

HEALTH AND WELLBEING BOARD

31 January 2017

Title:	Developing an oral health strategy in Barking and Dagenham
Report of the Director of Public Health	
Open Report	For Decision
Wards Affected: ALL	Key Decision: Yes
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Sponsor: Matthew Cole, Director of Public Health, London Borough of Barking and Dagenham	
Summary: <p>This report provides an overview of the Oral Health Strategy. The strategy identifies the oral health issues that affect children and adults in Barking and Dagenham and sets out the ambition to improve the oral health of the resident population, especially children and vulnerable adults.</p> <p>The strategy covers the key priorities that were devised by an oral health partnership strategy group. These include encouraging people to visit the dentist on a regular basis, improving diets and reducing consumption of sugary food and drinks, improving oral hygiene, promoting the provision of preventive dental care and increasing the exposure to fluoride.</p> <p>There are three evidence-based initiatives recommended within the report that could be considered for implementation locally. They are, a fluoride varnish programme targeted at preschool and young school children in a deprived community, a supervised tooth brushing programme in special schools and a training programme for the wider professional workforce who work with early years.</p>	
Recommendation(s) <p>The Health and Wellbeing Board is recommended to:</p> <ol style="list-style-type: none">1) Approve and endorse the Oral Health Promotion Strategy attached at Appendix A2) Agree the next steps set out at section 6 of the report	
Reason(s) <p>Barking and Dagenham Council has a statutory responsibility to provide, or commission an appropriate service to secure the provision of oral health surveys, oral health promotion and oral health improvement as part of overall population health improvement.</p> <p>Good oral health is important for general health and wellbeing. By way of contrast, poor oral health can affect an individual's ability to eat, speak, smile and socialise normally due</p>	

to embarrassment about the appearance of one's teeth and it can also restrict food choices. Poor oral health can increase the gravity of existing health conditions and it can also be an indicator of neglect or difficult social circumstances.

1 Introduction

- 1.1 The Oral Health Strategy for Barking and Dagenham sets out a plan for developing an oral health promotion programme in the borough. The long term aim is for children and adults to have the best possible oral health. The Strategy is attached at Appendix A.
- 1.2 The strategy has been developed in line with the evidence provided in the Joint Strategic Needs Assessment (JSNA), the key priorities of Barking and Dagenham's Health and Wellbeing Strategy and the Ambition 2020 outcomes.
- 1.3 Key national policy and related local strategies that inform the commissioning and delivery of oral health services are summarised in Appendix A of the strategy.
- 1.4 To support the Council in ensuring that interventions and activities are evidence-based and meet the diverse needs of local people, recently published oral health guidance from Public Health England (PHE), the National Institute for Health and Care Excellence (NICE) and the Local Government Association (LGA) are cited within the strategy.

2 Background

- 2.1 Barking and Dagenham Council is responsible for developing and commissioning oral health surveys, oral health promotion and oral health improvement programmes as part of PHE's dental public health intelligence programme.
- 2.2 To support the Council's oral health improvement responsibility through collaborative working with key partners and stakeholders an Oral Health Strategy Group was formed in 2015 consisting of representation from Barking and Dagenham Council's Public Health Service Block, Leisure Services, Children's Services, Drug and Alcohol Action Team, North East London NHS Foundation Trust and PHE in partnership with local dentists. The aim of the group was to collaborate on the development of the oral health strategy.

3 Vision of the Strategy

- 3.1 The vision for the Oral Health Strategy is for children and adults who are resident in Barking and Dagenham to have the best possible oral health. The ambition is to measurably improve the oral health of the resident population by 2020 especially for children and vulnerable adults.

4 Priorities

- 4.1 The strategy includes universal actions for all local communities and actions targeted to address the needs of the most vulnerable groups.
- 4.2 Based on the evidence of need for oral health services, the recommendation was to focus on children, young people and adults whose economic, social, environmental

circumstances or lifestyle place them at high risk of poor oral health or make it difficult for them to access dental services.

- 4.3 Priorities for oral health promotion and service delivery in Barking and Dagenham are to:
- A. Promote and protect oral health by raising awareness about oral health;
 - B. Improve diet and reduce consumption of sugary food and drinks, alcohol and tobacco (and thereby improve general health as well);
 - C. Encourage people to go to the dentist regularly;
 - D. Address inequalities in oral health;
 - E. Improve access to local dental services particularly for priority groups;
 - F. Improve oral hygiene;
 - G. Promote the provision of preventive dental care;
 - H. Increase early detection of mouth cancer and dental decay;
 - I. Increase exposure to fluoride;

5 Scale of the challenge in the London Borough of Barking and Dagenham

- 5.1 The London Borough of Barking and Dagenham is one of the fastest growing local authority areas in the country, with high levels of migration and a growing number with a younger age profile.
- 5.2 In addition to the population growth there is an increasing shift in the ethnic makeup of the borough, with a growing proportion of the population from black and ethnic minority (BME) origin.
- 5.3 Barking and Dagenham participated in a national oral health survey of 3-year old children in 2013. Compared to a local survey that was carried out in 2010 the results showed that oral health had improved with 18% experiencing dental disease.
- 5.4 With data for London and England at 13.6% and 11.7% respectively, oral health was found to be much worse in 3-year-old children in Barking and Dagenham. For those with disease, each child had on average 3.49 decayed, missing or filled teeth compared to 3.11 for London and 3.08 for England. There were higher rates of dental abscess at 1.9% compared to 0.5% for London.
- 5.5 A national survey of five-year-old children was carried out in 2012. The results of this survey show that the oral health of children in England continues to improve with the percentage of children who had experienced decay falling from 30.9% in 2008 to 27.9% in 2012. The percentage of children with active untreated decay also fell from 27.5% in 2008 to 24.5% in 2012. London showed no improvement, the percentage with decay experience or active untreated decay remaining the same at 32.9% and 29% respectively. Five-year-old children in Barking and

Dagenham had higher rates of tooth decay experience compared to London and England.

- 5.6 In 2012/13 dental extraction was the highest cause of hospital admissions for children in London. In Barking and Dagenham 310 children were admitted to hospital for dental extractions with 40% in the 5-9 year age group. This represented 0.5% of the 0-19 year old population, similar to that for London.
- 5.7 The results of a local oral health survey for adults carried out in 2010 found that the dental health status of adults living in Barking and Dagenham was similar or better than the average figures for England. The results are summarised below:
- The possession of 21 or more natural teeth is used to define a minimum functional dentition to ensure good oral health. In Barking and Dagenham, 94% of adults had a functional dentition, compared to 91% in London and 86% in England;
 - 63% of those surveyed were satisfied with the appearance of their teeth;
 - 54% had decayed teeth compared to 28% in London and 30% in England;
 - 20% had evidence of advanced gum disease compared to 10% for London;
 - 64% reported that they brush their teeth twice a day compared to 77% for London;
 - 50% attend for dental care only when in emergency compared to 35% for London;
 - 65% access NHS dental treatment, 20% go private and 13% utilise a mixture of services.

In addition to the clinical indicators of dental health problems, insight work revealed the impact of poor oral health on resident's general wellbeing. In Barking and Dagenham, 47% of adults who had their own teeth reported having experienced one or more oral problem that had an impact on some aspect of their life compared to 37% for London and 39% for England. The most frequently experienced problem was dental pain, followed by psychological impacts such as low self-esteem and confidence.

- 5.8 Between 2010 and 2012 the age standardised rate per 100,000 of the population for oral cancer in Barking and Dagenham was 9.2 compared to 13.5 for London and 13.2 for England.

6 Next Steps

- 6.1 The strategy was taken to the Service Development & Integration Management Group meeting who requested that we identify three evidence-based initiatives, with costings, that could be implemented locally. We worked with the Consultant in Dental Public Health at PHE and the three initiatives are as follows:
- 6.2 The three initiatives prioritised for delivery below are recommended with strong evidence of effectiveness in the document *Local authorities improving oral health*:

commissioning better oral health for children and young people (Public Health England 2014).

- 6.3 **Infant and Primary Schools:** a fluoride varnish programme targeted at preschool and young school children in a deprived community. Two schools, Northbury and Gascoigne have been selected. These large schools are situated in deprived parts of the borough with overcrowded households and a large ethnic minority population.
- 6.4 **Dental Programme for Special Educational Needs Schools:** a supervised brushing programme will engage with the whole school community in special schools to improve the oral health of children by establishing tooth brushing into the daily routine at school. This programme will be delivered in the two special schools Trinity and Bridge.
- 6.5 **Oral health training for the wider professional workforce:** this training programme will facilitate the national drive to reduce early onset of dental disease among children using people who work with early years by providing the knowledge and skills to enable them to deliver consistent evidence informed oral health interventions within their work role. The training will target: health visitors, school nurses, children’s centre staff, Community/Nursery Nurses, foster care and child minder leads and carers of older or vulnerable people.

Initiatives to improve Oral Health in Barking and Dagenham

Initiative	Target population	Objectives	Evidence and Impact	Unit cost	Annual Cost
Supervised brushing programme for special schools	Children in the two special schools Trinity (283) and Bridge (32)	To improve the oral health of children by establishing toothbrushing into the daily routine at school	Public Health England. Local authorities improving oral health: commissioning better oral health for children and young people. <i>Evidence of effectiveness</i> https://www.gov.uk/government/publications/improving-oral-health-an-evidence-informed-toolkit-for-local-authorities	1£40 per child per year x 315	£12,600
Targeted fluoride varnish programme	Children in nursery , reception and year one Northbury (299) and Gascoigne (449) schools	To target children at high risk and involve at 2 applications of fluoride varnish per year	Public Health England. Local authorities improving oral health: commissioning better oral health for children and young people. <i>Strong evidence of effectiveness</i> https://www.gov.uk/government/publications/improving-oral-health-an-evidence-informed-toolkit-for-local-authorities NICE PH55 Oral health: local authorities and partners https://www.nice.org.uk/guidance/ph55	1£30 per child per year x 748	£22,400

Initiative	Target Group	Objectives	Evidence and Impact	Unit cost	Annual Cost
Oral health training for the wider professional workforce	Wider professional workforce including health visitors, school nurses, children's centre staff carers etc	To improve the knowledge and skills of the wider professional workforce to enable them to deliver consistent evidence informed oral health information Deliver four training sessions	Public Health England 2014. Local authorities improving oral health: commissioning better oral health for children and young people. <i>Evidence of effectiveness</i> https://www.gov.uk/government/publications/improving-oral-health-an-evidence-informed-toolkit-for-local-authorities	² Four training sessions @ £2000	£8,000

¹Public Health England (2016) Return on Investment on Oral Health Interventions

²Costs include venue, catering, educational resources and trainers

Financial Implications

- 6.6 Should the Health and Wellbeing Board approve the implementation of any, or all, of the oral health initiatives a suitable source of funding for these initiatives will need to be sought. It is anticipated that the initiatives would commence in 2017-18 if approved.

(Implications completed by: Katherine Hefferman, Group Finance Manager)

Legal Implications

- 6.7 The Health and Wellbeing Board is asked to support the implementation of an Oral Health Strategy. This is in line with the NICE recommendations and the Local Authority's Joint Health and Wellbeing Strategy. There are no other legal implications arising from this report.

(Implications completed by: Eirini Exarchou, Senior Solicitor)

Public Background Papers Used in the Preparation of the Report:

Joint Strategic Needs Assessment 2015 –

<https://www.lbbd.gov.uk/council/statistics-and-data/jsna/overview/>

Joint Health and Wellbeing Strategy 2015 – 2018 – https://www.lbbd.gov.uk/wp-content/uploads/2014/11/JHWS_A4_30-9-15_RF.pdf

List of Appendices:

Appendix A – Improving Oral Health in barking and Dagenham – Oral Health