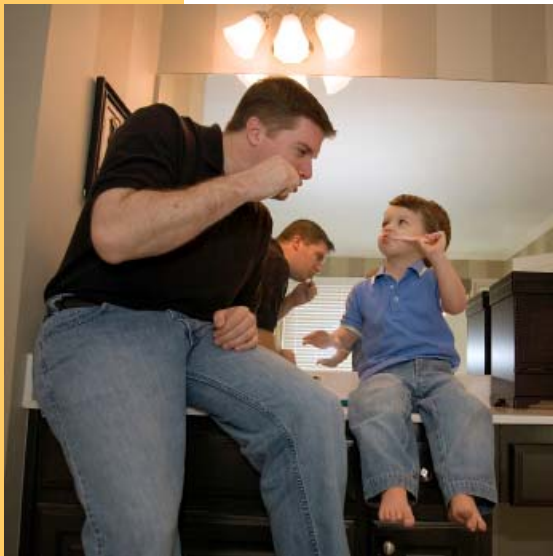


NSW Oral Health Strategic Directions 2005 - 2010



March 2008

Improving the oral health of the NSW population
Reducing inequities for people accessing oral health services
Reducing disparities in the oral health status of people in NSW

NSW DEPARTMENT OF HEALTH

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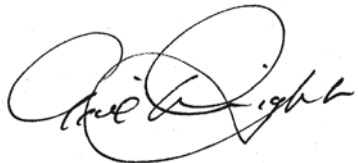
March 2008

A message from the Chief Dental Officer

The **NSW Oral Health Strategic Directions 2005 – 2010** sets the platform for oral health action in NSW into the next decade. It emphasizes those interventions that provide the greatest benefit for the people of NSW. The plan builds on existing oral health efforts in NSW and complements actions articulated in **Healthy Mouths Healthy Lives: Australia's Oral Health Plan 2004 -2013** and the **NSW Oral Health Promotion: Framework for Action 2010**. It also sits comfortably in the **NSW State Plan, NSW State Health Plan 2010** and **Healthy People NSW**.

This document was prepared by the Centre for Oral Health Strategy NSW and the State Oral Health Executive. Contributions were also made to the document from participants who attended two oral health planning days in July 2005 and other interested parties who have commented on the document.

I look forward to the successful implementation of the strategic directions outlined in this plan. It is only through a dedicated and sustained commitment to the priorities outlined in this plan that we will achieve better oral health for people in NSW.

A handwritten signature in black ink, appearing to read 'Clive Wright', with a stylized, cursive script.

Dr Clive Wright
Chief Dental Officer
NSW Department of Health

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Executive Summary

The goals for the *NSW Oral Health Strategic Directions 2005 – 2010* are:

- To improve the oral health of the NSW population
- To reduce inequities for people accessing oral health services
- To reduce disparities in the oral health status of people in NSW.

This document uses the seven strategic directions featured in **A New Direction for NSW: State Health Plan Towards 2010** and the four outcomes adapted from **Healthy mouths healthy lives: Australia’s National Oral Health Plan 2004-2013**.

Outcome	Objective	Strategies
OPERATING PRINCIPLE 1: Make prevention everybody’s business		
1. A population health approach is increased, with a strong focus on promoting oral health and the prevention and early identification of oral disease	1.1 To increase oral health promotion activity and preventive programs	1.1.1 Extend fluoridation of public water supplies 1.1.2 Develop programs for high risk groups in unfluoridated communities 1.1.3 Encourage appropriate sectors (including the corporate dental sector) to embrace and fund sustainable programs that have proved successful through thorough evaluation. 1.1.4 Provide smoking cessation advice and/or oral hygiene and dietary advice at the chairside, to relevant target groups 1.1.5 Encourage oral health/dental staff to attend health promotion and population health training 1.1.6 Develop a mechanism to manage the transition to a population health approach and identify key population health outcomes 1.1.7 Develop a structure that embeds health promotion in all the daily work activity of oral health professionals when interacting with individual patients
OPERATING PRINCIPLE 2: Create better experiences for people using health services		
2. Communities effectively support and promote oral health	2.1 To improve advocacy for oral health	2.1.1 Build significant relationships to support advocacy for oral health
OPERATING PRINCIPLE 3: Strengthen primary health and continuing care in the community		
3. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	3.1 To increase access to assessment, early identification and early intervention	3.1.1 Provide assessment and follow-up 3.1.2 Intervene early and provide appropriate follow-up 3.1.3 Explore expansion of the central Call Centre program, which uses an external provider

OPERATING PRINCIPLE 4: Build regional and other partnerships for health

4. Oral health is recognised as being an integral part of general health	4.1 To increase recognition that oral health is an integral part of general health	4.1.1 Develop strategies to ensure general health policy and the health reform include oral health 4.1.2 Include oral health in policies that advocate for low sugar (consumption and frequency) diets 4.1.3 Limit the promotion and advertising of foodstuffs and beverages that are harmful to the oral health of children 4.1.4 Promote oral health in NSW
	4.2 To increase the integration of oral health within health systems and services	4.2.1 Integrate oral health issues into relevant health policy, procedures and programs 4.2.2 Provide integrated medical-dental strategies in rural and regional NSW
	4.3 To increase partnerships with appropriate stakeholders	4.3.1 Build community and health workforce capacity in oral health and oral health promotion 4.3.2 Incorporate oral health issues into 'general' health education, promotion and prevention programs 4.3.3 Develop and implement strategies to improve the oral health for people with chronic conditions and complex care needs, and older adults / Elders

OPERATING PRINCIPLE 5: Make smart choices about the costs and benefits of health services

5. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	5.1 To increase culturally appropriate oral health services and information	5.1.1 Reorient early child oral health services to a health promotion, prevention and early intervention focus 5.1.2 Identify and address barriers for people accessing oral health services 5.1.3 Provide culturally appropriate information on oral health 5.1.4 Review and reform Priority Oral Health Program and Oral Health Fee For Service Scheme to enhance access to service delivery
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OPERATING PRINCIPLE 6: Build a sustainable health workforce

6. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	6.1 To improve training, recruitment and retention of oral health staff	6.1.1 Include oral health and oral health promotion in training modules for health and community service practitioners, and teachers 6.1.2 Enhance professional development, improved career paths and more competitive pay scales
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OPERATING PRINCIPLE 7: Be ready for new risks and opportunities

7. A population health approach is increased, with a strong focus on promoting oral health and the prevention and early identification of oral disease	7.1 To strengthen and support coordination, research and oral health information	7.1.1 Develop an oral health database / clearing house 7.1.2 Develop and implement strategies to improve data collection, reporting and analysis 7.1.3 Engage in 'action research' for OH promotion / education activities
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SECTION ONE

Introduction and Background Information

A functional review of the NSW Department of Health in 2003 recommended the devolvement of the Oral Health Branch (OHB) to an Area Health Service (AHS) as a statewide oral health strategy and policy development unit.¹ As part of this wider review the OHB was also subject to an independent review. Key findings from this review included a strategic shift towards a population oral health model for NSW and the development of a NSW Oral Health Strategic Plan.²

Following a formal bidding process, the Director General of NSW Health determined that the OHB would be devolved to Western Sydney Area Health Service (now Sydney West Area Health Service [SWAHS]) in late 2004. After the devolution the *Oral Health Branch* name changed to the *Centre for Oral Health Strategy (COHS) NSW*. The strategic and management links continue to be maintained with the NSW Department of Health, Population Health Division by the Chief Dental Officer reporting directly to the Chief Health Officer/Deputy Director-General.

In parallel with these changes **Healthy Mouths Healthy Lives: Australia's National Oral Health Plan 2004-2013**³ was released in July 2004 and was endorsed in principle by NSW Health. In addition, the **NSW Oral Health Promotion: Framework for Action 2010** was also completed after two years of development and consultation.⁴ The latter document provides an evidence-base for a range of population health strategies that are in keeping with the national oral health plan. The use of these two documents within the overarching strategic intent of population health in NSW was endorsed in principle by the Deputy Director-General, Population Health Division in 2005.

In February 2007, **A new direction for NSW: State Health Plan Towards 2010** was released.⁵ This plan reflects the health priorities in the NSW Government's State Plan⁶ with strategies based on evidence of what works and challenging targets set for the future. Seven strategic directions are featured in this document and have been integrated into the body of the **NSW Oral Health Strategic Directions 2005-2010**.

SECTION TWO

Strategic Directions Framework

2.1 Policy drivers

NSW Oral Health Strategic Directions 2005 – 2010 has a number of major policy drivers. These include:

- **Healthy Mouths Healthy Lives: Australia’s National Oral Health Plan 2004-2013**
- **NSW Oral Health Promotion: Framework for Action 2010**
- **A new direction for NSW: State Plan**
- **A new direction for NSW: State Health Plan Towards 2010**
- **Healthy People NSW: Improving the health of the population⁷**
- **NSW Health and Equity Statement: In all Fairness⁸** (Refer to **Appendix A** for further detail).

2.2 Challenges for the future

The following trends and challenges have been identified for consideration for population health services in NSW:

- **The population is growing:** In 2026 the NSW population is projected to reach 8.0 million. Most of the expansion is expected to occur along the coast.
- **The population is ageing:** In 2026 20% of the population will be people aged 65 years and older.
- **Demand for health services is increasing:** This is partly due to the ageing population.
- **Technology could improve access:** New information and communication technologies offer the potential to improve consumer’s access to health information and services, as well as boosting operating efficiency – this will require timely investment.
- **Health gains are being shared unequally:** There is a persistent gap between the most and least disadvantaged.⁷
- **There will be a growing number of people with chronic oral health conditions:** The prevalence of edentulism has decreased in older. Accordingly, a range of chronic degenerative dental disorders is now emerging, such as: tooth wear (attrition and abrasion); tooth erosion; cuspal fractures; pulp death; and root fracture. The consequences of increased tooth retention means new skills will be required to manage these age-related disorders⁹ as well as an increased demand for dental care.¹⁰

2.3 Guiding principles

The guiding principles for the NSW approach to oral health activity include:

- The delivery of population-based preventive oral health measures, such as fluoridation of public water supplies.
- The promotion of oral health through the development and implementation of health promotion strategies.
- The provision of hospital and community based acute and similar dental care services
- The provision of general dental services for disadvantaged individuals and communities who have difficulty accessing mainstream oral health services through the Priority Oral Health Program (POHP).
- Planning for future workforce needs to ensure supply meets increasing demand.

2.4 Consultation process

In early 2005 two major oral health strategic planning days were held. These involved participation from a wide range of a services providers (public and private), educators and community members. *Table 1* provides a summary of the central issues and activities distilled from the planning sessions.

Table 1: Summary of the central issues and activities distilled from the 2005 oral health planning sessions

Activity	
1. Improve NSW Strategic Approach to Oral Health – provide a 2005-2010 Master Plan that is consistent with the National Oral Health Action Plan and the NSW “Planning for the Future” initiative	
2. Increase Fluoridation to all communities	2.1 Continue support of fluoridation of public water supplies in communities with a population of > 1000 2.2 Develop strategies to address issues for high risk communities in unfluoridated areas with a population of < 1000
3. Increase population health approach	3.1 Manage shift toward prevention and early intervention 3.2 Provide staff training in preventive approaches 3.3 Include Oral Health in Primary Health Care
4. Increase community participation in health decisions about the mix and location of oral health prevention and treatment services	
5. Prioritise target groups / issues: children, older adults / Elders, Aboriginal and Torres Strait Islander peoples	5.1 Provide evidence-based pilot programs for 0-8 year-old children and their families
6. Improve Clinical Services	6.1 Access for Priority Groups 6.2 Review Emergency Services 6.3 Investigate co-payments 6.4 Review POHP
7. Address Workforce Issues through an integrated plan	

2.4 Consultation process (cont.)

Activity	
8. Improve Data Collection	8.1 Improve surveillance, monitoring, population health research and evaluation etc 8.2 Create and maintain central data base 8.3 Develop uniformity in data collection 8.4 Calibrate Non-admitted Patient Occasions of Service (NAPOOS). Planned shift from NAPOOS to case mix profiles as the indicators of AHS productivity and performance 8.5 Extend Information System for Oral Health (ISOH) 8.6 Improve outcome performance dmft / DMFT (decayed, missing, filled teeth)
9. Integrate oral health into maternal and early childhood services	9.1 Target early childhood centres / families, including day care centres and baby health clinics 9.2 All kindergarten children to have a “certificate of dental fitness” before entering school 9.3 Education and treatment for women during pregnancy 9.4 Promote a focus on Aboriginal and Torres Strait Islander programs and programs for Midwives
10. Greater use of primary preventive strategies	10.1 Use of fluoride varnishes, toothpastes and other topical vehicles 10.2 Collaboration with common risk disorder agencies and organisations (diabetes, obesity, CVD [cardio-vascular disease]) 10.3 Greater emphasis on evidence-based oral health promotion programs 10.4 Target allied health and other groups for training in oral health (train-the-trainer)
11. Greater use of secondary prevention strategies	11.1 Early intervention with “risk families” 11.2 Fissure sealants 11.3 Smarter and more appropriate recall systems

Many of the issues relate to operational activities of the health and oral health system. However, clear strategic directions were evident in the discussions and these are incorporated into this document.

2.5 The environment

NSW has developed an oral health system that best meets the competing needs for scarce health resources, the mix of public and private providers available, and the technological systems that can be implemented to prevent or effectively manage oral disease prevention. Unlike other Australian jurisdictions, NSW has moved away from a primary focus on school dental service interventions and approaches to a more broadly based and access-targeted population approach. Currently, the system is in transition between the traditional focus on children captured within a school-based system as the population ages.

2.6 Goals

The goals of the **NSW Oral Health Strategic Directions 2005 – 2010** are:

- To improve the oral health of the NSW population
- To reduce inequities for people in NSW accessing oral health services
- To reduce disparities in the oral health status of people in NSW

The following activities provide a state-wide focus on the primary functions and priority areas to address the challenges facing oral health services in the next five years and to assist in achieving the goals.

Section Three

Strategic Directions

OPERATING PRINCIPLE 1: Make prevention everybody's business						
Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
1. A population health approach is increased, with a strong focus on promoting oral health and the prevention and early identification of oral disease	1.1 To increase oral health promotion activity and preventive programs	1.1.1 Extend fluoridation of public water supplies	NSW population	No. of communities >1000 that have access to fluoridated public water supplies No of unfluoridated communities that have access to information re: the benefits of fluoridation	COHS SOHE Teeth for Health Project NSW OHP Network	L Jan08-Dec10
		1.1.2 Develop programs for high risk groups in unfluoridated communities	High risk populations in unfluoridated areas	No. of programs developed, implemented and evaluated that address smaller populations at significant risk of poor oral health (eg varnishes, re-introduction of school-based mouth rinse and sealant programs)	SOHE Teeth for Health Project University of Sydney Institute of Dental Prosthetists NSW NSW OHP Network	L Jan07-Dec10
		1.1.3 Encourage appropriate sectors (including the corporate dental sector) to embrace and fund sustainable programs that have proved successful through thorough evaluation	NSW population	No. of public oral health programs picked up by private industry	SOHE ADA Dental Industry Dental Diagnostic companies NSW OHP Network	L Jan07-10

OPERATING PRINCIPLE 1: Make prevention everybody's business (cont.)

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
1. A population health approach is increased, with a strong focus on promoting oral health and the prevention and early identification of oral disease (cont.)	1.1 To increase oral health promotion activity and preventive programs (cont.)	1.1.4 Provide smoking cessation advice and/or oral hygiene and dietary advice at the chairside	Specific target groups	No. of packages developed for use in dental clinics across NSW	NSW OHP Network SOHE ADA ADTA ADHA ADPA	M Dec08
				No. of oral health clinics providing smoking cessation advice and / or oral hygiene and dietary advice at the chairside		
		1.1.5 Encourage oral health/dental staff to attend health promotion and population health training	OH/dental staff	No. of OH / dental staff who have attended OHP training	SOHE NSW OHP Network	M Jan06-Dec06
				No. and type of activities developed and implemented after the training		
		1.1.6 Develop a mechanism to manage the transition to a population health approach and identify key population health outcomes	AHSs	No. of strategies that address the transition from a clinical 'disease model' approach to a population 'health' approach	COHS SOHE SOHSAC NSW OHP Network	S Jan07-Dec07
				No. of services reorienting to a population health approach		
		1.1.7 Develop a structure that embeds health promotion in all the daily work activity of oral health professionals when interacting with individual patients	OH/dental staff	No. OH / dental staff with HP strategies written into their PDs and performance management plans	SOHE	S Dec07 and ongoing

OPERATING PRINCIPLE 2: Create better experiences for people using health services

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
2. Communities effectively support and promote oral health	2.1 To improve advocacy for oral health	2.1.1 Build significant relationships to support advocacy for oral health	Families Young adults The local community People from rural and remote areas Older people / Elders People who speak a language other than English Primary health care providers	No. of significant relationship built with the target groups	COHS SOHE NSW OHP network	M Jan06-Dec10
				No. of communities advocating for oral health		

OPERATING PRINCIPLE 3: Strengthen primary health and continuing care in the community

3. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	3.1 To increase access to assessment, early identification and early intervention	3.1.1 Provide assessment and follow-up	All eligible pregnant women in unfluoridated areas	No. of eligible pregnant women in unfluoridated areas who have access to assessment and follow-up	SOHE ADA AHS	M
				3.1.2 Intervene early and provide appropriate follow-up		
		No. of children who have been assessed as having oral disease attend for treatment				
		No. of older adults / Elders who are at high risk of oral disease are assessed				
3.1.3 Explore expansion of the central Call Centre program, which uses an external provider	NSW community	No. of older adults / Elders who have been assessed as having oral disease attend for treatment	COHS SOHE AHS	S		

OPERATING PRINCIPLE 4: Build regional and other partnerships for health

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
4. Oral health is recognised as being an integral part of general health	4.1 To increase recognition that oral health is an integral part of general health	4.1.1 Develop strategies to ensure general health policy and the health reform include oral health	'General' health policy developers	No. of 'general' health policies and health reform that include an oral health component and have been ratified by the DoH	COHS SOHE SOHSAC Medical / allied health Population Health NSW OHP Network	M Jan06-Dec10
		4.1.2 Include oral health in policies that advocate for low sugar (consumption and frequency) diets	Mothers and children Special needs groups Older people / Elders Aboriginal and Torres Strait Islander communities	No. of low sugar diet policies that include oral health information No. of activities that include partnerships with dietitians, nutritionists and health promotion staff	Population Health NSW OHP Network	L Jan09-Dec10
		4.1.3 Limit the promotion and advertising of foodstuffs and beverages that are harmful to the oral health of children	Children and adolescents	No. of harmful foodstuffs and beverages still being promoted to children	NSW OHP Network	Jan07-Dec10
				No. of healthy foodstuffs and beverages promoted to children		
				No. of activities that include partnerships with dietitians, nutritionists and health promotion staff		
		4.1.4 Promote oral health through NSW media	NSW community	No. of media activities pertaining to oral health provided across NSW No. of activities that have produced a positive evaluation	NSW OHP Network	Jan07 and ongoing

OPERATING PRINCIPLE 4: Build regional and other partnerships for health (cont.)

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
4. Oral health is recognised as being an integral part of general health (cont.)	4.2 To increase the integration of oral health within health systems and services	4.2.1 Integrate oral health issues into relevant health policy, procedures and programs	Early childhood Schools Youth Aged care People from diverse cultural and linguistic background, in particular refugees	No. of early childhood, education, youth, aged care, and migrant policy and/or procedures that include oral health information	COHS DET DoCS DADHC NSW OHP Network	M Jan08-Dec10
				No. of strategies developed that work towards including oral health information in the NSW DET Personal Develop, Health and Physical Education (PDHPE) curriculum for primary and secondary school students		
				No. of general health programs that include oral health		
		4.2.2 Provide integrated medical-dental strategies in rural and regional NSW	Oral health staff Dental students NSW rural/regional community	No. of specialised oral health services provided in rural/regional NSW	COHS Universities	M
				No. of education, training and research opportunities provided in rural/regional NSW		
				No. of dental students who participate in rural/regional placements in NSW		

OPERATING PRINCIPLE 4: Build regional and other partnerships for health (cont.)

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
4. Oral health is recognised as being an integral part of general health (cont.)	4.3 To increase partnerships with appropriate stakeholders	4.3.1 Build community and health workforce capacity in oral health and oral health promotion	Policy makers in health, community service and education Other human services providers and their associations Teachers Organisations representing specific disadvantaged groups	No. of oral health training packages that are developed, implemented and evaluated	COHS SOHE Dental professionals NSW OHP Network	L Jan07-Dec10
				No. of the community and health workforce who have: (i) an improved knowledge of oral health and oral health promotion (ii) the ability to identify oral health conditions and pathways of referral with oral health staff		
				No. of the health workforce who have improved oral health promotion skills		
		4.3.2 Incorporate oral health issues into 'general' health education, promotion and prevention programs	Other health care providers and partners	No. of 'general' health education, promotion and prevention programs that include oral health	COHS NSW OHP Network	M Jan06-Dec06

OPERATING PRINCIPLE 4: Build regional and other partnerships for health (cont.)

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
4. Oral health is recognised as being an integral part of general health (cont.)	4.3 To increase partnerships with appropriate stakeholders (cont.)	4.3.3 Use a settings approach to improve oral health	Pregnant women Infants and preschool children School aged children and adolescents Young adults Older adults/Elders	No. of oral health strategies/ activities that focus on a settings approach	NSW OHP Network	Jan06-Dec06
		4.3.4 Develop and implement strategies to improve the oral health for people with chronic and complex care needs, and older adults/Elders	People with chronic and complex care needs Older adults / Elders	No. of strategies developed and implemented to address the needs of people with chronic conditions and complex care needs, and older adults/Elders No. of GPs who are referring patients to oral health services No. and dollar (\$) value of dental services provided under medicare	COHS GPs NSW OHP Network	M Jan08-Dec10

OPERATING PRINCIPLE 5: Make smart choices about the costs and benefits of health services

5. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	5.1 To increase culturally appropriate oral health services and information	5.1.1 Reorient child oral health services to a health promotion, prevention and early intervention focus	Children	No. of strategies developed, implemented and evaluated to improve child health services	COHS SOHE AHS NSW OHP Network	M Jan06 and ongoing
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OPERATING PRINCIPLE 5: Make smart choices about the costs and benefits of health services (cont)

Outcome	Objective	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
5. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased (cont.)	5.1 To increase culturally appropriate oral health services and information (cont.)	5.1.2 Identify and address barriers for people accessing oral health services	People on low incomes and their dependants Adolescents no longer at school Young adults Older adults/Elders People from rural and remote areas People who speak a language other than English, especially refugees Aboriginal and Torres Strait Islander communities	No. and type of barriers identified No. and type of strategies implemented to enable disadvantaged people to better access oral health services	SOHE AHS AMS NSW Universities NSW OHP Network	L Jan07-Dec10
		5.1.3 Provide culturally appropriate information on oral health	Pregnant women Parents of infants, preschool and school aged children School aged children and adolescents Young adults Older adults/Elders People who speak a language other than English Aboriginal and Torres Strait Islander communities	No. and type of resources developed in each AHS	SOHE AMAH AMS AHS NSW OHP Network	M Sep05-Dec10
		5.1.4 Review and reform service delivery policy	Oral health services	No. of service delivery models developed and tested across NSW	COHS SOHE	M

OPERATING PRINCIPLE 6: Build a sustainable health workforce

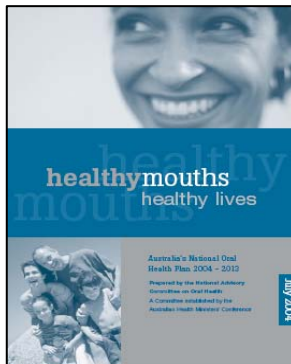
Operating	Objectives	Interventions	Population Group/s	Indicators	Responsibility	Time Frame
6. Access to appropriate and affordable services and activities (health promotion, prevention, early intervention and treatment) has increased	6.1 To improve training, recruitment and retention of oral health staff	6.1.1 Include oral health and oral health promotion in training for health and community service practitioners and teachers	Health and community service practitioners Teachers	No. of OH / OHP modules developed	Universities COHS DHA NSW OHP Network	L Jan09-Dec10
				No. of OH / OHP modules included in training for health and community service practitioners and teachers		
		6.1.2 Enhance professional development, improved career paths and more competitive pay scales	Oral health professions in public oral health services	No. of professional development opportunities available	SOHE ADA ADOHTA ADHA ADPA	L
				No. of oral health professionals satisfied working in the public health sector		
No. of oral health professionals working in rural and remote areas						

OPERATING PRINCIPLES 7: Be ready for new risks and opportunities

7. A population health approach is increased, with a strong focus on promoting oral health and the prevention and early identification of oral disease	7.1 To strengthen and support coordination, research and oral health information	7.1.1 Develop an oral health database/clearing house	Oral health staff across NSW	No. and type of oral health data, policy, practice, research, resources and evidence that are available internally and externally	COHS	M
		7.1.2 Develop and implement strategies to improve data collection, reporting and analysis	Oral health staff across NSW	No. and type of strategies implemented to improve data collection	COHS	S
				No. of staff report satisfaction with data system		
				NSW OHP Strategic Plan evaluated annually	NSW OHP Network	Dec 06 and annually thereafter
		7.1.3 Engage in 'action research' for OH promotion / education activities	Oral health staff across NSW	All OHP/HE programs are evaluated	AHS	Ongoing

Appendixes

Appendix A

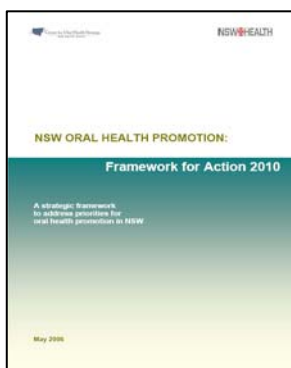


Healthy mouths healthy lives: Australia's National Oral Health Plan 2004-2013

Five broad themes underpin this document.

- Recognition that oral health is an integral part of general health
- Population health approach, with a strong focus on promoting health and the prevention and early identification of oral disease
- Access to appropriate and affordable services – health promotion, prevention, early intervention and treatment – for all people in NSW
- Education to achieve a sufficient and appropriately skilled workforce
- Communities that effectively support and promote oral health.

Available from <<http://www.sadental.sa.gov.au/Portals/57ad7180-c5e7-49f5-b282-c6475cdb7ee7/Oral Health Care.pdf>>



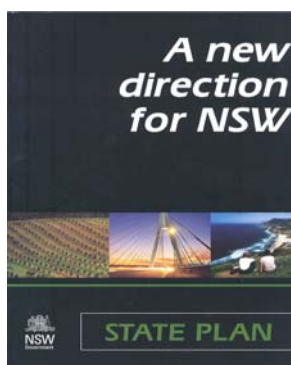
NSW Oral Health Promotion: Framework for Action 2010

Six key deliverables are articulated in this document:

- Increase fluoridation
- Include oral health in primary health care
- Increase awareness of the importance of oral health
- Strengthen coordination, training and information services for oral health promotion
- Increase partnerships with appropriate stakeholders
- Improve access

Available from

<http://www.health.nsw.gov.au/pubs/subs/sub_oral.html>

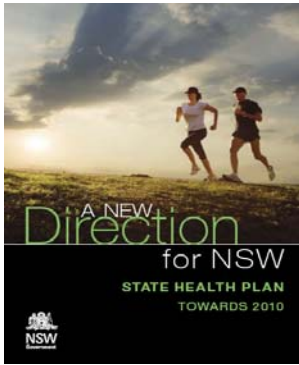


A New Direction for NSW: State Plan

Focuses on 5 areas of activity:

- Rights, respect and responsibility
- Delivering better services
- Fairness and opportunity
- Growing prosperity across NSW
- Environment for living

Available from <<http://www.nsw.gov.au/stateplan/sp12.aspx>>



A New Direction for NSW: State Health Plan – Towards 2010

Emphasises 7 strategic directions:

- Make prevention everybody's business
- Create better experiences for people using health services
- Strengthen primary health and continuing care in the community
- Build regional and other partnerships for health
- Make smart choices about the costs and benefits of health services
- Build a sustainable health workforce
- Be ready for new risks and opportunities

Available from <

http://internal.health.nsw.gov.au/pubs/2007/pdf/state_health_plan.pdf>



Healthy People NSW: Improving the health of the population

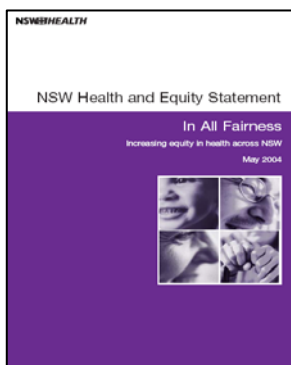
Setting the platform for population health action in NSW.

Priority issues include:

- Health improvement
- Re-investment in prevention
- Immunisation
- Communicable disease control
- Child health and wellbeing
- Mental health
- Chronic disease prevention
- Tobacco control
- Drugs and alcohol
- HIV/AIDS, hepatitis and sexually transmitted infections
- Oral health
- Healthy ageing
- Urban planning
- Environmental health

Available from <

http://www.health.nsw.gov.au/pubs/2007/pdf/healthy_people.pdf>



NSW Health and Equity Statement: In All Fairness

Increasing equity in health across NSW May 2004

Key focus areas to reduce inequities include:

- Strong beginnings: investing in the early years of life
- Increased participation: engaging communities for better health outcomes
- Developing a strong primary health care system
- Regional planning and intersectoral action
- Organisational development: building our capacity to act
- Resources for long-term reduction in health inequities

Available from

<<http://www.health.nsw.gov.au/pubs/2004/pdf/fairnessreport.pdf>>

List of Shortened Forms

Shortened Form	Spelt-out Form
ADA	Australian Dental Association
ADHA	Australian Dental Hygienists Association
ADOHTA	Australian Dental and Oral Health Therapists Association
ADPA	Australian Dental Prosthetists Association
AHS	Area Health Service
AMAH	Area Managers of Aboriginal Health
AMS	Aboriginal Medical Service
COHS	Centre for Oral Health Strategy NSW
CVD	cardio-vascular disease
DADHC	Department of Ageing, Disability and Home Care (NSW)
DET	Department of Education and Training
dmft	decayed, missing, filled primary teeth
DMFT	decayed, missing, filled permanent teeth
DoCS	Department of Community Services
DoHA	Department of Health and Ageing (Commonwealth)
GPs	General Practitioners
ISOH	Information System for Oral Health
NAPOOS	non-admitted patient occasions of service
NSW	New South Wales
OHB	Oral Health Branch
OHP	Oral Health Promotion
POHP	Priority Oral Health Program
SOHE	State Oral Health Executive
SOHSAC	State Oral Health Strategic Advisory Committee
SWAHS	Sydney West Area Health Service

Glossary

Technical Term	Definition
Action research	A reflective process of progressive problem solving led by individuals working with others in teams or as part of a "community of practice" to improve the way they address issues and solve problems. Action research can also be undertaken by larger organizations or institutions, assisted or guided by professional researchers, with the aim of improving their strategies, practices, and knowledge of the environments within which they practice.
Advocacy	The act of arguing on behalf of a particular issue, idea or person. Individuals, organizations, businesses, and governments can engage in advocacy.
Early intervention	Early Intervention is an important investment in the future of children, families and the community. It provides important building blocks that develop resilience to, or skills to avoid, challenges that may be faced, particularly at key turning points and transitions in peoples lives. Government's investment in early intervention also potentially avoids or reduces the need to direct significant amounts of public money in the future toward the lengthy and expensive support programs that are required to address serious and engrained problems.
Fluoride	A compound of the element fluorine (F), the 13 th most abundant element in nature, is used in a variety of ways to reduce dental decay.
Goal	A goal is a statement concerning the desirable improvements in the health of a given population that a health promotion program aims to achieve in the long term. It needs to be realistic and achievable within a set timeframe.
Health Outcome	A change in the health status of an individual, group or population which is attributable to a planned intervention or series of interventions, regardless of whether such an intervention was intended to change health status.
Health promotion	<i>'The process of enabling individuals and communities to take greater control over the determinants of health and thereby improve their health'.¹¹</i>
Health sector	The health sector consists of organized public and private health services (including health promotion, disease prevention, diagnostic, treatment and care services), the policies and activities of health departments and ministries, health related non-government organizations and community groups, and professional associations.
Health status	A description and/or measurement of the health of an individual or population at a particular point in time against identifiable standards, usually by reference to health indicators.
High risk groups	When the chance of developing oral disease is greater than that normally seen in the general population. People may be at high risk from many factors, including heredity, personal habits (such as smoking), or the environment (such as living in an unfluoridated, rural or remote area).
Indicators	Performance indicators are the features of each objective and strategy that are measurable and used to monitor and evaluate progress. A performance indicator sets criteria to determine whether an objective or strategy has been achieved.
Intervention (strategy)	Strategies describe the particular interventions or activities that are implemented to achieve a program's objectives and goal. Strategies should be designed to relate back to objectives. One objective may have a range of strategies.
Objectives	Objectives are the building blocks or steps that need to be achieved to reach a goal. Objectives are specific, measurable and concise statements about the immediate impact of a health promotion program, stating who will make what change, by how much, where and by when.

Glossary (cont.)

Technical Term	Definition
Oral health	The 'standard of health of the oral and related tissues which enables an individual to eat, speak and socialise without active disease, discomfort or embarrassment and which contributes to general well-being'. ¹² Oral health is integral to general health and should not be considered in isolation.
Oral health status	The current state of a person's oral health. It includes the status of wellness and any underlying oral diseases or injuries.
Population health approach	An approach to health that aims to improve the health of the entire population and to reduce health inequities among population groups. In order to reach these objectives, it looks at and acts upon the broad range of factors and conditions that have a strong influence on our health.
Prevention	Primary prevention aims to prevent the initial occurrence of an illness. Secondary prevention aims to stop or slow an existing illness by early detection and appropriate treatment. Tertiary prevention aims to reduce the re-occurrence and establishment of chronic illness.
Sector	That part of the economy that is controlled or owned by a specific organisation or industry (eg public sector/private sector).
Target group	Individuals, communities or organisations that will be influenced or have positive health gains as a result of an intervention.

References

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- ¹ NSW Department of Health. Memorandum of Understanding between NSW Health and WSAHS Oral Health for the Centre for Oral Health Strategy NSW, 2005 unpublished.
 - ² Mandala Consulting. Review of the Oral Health Branch: Report to the Director General of Health, 2004, unpublished.
 - ³ National Advisory Committee on Oral Health. Healthy mouths healthy lives: Australia's National Oral Health Plan 2004-2013. South Australia: SA Government, 2004.
 - ⁴ NSW Department of Health. NSW Oral Health Promotion: Framework for Action 2010. Sydney: NSW Department of Health, 2006.
 - ⁵ NSW Department of Health. A new direction for NSW: State Health Plan - Towards 2010. Sydney: NSW Department of Health, 2007.
 - ⁶ NSW Premier's Department. A new direction for NSW: State Plan. NSW: Premier's Department, 2006
 - ⁷ NSW Department of Health. Healthy People NSW: Improving the health of the population. NSW: Department of Health, 2007.
 - ⁸ NSW Department of Health. NSW Health and Equity Statement: In all Fairness. NSW: Department of Health, 2004.
 - ⁹ Spencer AJ. Oral health research: Current trends and future research requirements. NSW Public Health Bull 1999;10(8):101-4.
 - ¹⁰ Spencer AJ. What Options do we have for organising, providing and funding better public dental care? Commissioned paper series. Sydney: Australian Health Policy Institute, University of Sydney, Medical Foundation, University of Sydney, 2001.
 - ¹¹ Ziglio E, Hagard S, Griffiths J. Health promotion development in Europe: achievements and challenges. Health Promot Int 2000;15(2):143-54.
 - ¹² Department of Health. An Oral Health Strategy for England. London: Department of Health, 1994.