

# Public Dental Waiting Times Database, 2019-20; Data Quality Statement

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# Public Dental Waiting Times Database, 2019-20; Data Quality Statement

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Quality Statement
<b>Synonymous names:</b>	PDWT NMDS 2019-20 DQS
<b>METEOR identifier:</b>	741368
<b>Registration status:</b>	<a href="#">AIHW Data Quality Statements</a> , Superseded 21/09/2023

## Data quality

### Data quality statement summary:

This data quality statement covers seven years of data between 2013–14 and 2019–20 presented in the report [Oral health and dental care in Australia](#) collated under an agreement to report against the Public Dental Waiting Times (PDWT) National Minimum Data Set (NMDS).

- The PDWT NMDS defines three types of waiting list: general dental care, denture care and assessment. New South Wales does not have a denture care waiting list. Only New South Wales and the Northern Territory have assessment waiting lists.
- Data are not comparable across jurisdictions due to differences in how services are arranged and different arrangements that determine which people requiring treatment are placed on a public dental waiting list (including how jurisdictions prioritise certain disadvantaged population groups). Therefore, the calculation of an Australian total is not appropriate.
- Data for jurisdictions are comparable across years.
- The collection excludes people who are treated under jurisdictional priority client schemes.
- Waiting times could not be calculated for some records; for instance, where a record had no date of offer or date of first visit. Records that reported dates resulting in negative waiting times were not able to be submitted.
- Records with waiting times of zero days are included for calculations of waiting times from listing date to date of offer but are excluded from waiting times calculations for listing date to date of first visit.
- Data were not supplied by all jurisdictions in each collection year. Data for 2013–14 and 2014–15 do not include New South Wales, the Australian Capital Territory or the Northern Territory. Data for 2015–16 and 2016–17 do not include New South Wales or the Northern Territory. Data for 2016–17 does not include Victoria. Data for 2017–18 do not include New South Wales. Data for 2018–19 do not include New South Wales or the Northern Territory.
- Data for 2017–18 do not include denture care waiting list data for the Northern Territory.
- Data for 2013–14 to 2019–20 do not include assessment waiting list data for New South Wales or the Northern Territory.
- Western Australian data include only Dental Health Services information, which is the primary, but not sole, provider of public dental services in Western Australia.

**Institutional environment:** The Australian Institute of Health and Welfare (AIHW) is a major national agency set up by the Australian Government under the [Australian Institute of Health and Welfare Act 1987](#) to provide reliable, regular and relevant information and statistics on Australia's health and welfare. It is an independent corporate Commonwealth entity established in 1987, governed by a [management Board](#), and accountable to the Australian Parliament through the Health portfolio. The AIHW aims to improve the health and wellbeing of Australians through better health and welfare information and statistics. It collects and reports information on a wide range of topics and issues, ranging from health and welfare expenditure, hospitals, disease and injury, and mental health, to ageing, homelessness, disability and child protection. The Institute also plays a role in developing and maintaining national metadata standards. This work contributes to improving the quality and consistency of national health and welfare statistics. The Institute works closely with governments and non-government organisations to achieve greater adherence to these standards in administrative data collections to promote national consistency and comparability of data and reporting. One of the main functions of the AIHW is to work with the states and territories to improve the quality of administrative data and, where possible, to compile national datasets based on data from each jurisdiction, to analyse these datasets and disseminate information and statistics. The [Australian Institute of Health and Welfare Act 1987](#), in conjunction with compliance to the [Privacy Act 1988](#), (Cth) ensures that the data collections managed by the AIHW are kept securely and under the strictest conditions with respect to privacy and confidentiality.

For further information see the AIHW website [www.aihw.gov.au](http://www.aihw.gov.au)

**Timeliness:** The reference periods for these data are financial years 2013-14 to 2019-20.

**Accessibility:** The AIHW will publish data from this collection on the [AIHW website](#).

**Interpretability:** Metadata information for the PDWT NMDS is published in the AIHW's Metadata Online Registry (METeOR) at the following AIHW web address: [/content/index.phtml/itemId/686200](http://content/index.phtml/itemId/686200)

**Relevance:** The purpose of the PDWT NMDS is to collect information about the length of time that patients placed on a public dental waiting list wait for public dental care in Australia. The scope of the NMDS is adults who were placed on selected public dental waiting lists who received or were offered public dental care in the reporting period in Australia.

The time between listing date and date of offer, and listing date and date of first visit, for these reporting periods may not reflect current or future waiting times experienced by patients. The availability of clinical resources, demand for services, and client uptake of care are among the variables that will affect these figures throughout routine operations.

An increase in the number of services provided to people on the waiting list (or offers of care), especially to people who have been waiting longer, may increase overall waiting times reflected in this collection. This might occur, for example, as a result of additional clinical resources being made available.

The data collection excludes people who are treated under jurisdictional priority client schemes, and may also exclude some other people who are not placed on a public dental waiting list for any other reason. Therefore, the waiting times reported are not the median waiting times (and waiting times at the 90th percentile) experienced by all people aged 18 or over who received public dental services.

Data are reported by jurisdiction of receipt of dental care, regardless of the jurisdiction of usual residence of the person who received the treatment.

**Accuracy:**

Data were not supplied by all jurisdictions in each collection year. Data for 2013–14 and 2014–15 do not include New South Wales, the Australian Capital Territory or the Northern Territory. Data for 2015–16 and 2016–17 do not include New South Wales or the Northern Territory. Data for 2016–17 does not include Victoria. Data for 2017–18 do not include New South Wales. Data for 2018–19 do not include New South Wales or the Northern Territory.

Data for 2017–18 do not include denture care waiting list data for the Northern Territory.

Data for 2013–14 to 2019–20 do not include assessment waiting list data for New South Wales or the Northern Territory.

Data providers are primarily responsible for the quality of the data they provide, although the AIHW has undertaken basic validation of the data. The AIHW does not adjust data to account for possible data errors or missing or incorrect values; however:

- data provided that resulted in a negative waiting time were not able to be submitted
- data were excluded from waiting times calculations where a record had no date of offer or date of first visit, and so a waiting time could not be calculated.

Waiting times of zero days are included in the analysis of 'listing date' to 'date of offer' but are excluded from waiting times calculations for 'listing date' to 'date of first visit' as these are considered to be errors in the data.

Only treatments that result in a person being removed from a public dental waiting list are considered to be 'first visits'.

As two separate waiting periods are described in this indicator (that is, waiting period from 'listing date' to 'date of offer', and to 'date of first visit'), the waiting periods calculated may not be based on data relating to the same people. For example, where a record does not record the date of first visit (or the date of offer), the person's waiting time will be used only in calculating one of the measures. Where a person's date of offer falls in a different reporting period from their date of first visit, the two separate waiting periods will be reported separately in the relevant reporting periods.

In South Australia, there is a large variation between the number of denture care offers and reported first visits due to no dates being reported for first visit under the Pensioner Denture Scheme in South Australia; that is, most cases are excluded. Therefore, caution is advised in interpreting the 50th and 90th percentile waiting times for denture care.

In Tasmania, people who do not respond to offers of care are 'suspended' from the waiting list. If they later present for care, they are restored to the waiting list in their original position and retain all their previous waiting time, rather than starting a new episode of waiting. Often this places the person immediately at the top of the list, and if the resources are available they will be given an appointment. This policy can result in longer times between listing date and date of first visit and/or date of offer. It may particularly influence the 90th percentile figures.

Waiting times reported for denture care in Tasmania do not reflect the totality of clients provided with denture services for Tasmania as people requiring general dental care before having denture care are treated through the general dental care waiting list, after which they start a course of care for a denture. At no point are they added to the denture waiting list.

In some states, Indigenous people are not included in the scope of the collection as they are treated as a priority group.

Waiting times data were suppressed where the number of contributing records was fewer than 20, as waiting times are more likely to be volatile where the records numbers are low.

**Coherence:** The year 2013–14 was the first year of collection of national public dental waiting times data under the agreement to collect PDWT NMDS data.

In relation to the ability to compare data over time, and between jurisdictions:

- data for jurisdictions are comparable across years
- data are not comparable across jurisdictions due to differences in how services are arranged and different arrangements that determine which people requiring treatment are placed on a public dental waiting list (including how jurisdictions prioritise certain disadvantaged population groups). Therefore, the calculation of an Australian total is not appropriate
- Western Australian data includes only Dental Health Services information, which is the primary, but not sole, provider of public dental services in Western Australia.

## Data products

**Implementation start date:** 01/07/2018

## Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

## Relational attributes

**Related metadata references:** Supersedes [Public Dental Waiting Times Database, 2013-14 to 2016-17; Quality Statement](#)

[AIHW Data Quality Statements](#), Superseded 09/03/2021

Has been superseded by [Public Dental Waiting Times Database, 2021–22; Data Quality Statement](#)

[AIHW Data Quality Statements](#), Superseded 07/03/2024

See also [National Healthcare Agreement: PI 13–Waiting times for public dentistry, 2021](#)

[Health](#), Standard 16/09/2020

See also [Public dental waiting times NMDS 2018-2022](#)

[Health](#), Superseded 08/02/2023

See also [Public dental waiting times NMDS 2022–](#)

[Health](#), Standard 08/02/2023