts Baiame, stepped from Cobar to Gundabooka, which is a sacred place for river people, then he stepped to Byrock, where the mark of his foot was left on a stone, and then to Brewarrina. If you walk along Barwon River down near the fisheries, you can still see today a large footprint in amongst the rocks with toes in plain view.

State Heritage Brewarrina Aboriginal Mission
The Mission at Brewarrina opened in 1886 on a site 14km upstream from the township of Brewarrina on the Barwon River. Aboriginal people from different tribes and family groups from outlying stations and communities as far away as Tibooburra and Angledool were forcibly moved from their traditional homes and relocated to Brewarrina. The Brewarrina Mission became home to people from the Ngemba, Murrawarri, Weilwan, Gamilaraay, Wiradjuri, Yorta-Yorta, Barkindji, Wongaibon, Koamu and Burranbinja Tribes. Mission life caused tremendous disruption to the way Aboriginal people lived, as European influences were imposed. It was generally forbidden for Aboriginal people to practice their traditional culture and use their traditional language resulting in the destruction of traditional social structures. Permission must be obtained from the local Aboriginal Land Council to visit this site.

The Brewarrina Aboriginal Cultural Museum
Brewarrina Aboriginal and Cultural Museum is a no holds barred, Indigenous account of Australia’s history from the beginning of time right through to today. It depicts an inspiring story. Indigenous outback legends are shared via a blend of storytelling, guided tours, audio visual technology and personal recollection. In the ancient tradition of storytelling the Ngemba, Ualarai, Weilwan and Baranbinja people trace the footsteps of their ancient ones, sharing stories that many thought long since forgotten. These are true stories, important stories. These stories belong to all Australians.

Brewarrina Historical Barwon Bridge
The Brewarrina Barwon Bridge is one of only two remaining lift span bridges in NSW that allowed traffic to cross over the Barwon River and lifted in the centre and allowed paddle steamers to continue down the River. The Bridge was a technically sophisticated structure when built in 1889 and required two men to wind a pulley mechanism to lift the spans – this was later modified in 1913 so that only one person was required to operate the bridge. The bridge is recognised as being of NSW State significance as it contributed significantly to the social and commercial development of north western NSW and opened up the ‘back country’ in the late 1800s.

The Barwon River
The Barwon River is part of the longest waterway in Australia. Brewarrina is the last town on the Barwon before the river changes its name to the Darling between Brewarrina and Bourke at the junction of the Culgoa River. In 1829 Captain Charles Sturt, who was exploring inland Australia, named the river after NSW Governor Ralph Darling, but it was not until 1846 that Roderick Mitchell, Commissioner of Crown Lands and the son of Sir Thomas Mitchell, proved that the Barwon and the Darling were the same river.

For more information contact;
Brewarrina Visitor and Cultural Centre
Phone: 02 6830 5152
Email: tourism@brewarrina.nsw.gov.au

Preferred Place to Stay
Back O’ Bourke Exhibition Centre
This new world class centre showcases the history of western NSW and Bourke. It focuses on the people and the landscape that have not only contributed to the life of Bourke but also the history of Australia. The centre describes itself as ‘a billabong 500 years long because it tells the story of the Darling River. The displays are linked by running water, the lifeblood of western NSW.

Jandra Paddleboat
The PV Jandra is a replica paddle vessel built locally by the Mansell family in 2000. The Jandra is licensed to carry 100 passengers and offers two regular cruises per day along the Darling River. The Jandra departs Kidman’s Camp Monday to Saturday at 9am and 3pm and one cruise on Sundays at 2:30pm, offering visitors a 1 hour cruise and a chance to relive the old river days.

Country Mateship Tours
Your host, Stewart Johnston will take you on a tour in a comfortable Toyota Coaster bus through high tech citrus and grape farms, irrigation and cotton farms with large water storage, Jojoba and Pera Bore. Gain insight into the history and heritage buildings of Bourke. For more information contact (02) 6872 1222.

Old Crossley Engine
Located at the Wharf area is a fully restored 1923 vintage Crossley oil fuelled stationary engine. The engine manufactured in Manchester England, is a fine example of an early four stroke diesel type engine. This particular engine was originally used from 1923 to 1938 in the Sydney Power House to generate electricity for Sydney. It was later used in the Allowrie Butter factory at Coffs Harbour and then went to Narromine to be used to pump water for crop irrigation. Donated to the Bourke Shire Council in 2002, it was fully restored to working condition and is started at 12 noon, Monday to Friday.

Bourke Historic Cemetery
Bourke is the resting-place for 1991 Australian of the Year, Professor Fred Hollows. Also in the cemetery are the graves of several Afghans associated with the camel trade that ceased in the 1920s.

Mount Oxley
Mount Oxley is 49.5kms by road from Bourke to the south-east heading towards Brewarrina. Magnificent views from the top looking back to the west over town and to the mountain ranges to the south. Wedge tailed eagles can be seen.

Mt Gundabooka
A large hilly area about 80kms southwest of Bourke. Consists of beautiful Australian bush land. The area has a number of Aboriginal rock paintings and is a wonderful place for bush walks. Superb views with kangaroos, emus and other wildlife to be seen in abundance. Bush camping is available and can be organized via the local National Parks and Wildlife Service. Phone: 02 6872 2744.

The Lock and Weir
The lock at the Bourke Weir was the first to be built on a river anywhere along the Murray or Darling River systems. Built in 1897, the lock and weir is also the only one of its kind built on the Darling River.

Bourke Wharf
At the end of Sturt Street is the Port O’ Bourke and the location of the old Bourke wharves. A replica wharf now stands just slightly down stream form the originals. Well worth a visit the wharf area and the Old Crossley Engine will please.

The North Bourke Bridge
The first bridge built over the Darling at North Bourke was built in 1883. This is a lift-up bridge and the remains of the pulleys and cogs can be easily seen. The bridge was decommissioned in 1998 and the new bridge opened. And much more...

Preferred Place to Stay
Cobar

The roads are paved with gold

The Great Cobar Heritage Centre
Built in 1910 as the Administration Building for the Great Cobar Copper Mine, this imposing structure now houses the town's Heritage Museum which focuses on mining, agricultural and Aboriginal history.

Cobar Heritage Walk
The Cobar Heritage Walk starts at the Great Cobar Heritage Centre and takes in most of Cobar's points of interest and many of its old buildings. The walk takes about 1 hour.

Cobar Miner’s Heritage Park
Just over the road from the Great Cobar Heritage Centre, the park was completed in August 2002 to commemorate the miners who lost their lives in Cobar mines.

Centenary of Federation Walking Track
The recently sealed walk starts at the Great Cobar Heritage Centre and moves south along Lewis Street and the edge of the open cut, past the slag dump and around the back of the golf course in front of the rugby union oval until reaching the “Newey” or New Tank. The walk continues around into Tindera Street and Woodiwiss Avenue and back into the CBD. The walk takes approximately 2 hours.

Commonwealth Meteorological Station
One of the most up-to-date weather stations in Australia, the Cobar facility is situated on the Louth Road approximately one kilometre north-west of the CBD.

Fort Bourke Hill Lookout & New Cobar Gold Mine
Just minutes from town. Take a sealed road up to Fort Bourke Lookout and view Cobar and its surroundings. See the open pit and entrance to the underground mine from a well constructed viewing platform.

Great Cobar Copper Mine
Founded as the Great Cobar Copper Mining Co in 1870, it was one of the largest mining and processing operations in the world at the time. The Great Cobar Mine situated on a slight ridge and facing west over the Cobar township, would have been a magnificent sight. Huge smelters and electric generators supplied lighting for the whole town.

Great Cobar Open Cut
The open-cut has seen many Cobar locals take a dip there on a sweltering summer’s day and many children, in decades past, have learned to swim in its blue-green waters. The open-cut was created by men who were employed over 100 years ago to undertake the back-breaking job of digging the huge hole.

Mount Drysdale
At the turn of the century the thriving gold mining township of Mt Drysdale reached a population of over 5,000 people, rivalling Cobar as one of the fastest growing settlements in the area. Mt Drysdale is located 34kms North of Cobar on the Kidman Way. Permission for access to Mt Drysdale is required. Phone: 02 68 363462 Michael and Shirley Mitchell.

Mt Grenfell Historic Site
The site, managed by the NSW National Parks and Wildlife Service, features wonderful examples of ancient Aboriginal rock art by the local Wongaibon people.

Peak Gold Mine
Eight kilometres south of Cobar, on the Kidman Way, is the site of Peak Gold Mines. The Peak viewing platform enables visitors a closer view of a modern-day working mine site. Peak Mines has also developed the "Golden Walk" which takes the visitor past the "Conqueror" mine shaft and the remains of an old stamper battery, circa 1890s. Close by from an observation platform the visitor can view The Peak Gold Mine in action only 100 metres away.

The Slag Dump
Cobar's earliest smelters were located in the area of Lewis Street. Samples taken from the slag dump contain about 2% copper but because of the difficult process of extraction, the slag is crushed and used as road base on Shire roads.

Preferred Place to Stay

For more information Contact;
Great Cobar Heritage Centre (Visitor Services)
Phone: (02) 6836 2448
Email: cobarmus@bigpond.com
Taronga Western Plains Zoo
Get away from it all; launch your Dubbo experience with a visit to the iconic Taronga Western Plains Zoo. Find yourself surrounded by fascinating wildlife on vast open plains and allow yourself to be immersed in the unique serenity of Taronga Western Plains Zoo. The 6km circuit is surrounded by magnificent bushland with animal exhibits and picnic grounds situated along the way. Whether you travel by car, bike, electric cart or trek on foot at your own leisurely pace, your experience will take you through some of the most distinctive global wildlife habitats in the world.

Western Plains Cultural Centre
After a morning basking in the finesse of nature, head into the heart of Dubbo and discover some manmade artistry at the Western Plains Cultural Centre. WPCC is Dubbo’s creative soul, providing a cool and welcoming atmosphere sure to satisfy the unfamiliar artisan to the creative connoisseur. Presenting a rich and varied program of high quality exhibitions, special events and educational activities, find out why the WPCC makes such a significant contribution to the cultural life of Dubbo and surrounding communities. Uncover the City’s history and view Australia’s largest and best preserved wool wagon and recently installed carved tree, an object of great cultural significance to the local Aboriginal population rarely displayed in Australia.

Dubbo Arts and Crafts Society Cottage Shop and Gallery
Continue to feed your artistic spirit with a visit to the Dubbo Arts and Craft Society. On offer is an impressive range of art works together with a selection of patchwork, porcelain painting, silver craft, embroidery, woodwork, spinning and weaving.

Royal Flying Doctors Base
Another must see attraction is the education centre at the Royal Flying Doctor Service. Located adjacent to the Dubbo City Regional Airport, come along and witness the heroic, live saving work carried out by the Royal Flying Doctors for the people of remote Australia. Learn about the development and operations of the Dubbo Base and see the RFDS history and memorabilia.

Shoyoen Sister City Garden
Authentic Japanese horticulture and architecture gifted to the city by our sister city in Japan - Minkamo.

Tracker Riley Cycleway
Start the morning of day three with a stroll along the Tracker Riley Cycleway. The Tracker Riley Cycleway was named in honour of legendary Aboriginal tracker and is popular with locals. The path leads from the Dubbo Visitors Information Centre and spans as far as Taronga Western Plains Zoo. Be serenaded by the abundant native bird life, smell the river red gums and feast your eyes on the stunning waterway while you cycle or stroll along the 12.5km path that follows the majestic Macquarie River. Experience close up views of an old railway trestle viaduct and huge concrete and steel railway bridges.

Old Dubbo Gaol
The Old Dubbo Gaol has opened the cell doors and invited you to experience the fascinating history of barbaric prison life in the 1800s. Learn about past prisoners and daring escapes with theatrical performances and guided tours.

Dubbo City Heritage Walk
Walk in the footsteps of our pioneers. Dubbo has an intriguing past. From bushrangers and underworld figures, to renowned architects and ornate buildings, Dubbo is steeped in history. Proclaimed a village in 1849 and a town by 1872, Dubbo officially became a city in 1966. The Dubbo Heritage Walk begins at the Dubbo Visitor Information Centre on the corner of Macquarie and Erskine streets. From here, walk south-east up the hill and turn left at the roundabout into Talbragar Street.

Dubbo Golf Club
The Dubbo Golf Club was established as an 18 hole course in 1903 and was relocated to its current position in 1921. In 1995, the 18 hole course was expanded to a state-of-the-art 27 hole course. The golf course is a challenging par 71 and is set in beautiful surroundings.

Dubbo regional Theatre and Convention Centre
This state-of-the art venue is the ideal setting for a range of events and nationally touring shows.

For more information Contact;
Dubbo Visitor Information Centre
Phone: (02) 6836 2448
Email: tourism@dubbo.nsw.gov.au
Web: www.dubbo.com.au

Preferred Place to Stay
Regional Contacts

Lightning Ridge
Lightning Ridge Multi Purpose Service
Lot 25 Pandora Street
Lightning Ridge, NSW 2834
Phone: 02 6829 9999

Ridge Medical Centre
Shop 2/53 Morilla Street
Lightning Ridge NSW 2834
Phone: 02 68 291 188

Walgett
Walgett Hospital
141 Fox Street
Walgett, NSW 2832
Phone: 02 6828 6000

Walgett Aboriginal Medical Service
37 Pitt Street
Walgett, NSW 2832
Phone: 02 6820 3777

Walgett Doctors Surgery
141 Fox Street
Walgett, NSW 2832
Phone: 02 6828 2133

Walgett Shire Council
Mr Don Ramsland
General Manager
77 Fox Street
Walgett NSW 2832
Phone: 02 6828 1399

Brewarrina
Brewarrina Hospital
56 Doyle Street
Brewarrina NSW 2839
Phone: 02 6830 5000

Brewarrina Aboriginal Health Service
5 Sandon Street
Brewarrina NSW 2839
Phone: 02 6839 2150

Barwon River Medical Centre
Sandon Street
Brewarrina NSW 2839
Phone: 02 6839 2294

Brewarrina Shire Council
Mr Dan Simmons
General Manager
57 Bathurst Street
Brewarrina NSW 2839
Phone: 02 6830 5100

Bourke
Bourke Hospital
26 Tarcoon Street
Bourke NSW 2840
Phone: 02 6870 8888

Bourke Aboriginal Health Service
67 Oxley Street
Bourke NSW 2840
Phone: 02 6872 3088

Burke Medical Centre
14 Darling Street
Bourke NSW 2840
Phone: 68772 3222

Bourke Shire Council
Mr Ross Earl
General Manager
29 Mitchell Street
Bourke NSW 2840
Phone: 02 6830 8000

Cobar
Cobar Hospital
Lerida Road
Cobar NSW 2835
Phone: 02 6836 2406

Cobar Primary Health Care Centre
26 Harcourt Street
Cobar NSW 2835
Phone: 02 6836 5500

Dr. Indra Karalasingham
53 Linsley Street
Cobar NSW
Phone: 02 6836 4777

Regional Contacts
Farwest Medicare Local
Mr Stuart Gordon
CEO
28 Oxley Street
Bourke NSW 2840
Phone: 02 6872 4777

Bila Muuji Aboriginal Health Services
Dr Sandra Meihubers
Dental Consultant
PO Box 495
Newport Beach NSW 2106
Phone: 02 9973 1179
Mobile: 0418 405 757

Western NSW Local Health District
Mrs Jenni Floyd
Director Oral Health Services
23 Hawthorn Street
Dubbo NSW 2830
Phone: 02 6841 2343
Mobile: 0428 165 153

THE DENTAL & HEARING CENTRE
Introduction
There are many advantages to participating in a rural and remote placement that may not be available in metropolitan or large regional centre placements. The wide variety of tasks performed by rural health professionals ensures that you will develop a strong sense of teamwork, flexibility and an increased skill set.

Rural and remote placements offer the opportunity for dentistry students to further their professional development in an environment that offers many new experiences. Rural and remote placements provide a realistic understanding of rural health service provision and the skills required for a career in the bush. On completion, students have a greater sense of confidence and an increase in skills and knowledge.

Students are often given a higher sense of autonomy and responsibility which enhances confidence. In some areas, students will discover that rural health care workers may have more limited access to some equipment and resources. This in itself requires innovation and flexibility in the provision of patient care. Rural and remote placements encourage students to develop a professional network through closer dealings with other staff including specialists from both health and community agencies.

Placements in rural and remote areas of Australia offer the opportunity to increase your understanding of the unique health issues of people living in the bush. Working in Indigenous communities is an amazing experience that offers students the chance to learn about different cultural groups, while seeing firsthand what improvements they could make by choosing to practice in a rural or remote location after graduating.

The learning outcomes of this clinical placement include:

- Refine the broad range of clinical skills you have acquired previously
- Learn to work independently in preparation for graduation
- Professionally, empathetically and ethically deal with clients accessing care and deal with the oral health problems confronted
- Confidently consult fellow students, staff and other health workers in dealing with issues confronted, to work as a team rather than a stand-alone dental clinician
- Appreciate the health issues that rural, remote and indigenous communities experience, and how these may differ from urban communities
- Appreciate the oral health issues and burden of disease that rural, remote and indigenous communities experience, and how these may differ from urban communities
- Assess the socioeconomic and environmental issues confronted by rural, remote and indigenous communities, and how these may impact on their health and oral health status
- Develop an appreciation to address oral health problems in a holistic manner
- Effectively utilise the resources available to deal with problems confronted
- Enjoy an experience in a setting that may be new
Clinical policies
The clinical policies, guidelines and manuals that apply at CSU also apply at the Brewarrina outreach clinical placement. Please ensure you are fully conversant with these prior to your rotation. Also bring these along as a reference.

The type of care being offered will be restricted to primary oral health care, with an emphasis on health promotion and prevention, and dealing with pain and sepsis as well basic restorative treatment needs and demands.

Services provided will therefore be restricted to:
- Examinations
- Emergency treatment (excluding emergency endo but including prescriptions, pulpotomy and pulpectomy)
- Oral hygiene instructions
- Scaling and polishing
- Fissure sealing
- Simple direct restorative procedures on deciduous and permanent teeth, including preventive restorations
- Exodontia
- Denture repairs and minor adjustments

Friends and family
Most people experience a culture shock to some degree when you are living in a town or community different to your own. This is normal, everyone who travels experiences this – it may be more profound in the more isolated communities in Australia. Do some reading on this before you go to Brewarrina and prepare yourself. If you expect things to be like they are at home – then stay at home!

Some students undertaking a rural or remote placement may feel a little homesick being away from family and friends. It is important to recognise that this could occur and try to develop strategies for coping with it before you leave. Make sure that you know how you will keep in contact with your family, partner and friends.

Cultural awareness tips for the Brewarrina Indigenous community
Generally, Aboriginal patients have a fear and dislike of hospitals and traditional medical institutions. The fear of unfamiliar institutional surroundings and treatments is a major reason why Aboriginal patients may not seek medical attention in the early onset of a disease. They will often avoid seeking medical assistance until it is absolutely necessary and, by this stage, the disease may be terminal.

Aboriginal patients often view medical intervention as a last resort. It is therefore important that as dental students you are aware and sensitive to these underlying fears. You need to establish a good rapport with patients who need to feel comfortable and be able to openly discuss their health issues. When the relationship between you and the patient is based on openness and trust then the client is more likely to be receptive to medical advice at the initial treatable stages of an illness.

The concept of family in Aboriginal culture differs from western culture. Even distant relatives are considered very close. Responsibilities are often shared and it is not uncommon for grandmothers and aunts to care for children. Aboriginal
elders in the community are greatly respected and valued for their knowledge. In Aboriginal society, commonality, generosity, sharing and looking after each other are the main priorities. Sometimes Aboriginal patients may even share their tooth brushes with each other, which naturally should be discouraged.

When counselling patients, it is useful to involve (with the patient’s consent) other family members. When an Aboriginal patient is sick they may feel unable to speak for themselves and would prefer to be represented by a family member. Therefore counselling and decision making is often a collective process. You may have to wait for agreement between the family members before an important decision is made.

Common endemic illnesses of Aboriginal people include respiratory problems, renal disease, cancer, depression, mental health problems, malnutrition, obesity, alcohol and substance abuse. Diabetes is also a common disease: it is estimated that 20-50% of the indigenous population has type 2 diabetes. Ear infections are also common. Chronic suppuratives otitis media (middle ear infection with otorrhoea lasting more than two weeks) is a disease associated with poverty. It is prevalent amongst Aboriginal children.

The low socio-economic status of Aboriginal patients raises several issues, which need to be considered when working with Indigenous communities. In the Aboriginal community, it is common to have several relatives living in the same house, and one worker will often support a whole household of people. Some patients may not have contact phone numbers, which limits communication. Aboriginal patients may have trouble accessing health services, and this can be due to location and socio-economic factors. There is no public transport in Brewarrina and clients have to walk substantial distances in the heat. It is encouraged to work with the Aboriginal Health workers at Brewarrina AMS and Brewarrina Hospital to work-out a strategy for on-going treatment and care.

When dealing with Aboriginal patients, it is important to speak slowly, clearly and loud enough so you can be heard by the patient, but not by everybody else in the Dental Clinic. Confidentiality is important and a relationship of trust needs to be established. It is important to ask open-ended questions and medical jargon/terminology should be avoided wherever possible to avoid confusion. Written information such as an oral health care plan helps reinforce messages however do not assume a patient is literate, it is vital that treatment is discussed orally as well.

In traditional Aboriginal culture, direct eye contact was a means of asserting power or reprimanding someone. Nowadays, eye contact does not always signal a power factor and interpretations differ according to the individual. Therefore, when counselling, you need to be sensitive and respond appropriately to body language. When an Aboriginal patient avoids direct eye contact, it is not a sign of bad communication but a way of showing respect. If an Aboriginal patient is clearly avoiding eye contact, it may be appropriate for you to look away too, as this will make the patient feel more comfortable. In the major cities, most Aboriginal patients are comfortable with direct eye contact, which aids communication because it provides clear non-verbal signals as to whether the patient understands directions.
You need to ensure you do not stand too close to Aboriginal patients, for they require more personal space. Aboriginal patients may also nod to authority figures and you need to be careful that they do not mistake a nod as a ‘yes’. The decision making process is an important issue when communicating with Aboriginal patients.

Aboriginal culture has a different concept of time. Sometimes when asked about the length of time a condition has been occurring the answer is indecisive or vague: ‘oh, yes, for a long time.’ It is more effective in such cases to give reference cues to help the patient estimate the length of the symptom: ‘Have you had the symptom for one hour?’ or, ‘since yesterday?’ or, ‘has it been since Easter?’ Aboriginal patients, particularly the elders of the community, are renowned for needing time to reflect and consider options when making decisions. To insist on an immediate response would be contrary to Aboriginal cultural tradition. It is important not to bombard patients with further questions if they remain silent; it is better to give time for reflection and consideration of a response to questions.

Cultural differences between indigenous and non-indigenous Australians are contributing factors as to the reason why indigenous patients do not always feel comfortable in accessing medical health care. You need to understand, respect and be sensitive to Aboriginal cultural issues so that they can provide appropriate holistic health care. Relationships between you and an indigenous patient should be based on trust, solidarity and reciprocity. Creating a safe and congenial environment allows the patient to feel comfortable and receptive to oral health care advice and thereby creates better health outcomes.

**Keeping safe**
When on a rural or remote placement, it is important to consider your personal safety just as you would anywhere. This is important both in clinical and non-clinical situations.

Some important tips (use this list as a starting point to consider other issues that may arise):

- Make an informal risk assessment for yourself, considering issues such as transport, accommodation (including the availability of a phone) and supervision before you go.
- Don’t walk around the town or community by yourself at night in unlit areas, or in isolated locations.
- Ask a local mentor about what places should be avoided in the community for cultural reasons.
- Observe local customs in terms of culturally appropriate dress.
- Lock your accommodation at night or when out during the day.
- Tell someone where you are going and when you expect to be back, even by SMS to a friend, if leaving the community for sightseeing, etc.
- Ensure you have the appropriate driving skills if driving over unsealed roads and tell someone if you do not feel confident. Plan your travel to, from and around the community. Identify fuel availability, weather and road warnings and always carry maps and water.
- When beginning your placement, ask your supervisor about safety procedures, personal alarms and location of a ‘safe room’ or location in the event of an aggressive patient.
• Do not approach or confront an aggressive patient or community member but ensure your safety first and follow the advice of your supervisors.
• Do not get involved or take sides in personal disputes between community members.
• A general safety principle to keep in mind is, don’t do anything that you wouldn’t do at home. Also, follow the local rules – there will be a reasonable rationale for them.

**Health issues**
Bring along sufficient medication for any chronic ailments, as access to medication may be limited. Also bring along insect repellent, anti-histamine (especially if you usually react badly to insect bites), pain-killers and if you have a sensitive tummy, bring along medication in case diarrhoea inflicts.

**What to pack**
Brewarrina is not Paris and the need for high fashion is limited. Casual is the look you’re trying to achieve for non-clinic time – if you want to ‘fit in’ with the local culture stick with shorts and thongs in summer and jeans and boots in winter. Even going to the pub on Friday night is a casual affair, keep it simple and keep the packing light.

Towels, sheets, blankets and pillows will be provided at the accommodation. If there is anything else you find you cannot do without over the week, like your own pillow, please bring this with you.

**Accommodation**
CSU has booked you into Lynches’ Cabins at Brewarrina for the duration of your placement (Sunday night to Thursday Night). These cabins are located on the left-hand side of the road on your way out of Brewarrina heading to Walgett (Bridge Road) – if you cross the Barwon River Bridge you’ve gone too far.

Your hosts are Allan and Nicole – drive up to the house and make yourself known. If you need to contact Allan and Nicole, call 02 6839 2045 at the house, if no-one answers, please leave a message. If you are unable to get anyone on this number, please call 0409 683 915 and leave a message.

Lynches’ cabins are clean but basic – each cabin has a television, there are facilities to cook, linen is provided although there are no land-line telephones in the cabins. You will be required to undertake your own housekeeping at Lynches’ i.e make your own bed, do your own washing up etc.

As it is share accommodation please be considerate of the needs of your fellow students and respect their space. Inviting friends back to the share accommodation is discouraged unless it is an organised social event where all students are invited to participate.

**Food**
You will have to make your own arrangements for meals, although basic cooking facilities are available at Lynches’. Each cabin has a microwave, electric fry pan, “easy cook” convention oven and BBQ. There are supermarkets in Brewarrina, however there may not be the selection of products you are used to purchasing in larger centres. If there is something special you want, it might be advisable to bring it with you.
Mobile phones
Brewarrina has mobile phone access in the township for Telstra Next G phones ONLY. A landline telephone is available at the clinic for in-coming calls, the number is 02 6839 2300.

Entertainment / social programme
This will need to be self-driven, however there is a public swimming pool and you could go fishing nearby, so bring your fishing equipment along. Bring along equipment to play cricket, football, tennis, etc.

Brewarrina RSL Club operates has a courtesy bus that operates on the hour, telephone 02 6839 2151 to order a bus to pick you up at Lynches’ and take you to the Club. It is best to ring 10 minutes before the hour to inform RSL Staff of your intention to go to the Club. Once at the Club you can get the bus home when an announcement is made over the Club’s PA system. Note: Sales of bottled take-away alcohol cease in Brewarrina at 7pm and other alcohol sales cease after 9pm. All take-away alcohol must be transported home in a vehicle – no walking around the streets with alcohol, un-opened or otherwise.

At Lynches’, Lynchie and Nicole have some recreational equipment that they loan out (BBQ Boat, paddle bikes, fishing gear), it is up to you to organise this with Lynchie and Nicole, please be reasonable and responsible.

Weather
Being out in the bush the weather can be extreme, please check weather forecast prior to your placement. The temperatures in Brewarrina vary from low 20’s through to high 40s, although in May to September it can be as cold as zero or even under. http://www.weatherzone.com.au/nsw/upper-western/brewarrina

Brewarrina Tourism Information
Brewarrina is a popular cultural and heritage stop for visitors taking on some of Outback NSW’s most stunning country between Lightning Ridge and Bourke.

The Brewarrina District is adorned with some of nature’s most spectacular natural attractions including the National Heritage Listed Brewarrina Fish Traps, Culgoa National Park and the majestic Barwon River.

Worth a visit:
  o http://www.breshire.com/
  o http://en.wikipedia.org/wiki/Brewarrina

Brewarrina today
Brewarrina is a great place to learn about the dreamtime, Aboriginal culture and contemporary Indigenous history, with 58% of Brewarrina residents identifying themselves as Indigenous. Brewarrina is heavily reliant upon agriculture as its primary industry with wool, sheep, beef, wheat and cotton all produced in the district.

The community of Brewarrina recognises the importance of having visitors come to our community. While you’re here with us we hope that you say g’day to a local, spend some time in our little community and enjoy your stay – Stop awhile, you’ll be surprised.
Indigenous History
Brewarrina is situated where the Barwon River flows through what is thought to be the oldest man-made structure on earth. The Brewarrina fish traps are estimated to be 40,000 years old and are a great example of human ingenuity.

Brewarrina was one of the great inter-tribal meeting places of Eastern Australia for Aboriginal people and the Sire is home to the Ngemba, Muwarrari and Yualwarri peoples. The fisheries, or Ngunnhu, sustained thousands of Aboriginal people during the tribal gatherings held prior to European settlement.

No one knows exactly what the word “Brewarrina” means. There are five competing interpretations of the name, several of them mutually exclusive. The most common translation is “clumps of acacias”; others are “where the gooseberry grows”, “fishing”, “acacia clumps” and, perhaps the most plausible “place of gooseberries”, coming from “warrina”, meaning “place of”, and “bre” or “burie” or “biree” meaning “gooseberries”.

European History
The first white settlers who arrived in the district around 1839-40, named the settlement “Walcha Hut” but this was later changed to “Fishery” and, finally, to “Brewarrina”. In 1859 a riverboat called Gemini, skippered by William Randell, reached the town and by the early 1860s Brewarrina was recognised as the furthest navigable point on the Darling River. The town was formally surveyed and laid out in 1861 and proclaimed on 28 April 1863.

The 1870s were something of a boom time for Brewarrina. The Mechanics Institute was formed in 1873. The following year two hotels, two stores and the Commercial Bank all opened and in 1875, a public school was established. All this development was largely due to the development of Merino Wool production in the Brewarrina area which is still the main industry in the Brewarrina Shire today.

Brewarrina Visitor Information Centre
Open Monday to Thursday 8:30am to 5pm, Friday 8:30am to 4:30pm and on weekends 11am to 3pm from April to September. For assistance please call 02 6830 5152 or email tourism@brewarrina.nsw.gov.au

Brewarrina Shire Council
57 Bathurst Street, Brewarrina. It is open Monday through to Fridays from 9am to 4:30pm.
Telephone: 02 6839 2106
Fax: 02 6839 2100
Website: www.brewarrina.com
Email: breshire@brewarrina.nsw.gov.au

Transportation – Countrylink Bus times – Brewarrina to Dubbo
Monday, Wednesday, Friday and Saturday – Departs outside Dowell’s Fuel 9am
Tuesday, Thursday and Sunday – Due outside Dowell’s Fuel at 7pm
Bookings can be made via Countrylink on 13 22 32, or Dowell’s Fuel Station on 02 6839 2073.
Post Office
Open 9am to 5pm (closed lunch 1-2pm), 02 6839 2009
Mail must be delivered to post office before 12pm to be sent out that day.

Brewarrina Hospital
Doyle Street, open Monday to Friday, office hours from 8:30am to 5pm, 02 6830 5000

Barwon River Medical Surgery
Sandon Street, open Monday to Thursday, office hours 9am to 5pm (closed lunch 1-2pm), Friday’s closed, 02 6839 2294

Aboriginal Medical Centre
Sandon Street, open Monday to Friday, 9am to 4pm, 02 6839 2150

St Mary Pharmacy
Corner of Bathurst and Sandon Streets, open Monday to Thursday 9am to 5.30pm (close for lunch 1-2pm) and Friday’s 9am to 2pm, 02 6839 2089

Groceries
- Friendly Grocer, Bathurst Street, Brewarrina 02 6839 2011
- Riteway Supermarket, Bourke Street, Brewarrina 02 6839 2320
- South Bre Butchery, Wilson Street, Brewarrina 02 6839 2034

Banking
- Commonwealth Bank, Bathurst Street, Brewarrina, 02 6839 2207 (open 10.30am to 2.30pm week days)

ATMs
- Commonwealth Bank, Bathurst Street, Brewarrina
- Riteway Supermarket, Bourke Street, Brewarrina
- RSL Club, Bourke Street, Brewarrina
- Dowell’s Fuel, Doyle Street, Brewarrina

EFTPOS
- Newsagency, Bathurst Street, Brewarrina
- Australia Post, Bathurst Street, Brewarrina
- Friendly Grocer, Bathurst Street, Brewarrina

Emergency 000
- Brewarrina Police Station, Bathurst Street, Brewarrina 02 6830 5599
- Fire Services, 98 Bathurst Street, Brewarrina Town Service 02 6839 2232
- Bush Fire Service 02 6839 2589

Road and Travel
All major roads are now sealed, however night time driving is not advisable due to the risk of vehicle damage from wildlife on the roads. Some people have experienced mild to severe damage to their cars for this reason. All unsealed roads are usually impassable after rain.

Contact Brewarrina Shire Council for further road information telephone 02 6830 5100 during business hours or after-hours on 0427 392 101.
**Brewarrina Mentor**
Going to Brewarrina will be an interesting experience, and for some people they may experience some uncertainty or have hesitations about what maybe “culturally appropriate” in a small, rural and remote community.

Belinda Colless, Economic and Corporate Development Officer for Brewarrina Shire Council has accepted the role as your “local mentor” for your stay in Brewarrina. If you have questions or have uncertainties, please give her a call on 0428 281 678 or you can find her at Council. You will meet Belinda when you undertake your induction at the Clinic and she will advise you of local people or information that might assist with your problem or issue.

**What to pack**
- Alarm clock
- Food or any specific dietary requirements you may have
- Medication and scripts
- Student ID card/badge and appropriate professional, clinic clothes
- Money/credit/EFTPOS cards
- Camera – take lots of pics as you are bound to have a ball! Remember that photos in some Indigenous communities may not be welcomed, so be sure to ask permission
- Mobile phone (Please note that the only network available is Telstra 3 G)
- Hat and sunscreen
- Any sporting / entertainment equipment….
- Casual clothes
Dear Brewarrina Community,

I would like to say how privileged I feel to have received such overwhelming community support for our services. All of our staff are committed to giving you the best in oral health care. We look forward to helping you smile, speak and eat to the best of your ability.

Sincerely,

H. Sataka
Dr. Hitoshi (Henry) Sataka

Treatment Dates:

- 28th & 29th of Feb 2014
- 12th of March 2014
- 26th & 27th of March 2014
- 9th & 10th of April 2014
- 24th of April 2014
- 5th & 6th of May 2014
- 13th of May 2014
- 4th & 5th of June 2014
- 16th of June 2014
- 2nd & 3rd of July 2014
- 9th & 10th of July
- 14th of July 2014
- 30th & 31st of July 2014
- 11th of August 2014
- 27th & 28th of August 2014
- 10th of September 2014
- 24th & 25th of September 2014

For appointments please contact the following:
Barwon River Medical Centre
Contact: Vivian
Ph: 6839 2294

BAHS
Contact: Michaela
Ph: 6839 2150

All children benefits and adult treatment vouchers are accepted.
Patients not having vouchers will be charged recommended Australian Dental Board rates.