

Purpose

To provide information about the findings of the Health Unit's school-based screening program from the last school year: September 2015 to June 2016.

Methodology

Publicly funded elementary schools and three private schools participated in the school-based screening program. Students in Junior Kindergarten, Senior Kindergarten, and Grade 2 at publicly funded schools were screened in accordance with the Oral Health Assessment and Surveillance Protocol of the Ontario Public Health Standards.

Based on the screening results of the Grade 2 students at each school, the school was categorized into the following levels of screening intensity: "Low", "Medium", or "High", as per the Protocol. Increased screening intensity level requires that additional grades be screened.

The parents of the students in these grades who decline to have their children screened advise their school administrators who then provide this information to Health Unit staff. Children whose parents have consented to screening but who are absent on the day of screening may be screened on a subsequent screening day.

Student level data was collected by six Registered Dental Hygienists employed by the Health Unit. The need for and urgency of dental care was recorded and the parents advised of the required follow-up. As well, indicators of previous dental caries were recorded. Data was collected and stored in accordance with the Oral Health Assessment and Surveillance Protocol, the Health Protection and Promotion Act, the Municipal Freedom of Information and Protection of Privacy Act, and the Personal Health Information Protection Act.

The Ministry of Health and Long-Term Care's Oral Health Information Support System was used to generate summary statistics from the student level data. Historical aggregate data was accessed from archived Health Unit spreadsheets. These data were further analysed using Microsoft Excel.

ANNUAL ORAL HEALTH REPORT 2015/2016 School Year

Key Findings

<u>Participation.</u> Of the 20,048 students who were offered dental screening at the schools that participated in the school-based dental screening program, 16,231 or 81% were screened (Figure 1). For the 2015-2016 school year, the Health Unit did not have parental consent to screen 2,635 (13%) students, and 1,182 (6%) were absent on the day(s) that staff were screening at their schools. The percentage of excluded students is higher than the previous year's percentage by18%, but the percentage of absent students is unchanged.

<u>Screening intensity.</u> Among the 128 elementary schools with Grade 2 in the Health Units jurisdiction, 95 (74%) were categorized as Low intensity, 18 (14%) as Medium intensity, and 15 (12%) as High intensity (Figure 2). Schools are categorized as per the Oral Health Assessment and Surveillance Protocol which is described in the sidebar

<u>Dental caries.</u> The percentages of Junior Kindergarten, Senior Kindergarten, and Grade 2 students screened who were caries-free, (i.e. have never had tooth decay or the removal or filling of a tooth because of caries) were 76%, 68%, and 57%, respectively (Figure 3). This demonstrated a decrease in percentages from the previous school year which were 78%, 71%, and 59% respectively. Slightly more than 6% of Grade 2 students screened had two or more teeth with tooth decay (Figure 4).

<u>Urgent dental needs.</u> Seven hundred and fifty-five (755) students or 5% of those screened were found to have Urgent dental needs which deemed them clinically eligible to receive Healthy Smiles Ontario Essential and Emergency Care (formerly Children in Need of Treatment) funding for their dental care (Figure 5). The percentage of students found to have Urgent dental needs is higher than the previous school year's. To date, six hundred and eighty-nine (689) students or 91% of those found to have Urgent dental needs were referred to local dental offices for treatment.

Next Steps

- The Health Unit will continue to work on strategies such as the school-based and daycare-based fluoride varnish programs to address the percentages of Junior Kindergarten, Senior Kindergarten, and Grade 2 students who are caries-free.
- The Health Unit continues to work with schools that require active consents to develop strategies to improve participation in the program.

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Results

Figure 1. Percentages of students screened, absent and refused by school year

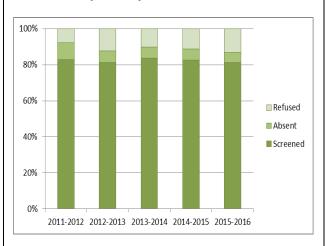


Figure 2. Screening intensity of schools by school year

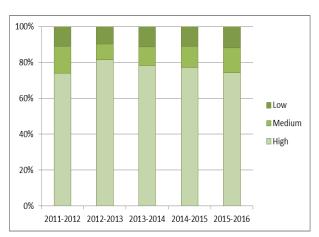


Figure 3. Percentage of students screened who were caries-free by grade for 2013-2014, 2014-2015, and 2015-2016 school years

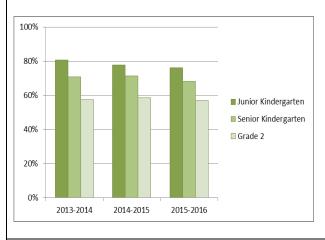


Figure 4. Percentage of Grade 2 students screened with two or more teeth affected by caries (decay, removals, or fillings) by school year

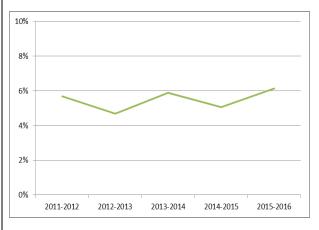


Figure 5. Percentage of students screened with Urgent dental needs by school year

