

Oral Health - DMFT score at Year 8

Outcome

Youth are healthy, safe and supported.

Measure

Oral Health - Mean DMFT score at Year 8

Type

Contributory measure

Relationship(s) to other frameworks

This measure is part of the DHB non-financial monitoring framework and performance measures (Measure reference: PP10) which is available at: <https://nsfl.health.govt.nz/accountability/performance-and-monitoring/performance-measures/final-draft-performance-measures>

Delivery of this measure supports the overarching outcomes for the health and disability system of 'New Zealanders living longer, healthier and more independent lives', and 'The health system is cost effective and supports a productive economy' and the overarching goal that 'All New Zealanders live well, stay well, get well'.

Rationale

This measure provides an indication of the prevalence of oral disease and severity of dental decay in children at the end of their primary schooling (i.e. Year 8; aged 12 – 13 years old). By decreasing the severity of dental decay (experienced particularly by children of primary school age), oral health providers will contribute to the outcome of protecting and promoting good health and independence through providing effective publicly funded child oral health programmes (health promotion, prevention and treatments) that reduce the prevalence of oral disease in children.

This measure will also provide information that allows oral health service providers and the Ministry, to evaluate how health promotion programmes, and services such as the DHB Community Oral Health Service (COHS) and other child oral health providers, are influencing the oral health status of children. DHBs in particular will be able to identify and target the populations in their district where children's oral health status is poorest.

It is believed that implementation of this measure will increase the numbers of enrolment of pre-school children in publicly funded child oral health programmes which will in turn enable early engagement and provide opportunities for interventions aimed at prevention of oral disease and oral health promotion (reducing the prevalence of dental decay).

Eligible population

Year 8 children aged 12 to 13 years

Measure status

In development

Measure definition

Numerator

Upon the commencement of dental care, at the last dental examination before the child leaves a DHB COHS, the total number of:

1. Permanent teeth of children in school Year 8 (12/13-year olds) that are –
 - o Decayed (D)
 - o Missing (due to caries, M) and
 - o Filled (F) and
2. Children who are caries-free (decay-free).

Denominator

The total number of children who have been examined in the Year 8 (12/13-year olds) group, in the year to which the reporting relates.

National target

The National Target is equitable ASH rates for Māori, Pacific, and other New Zealanders.

Local target

Milestones to be decided by Alliance

Data Sources

- DHB via COHS and other oral health providers
- Statistics New Zealand Population Projections
- PHO enrolment register

Data extracted from data sources

Data is to be supplied by DHBs via a template available on the National Service Framework Library (NSFL)

Data availability

Data will be released by the Ministry of Health annually.

Measure calculation process

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Relationship(s) to other measures

This measure sits alongside three other children's oral health measures which form part of the DHB non-financial monitoring framework and performance measures:

- Measure PP11: Children caries-free at five years of age
- Measure PP12: Utilisation of DHB-funded dental services by adolescents from School Year 9 up to and including age 17 years
- Measure PP13: Improving the number of children enrolled in DHB funded dental service

Measure development notes

DHBs are required to report the **numerator** and **denominator** values broken down by:

1. Ethnicity, using the 'prioritised ethnicity' approach into the following (in order of assignment):
 - Māori;
 - Pacific (only for the seven 'official' Pacific DHBs); and
 - Other (includes Pacific children in the other DHBs that are not 'official' Pacific DHBs); and
2. Water fluoridation status of the school area the child attends, defined as:
 - Fluoridated
 - Non-fluoridated.

The data for this indicator will be generated by DHBs. There is a number of technical interpretation issues associated with oral health, which are centred largely around variances in:

- Processes for data collection amongst DHBs
- Technologies for management of data amongst DHBs.

DHBs have been encouraged to record data at the unit (individual child) level, using the National Health Index – this will need to be enforced if PHO level information is required.

Measure testing/piloting: Not required at this time – it is an existing measure

Implementation timeline: Measure is scheduled to move from a status of 'in development' to 'active' on 1 July 2018.

Reporting frequency: DHBs and other oral health providers currently provide data on an annual basis – in the third quarter of a financial year (i.e. January to March) for the period 1 January to 31 December of the previous year.

Measure implementation group: Service Analysis and Modelling team, Ministry of Health

¹It is acknowledged that use of the "prioritised ethnicity" approach is not consistent with New Zealand's [Statistical Standard for Ethnicity](#); but it is considered that this approach is acceptable given that:

- the historical use of this approach in the long-term data series since 1990 and
- the standard "total response" approach will not provide an accurate picture of the number of children examined by DHBs' Community Oral Health Service and other contracted third party providers.