

# Dental Quality and Outcomes Framework for 2014-15

Version 1.0

# 1. Introduction

This document provides details of the Dental Quality and Outcomes Framework (DQOF) to be used in 2014-15 in the dental contract pilots.

Further background on the development of the DQOF and its purpose can be found in the document entitled "Dental Quality and Outcomes Framework (DQOF)" that was published on 4 May 2011 although the details of the DQOF for 2014-1 included in this document and the pilot Statement of Financial Entitlements (SFE) supersedes the original document.

In the dental contract pilots, 10% of contract value is effectively based on performance against the DQOF for which up to 1000 points can be achieved. The DQOF is designed, however, so that we expect the large majority of pilots to achieve at least 800 points meaning in the large majority of cases only 2% of contract value would be at risk. Where a pilot achieves less than 1000 points, any contract value deducted is entered into a notional national pool to be redistributed amongst pilots based on their relative performance. Pilots can be remunerated up to 102% of their contract value based on this additional payment. The mechanism means that pilots can be remunerated based on their relative DQOF performance whilst the total expenditure for commissioners and total income for providers as a whole remains unchanged.

The 2014-15 DQOF points allocations to different domains are as follows:

- Patient safety – 100 points
- Clinical effectiveness – 500 points
- Patient experience – 300 points
- Data quality – 100 points.

This document includes the details of the indicators in each domain, their point allocations and the performance thresholds for achieving different numbers of points.

The following annotation is used for performance thresholds:

< = Less than  
≥ = Greater than or equal to

## 2. Patient safety indicator

Safety quality measures will fall under the remit of the CQC and work with professional bodies such as the GDC. The dental profession and commissioners are committed to ensuring that clinical practice remains safe and that safety is a fundamental part of the service that is delivered.

Consequently, patient safety overall is not something that should be rewarded through a quality payment as all dentists should adhere to safe practices. However clinical aspects of patient safety can be monitored and rewarded through payment and payment will be made on the following indicator:

Indicator		Max points
SA.01	Recording an up-to-date medical history at each oral health assessment/review	100
<b>Total</b>		<b>100</b>

### SA.01 – Patient Safety Indicator 1 - Recording an up-to-date medical history at each oral health assessment/review

#### Definition

Percentage of patients for whom an up-to-date medical history is recorded at each oral health assessment/review (OHA/OHR)

Measurement will be based on all OHA/OHRs within the financial year.

Age Range: All

Exclusions: None

#### Achievement thresholds

< 90% = 0 points

≥ 90% = 100 points

#### Rationale

The capture of a patient's past medical history is required under GDC standards of professional conduct; "Make and keep accurate and complete patient records, including a medical history, at the time you treat them.

Patients are significantly at risk if this is not conducted prior to treatment.

#### Evidence

D'Cruz L, 2010. Risk management in clinical practice. Part 1. Introduction. British Dental Journal. Volume 209, No 1 July 10

#### Reporting and Verification

Practices should record the indicator information through the oral health assessment/review.

### 3. Clinical effectiveness outcome indicators

The following outcome indicators are derived from the clinical elements of the oral health assessment/review and the associated risk screening process.

Achievement of the indicators is based on either maintaining or improving a patient's condition between consecutive oral health assessments/reviews (OHA/OHRs) at the practice.

Indicator		Max points
OI.01	Decayed teeth (dt) for patients aged under 6 years old	125
OI.02	Decayed teeth (DT) for patients aged 6 years old to 18 years old	125
OI.03	Decayed teeth (DT) for patients aged 19 years old and over	125
OI.04	BPE score for patients aged 19 years old and over	75
OI.05	Number of sextant bleeding sites for patients aged 19 years old and over	50
<b>Total</b>		<b>500</b>

#### **OI.01 - Clinical Effectiveness Outcome Indicator 1 - Decayed teeth (dt) for patients aged under 6 years old**

##### **Definition**

Percentage of patients aged under 6 years old whose number of deciduous teeth with established caries is maintained or reduced between consecutive OHA/OHRs.

Denominator is all OHA/OHR pairs with age group derived from age at the first OHA/OHR and the second OHR occurring in the financial year.

Numerator is number of OHA/OHR pairs where the number of deciduous teeth with established caries on any surface recorded in the second OHR is the same or less than the number of deciduous teeth with established caries on any surface recorded in the first OHA/OHR.

Age Range: Patients aged under 6 years old

Exclusions: None

##### **Achievement thresholds**

< 75% = 0 points

≥ 75% = 125 points

The achievement threshold allows for both the impact of patients and carers on attaining required outcomes and the susceptibility of individual patients.

##### **Rationale**

Dental caries is preventable and at early stages reversible. This indicator will monitor the primary dental care team's adoption of evidenced informed preventative advice and intervention and their impact on oral health.

## Evidence

Delivering Better Oral Health (DBOH), evidence based prevention. Selected Cochrane reviews;

Marinho VC, Higgins JP, Sheiham A, Logan S. 2003. Fluoride toothpastes for preventing dental caries in children and adolescents. Cochrane Database of Systematic Reviews. Issue 2. Art. no: CD002278 DOI: 10.1002/14651858.

Marinho VCC, Higgins JPT, Logan S, Sheiham A. 2007. Fluoride varnishes for preventing dental caries in children and adolescents. Cochrane Database of Systematic Reviews. Issue 2. Art. no: CD002279. DOI: 10.1002/14651858.

NHS Dental Epidemiology programme survey of 5 year olds in 2007/08 reports that 69% of 5 year olds are caries free.

## OI.02 - Clinical Effectiveness Outcome Indicator 2 - Decayed teeth (DT) for patients aged 6 to 18 years old

### Definition

Percentage of patients aged 6 to 18 years old whose number of permanent teeth with established caries is maintained or reduced between consecutive OHA/OHRs.

Denominator is all OHA/OHR pairs with age group derived from age at the first OHA/OHR and the second OHR occurring in the financial year.

Numerator is number of OHA/OHR pairs where the number of permanent teeth with established caries on any surface recorded in the second OHR is the same or less than the number of permanent teeth with established caries on any surface recorded in the first OHA/OHR.

Age Range: Patients aged 6 to 18 years old

Exclusions: None

### Achievement thresholds

< 75% = 0 points

≥ 75% = 125 points

The achievement threshold allows for both the impact of patients and carers on attaining required outcomes and the susceptibility of individual patients.

### Rationale

Dental caries is preventable and at early stages reversible. This indicator will monitor the primary dental care team's adoption of evidenced informed preventative advice and intervention and their impact on oral health.

## Evidence

Delivering Better Oral Health (DBOH), evidenced based prevention toolkit. Selected Cochrane references; as above and

Ahovuo-Saloranta A, Hiiri A, Nordblad A, Worthington H, Mäkelä M. 2007. Pit and fissure sealants for preventing dental decay in the permanent teeth of children and adolescents. Cochrane Database of Systematic Reviews. Issue 2. Art. no: CD001830. DOI: 10.1002/14651858 CD001830 pub 2

Marinho VCC, Higgins JPT, Logan S, Sheiham A. 2007. Fluoride mouthrinses for preventing dental caries in children and adolescents. Cochrane Database of Systematic

Reviews. Issue 2. Art. no: CD002284. DOI: 10.1002/14651858.

NHS Dental Epidemiology programme survey of 12 year old children 2008/09 found 66.7% of 12 year olds with no caries experience.

### **OI.03 - Clinical Effectiveness Outcome Indicator 2 - Decayed teeth (DT) for patients aged 19 years old and over**

#### **Definition**

Percentage of patients aged 19 years old and over whose number of permanent teeth with established caries is maintained or reduced between consecutive OHA/OHRs.

Denominator is all OHA/OHR pairs with age group derived from age at the first OHA/OHR and the second OHR occurring in the financial year.

Numerator is number of OHA/OHR pairs where the number of permanent teeth with established caries on any surface recorded in the second OHR is the same or less than the number of permanent teeth with established caries on any surface recorded in the first OHA/OHR.

Age Range: Patients aged 19 years old and older

Exclusions: Edentate patients

#### **Achievement thresholds**

< 75% = 0 points

≥ 75% = 125 points

The achievement threshold allows for both the impact of patients and carers on attaining required outcomes and the susceptibility of individual patients.

#### **Rationale**

Dental caries is preventable and at early stages reversible. This indicator will monitor the primary dental care team's adoption of evidenced informed preventative advice and intervention and their impact on oral health.

#### **Evidence**

Delivering Better Oral Health (DBOH), evidence based prevention toolkit;

Baysan A, Lynch E, Ellwood R et al. 2001. Reversal of primary root caries using dentifrices containing 5,000 and 1,100 ppm fluoride. *Caries Res.* 35: 41–46.

Adult Dental Health survey 2009 reports that 72% of adults in England had no visible coronal caries.

### **OI.04 - BPE score for patients aged 19 years old and over**

#### **Definition**

Percentage of patients aged 19 years old and over whose periodontal condition (measured using the Basic Periodontal Examination (BPE) score) is maintained or improved between consecutive OHA/OHRs.

Denominator is all OHA/OHR pairs with age group derived from age at the first OHA/OHR and the second OHR occurring in the financial year.

Numerator is number of OHA/OHR pairs where the maximum BPE score recorded in the second OHR is the same or less than the maximum BPE score recorded in the first OHA/OHR. Any changes in the maximum BPE score from 0 to 1 will be treated as no change i.e. included in the numerator.

Age Range: Patients aged 19 years old and older

Exclusions: Edentate patients

### **Achievement thresholds**

< 75% = 0 points

≥ 75% = 75 points

The achievement threshold allows for both the impact of patients and carers on attaining required outcomes and the susceptibility of individual patients. The threshold also takes into consideration that periodontal disease is not always reversible.

### **Rationale**

With early identification of a periodontal condition practitioners can improve and maintain BPE status. This will monitor the primary dental care team's adoption of the BPE and evidenced informed preventative advice and intervention.

### **Evidence**

Delivering Better Oral Health (DBOH) evidence based prevention toolkit;

Guidelines for the management of patients with periodontal diseases. J Periodontol. 727: 1607–1611.

Nunn ME. 2003. Understanding the etiology of periodontitis: an overview of periodontal risk factors. Periodontology. 32: 11–23.

Albandar JM. 2002. Global risk factors and risk indicators for periodontal diseases. Periodontology. 29: 177–206.

Davies RM, Davies GM. 2005. Periodontal disease and general health. Dent Update. 32: 438–442.

Van der Weijden GA, Hioe KP. 2005. A systematic review of the effectiveness of self-performed mechanical plaque removal in adults with gingivitis using a manual toothbrush. J Clin Periodontol. 32(Suppl 6): 214–228.

## **OI.05 - Number of sextant bleeding sites for patients aged 19 years old and over**

### **Definition**

Percentage of patients aged 19 years old and over whose number of sextant bleeding sites have been maintained or reduced between consecutive OHA/OHRs.

Denominator is all OHA/OHR pairs with age group derived from age at the first OHA/OHR and the second OHR occurring in the financial year and where the patient had a minimum BPE score of 2 recorded for at least one sextant in the first OHA/OHR.

Numerator is number of OHA/OHR pairs where the number of sextants with bleeding recorded in the second OHR is the same or less than the number of sextants with bleeding recorded in the first OHA/OHR.

Age Range: Patients aged 19 years old and older

Exclusions: Edentate patients

### **Achievement thresholds**

< 50% = 0 points

≥ 50% = 50 points

The achievement threshold allows for both the impact of patients and carers on attaining required outcomes and the susceptibility of individual patients. The threshold also takes into consideration that periodontal disease is not always reversible.

### **Rationale**

With early identification of a periodontal condition and monitoring of sextant bleeding, practitioners can improve and maintain levels of gingival bleeding. This will monitor the primary dental care team's adoption of the BPE and evidenced informed preventative advice and intervention.

### **Evidence**

Delivering Better Oral Health (DBOH) evidenced based prevention toolkit;

Baker P, Needleman I, 2010. Risk management in clinical practice. Part 10. Periodontology. British Dental Journal, vol 209 no 11 557-565.

## 4. Patient experience indicators

Patient experience indicators are a fundamental part of performance frameworks in healthcare and are important for delivery of a patient-centred service. The indicators are needed to help ensure that the service delivered is in line with patient expectations and that the outcomes are in line with what patients want and need.

The patient experience indicators will be based on the results of the patient surveys issued by the NHS BSA to a random sample of patients following their completion of a course of treatment.

Indicator		Max points
PE.01	Patients reporting that they are able to speak & eat comfortably	30
PE.02	Patients satisfied with the cleanliness of the dental practice	30
PE.03	Patients satisfied with the helpfulness of practice staff	30
PE.04	Patients reporting that they felt sufficiently involved in decisions about their care	50
PE.05	Patients who would recommend the dental practice to a friend	100
PE.06	Patients reporting satisfaction with NHS dentistry received	50
PE.07	Patients satisfied with the time to get an appointment	10
	<b>Total</b>	<b>300</b>

### PE.01 - Patient Experience Indicator 1 - Patients reporting that they are able to speak & eat comfortably

#### Definition

Percentage of patients who respond positively to survey question "Are you able to speak and eat comfortably?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is "Yes". Denominator is total number of survey responses - "Yes" or "No".

#### Achievement threshold

< 75% = 0 points

≥ 75% & < 85% = 15 points

≥ 85% = 30 points

## **PE.02 - Patient Experience Indicator 2 - Patients satisfied with the cleanliness of the dental practice**

### **Definition**

Percentage of patients who respond positively to survey question "How satisfied were you with the cleanliness of the practice?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is either "Very satisfied" or "Quite satisfied". Denominator is total number of survey responses - "Very satisfied", "Quite satisfied", "Quite unsatisfied" or "Very unsatisfied".

### **Achievement threshold**

< 90% = 0 points

≥ 90% & < 95% = 15 points

≥ 95% = 30 points

## **PE.03 - Patient Experience Indicator 3 - Patients satisfied with the helpfulness of practice staff**

### **Definition**

Percentage of patients who respond positively to survey question "How helpful were the staff at the practice?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is either "Very helpful" or "Quite helpful". Denominator is total number of survey responses - "Very helpful", "Quite helpful", "Quite unhelpful" or "Very unhelpful".

### **Achievement threshold**

< 90% = 0 points

≥ 90% & < 95% = 15 points

≥ 95% = 30 points

## **PE.04 - Patient Experience Indicator 4 - Patients reporting that they felt sufficiently involved in decisions about their care**

### **Definition**

Percentage of patients who respond positively to survey question "Did you feel sufficiently involved in decisions about your care?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is "Yes". Denominator is total number of survey responses - "Yes" or "No".

**Achievement threshold**

< 85% = 0 points

≥ 85% & < 90% = 25 points

≥ 90% = 50 points

**PE.05 - Patient Experience Indicator 5 - Patients who would recommend the dental practice to a friend****Definition**

Percentage of patients who respond positively to survey question "Would you recommend this practice to a friend?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is "Yes". Denominator is total number of survey responses where the answer is either "Yes" or "No".

**Achievement threshold**

< 90% = 0 points

≥ 90% & < 95% = 50 points

≥ 95% = 100 points

**PE.06 - Patient Experience Indicator 6 - Patients reporting satisfaction with NHS dentistry received****Definition**

Percentage of patients who respond positively to survey question "How satisfied are you with the NHS dentistry received?"

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is either "Very satisfied" or "Quite satisfied". Denominator is total number of survey responses - "Very satisfied", "Quite satisfied", "Quite unsatisfied" or "Very unsatisfied".

**Achievement threshold**

< 90% = 0 points

≥ 90% & < 95% = 25 points

≥ 95% = 50 points

**PE.07 - Patient Experience Indicator 7 - Patients satisfied with the time to get an appointment****Definition**

Percentage of patients who respond positively to survey question “How do you feel about the length of time taken to get an appointment?”

Result is based on all surveys returned where completion date of course of treatment was within the financial year.

Numerator is number of survey responses where the answer is “As soon as necessary”.  
Denominator is total number of survey responses – “As soon as necessary”, “Should have been a bit sooner” or “Should have been a lot sooner”.

**Achievement threshold**

< 70% = 0 points

≥ 70% & < 85% = 5 points

≥ 85% = 10 points

## 5. Data quality indicators

The submission of timely and accurate data is an essential requirement of any quality and outcomes framework. The submission of timely and accurate data is also essential for the pilot in terms of capturing evidence and learning.

Indicator		Max points
DQ.01	Timeliness of appointment transmissions	50
DQ.02	Timeliness of FP17 submissions	50
<b>Total</b>		<b>100</b>

### DQ.01 – Data Quality Indicator 1 - Timeliness of appointment transmissions

#### Definition

Percentage of appointment transmissions successfully received by NHS Dental Services within the five day rule.

Result is based on all appointment transmissions for appointments that have taken place in the financial year. Appointments are grouped by claim reference number and the interval from appointment date to first transmission date is used.

Numerator is all appointment transmissions successfully received within the five day rule. Denominator is all appointment transmissions successfully received.

#### Achievement thresholds

< 80% = 0 points

≥ 80% & < 90% = 25 points

≥ 90% = 50 points

The achievement threshold allows for any issues that pilots may need to resolve with their software providers impacting the timely transmission of appointment data.

### DQ.02 – Data Quality Indicator 2 - Timeliness of FP17 submissions

#### Definition

Percentage of FP17s successfully received by NHS Dental Services within 2 months of completion of course of treatment.

Result is based on all FP17s received and scheduled within the financial year including any that relate to previous financial years.

Numerator is all FP17s successfully received within 62 days of the treatment completion date for the course of treatment. If a treatment completion date is not provided, the treatment acceptance date is used instead. Denominator is all FP17s successfully received and scheduled in current financial year.

#### Achievement thresholds

$< 90\% = 0$  points

$\geq 90\% \ \& \ < 95\% = 25$  points

$\geq 95\% = 50$  points