Oral Health in Early Years Scrutiny Review – Proposed Scope

Report of the Director of Public Health

Open report For decision

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Accountable Strategic Director: Anne Bristow, Strategic Director, Service Development and Integration

Summary:

The Health and Adult Services Select Committee (HASSC), at its last meeting on 21 June 2017, agreed to undertake a small-scale scrutiny review on Oral Health in 2017-18. The Committee considered three options for areas of particular focus for the review and after discussion agreed to focus on Oral Health in Early Years (Option 1). The Options Paper can be accessed via this link (see Appendix 2 of item 8): http://moderngov.barking-dagenham.gov.uk/ieListDocuments.aspx?CId=585&MId=9515&Ver=4

The aim of the Review would be to target the most deprived communities populated with young families which will offer the best opportunity to tackle dental disease in children and where the greatest difference can be made.

As requested by the HASSC on 21 June, this briefing proposes the scope of the Review in terms of questions to be answered and a work plan that outlines a time-line for the evidence sessions members will take part in and the production of the end report with recommendations to improve outcomes and practice.

Recommendation(s)

The HASSC is recommended to review and agree the proposed scope and work plan for this Scrutiny Review.

Reason(s)

It is best practice to produce a scoping report prior to commencing a scrutiny review so that members and officers can give direction to the review, consider what evidence will form the basis of recommendations and have a time-line for completion.

The topic of Oral Health in Early Years relates to the Council’s priority to ‘Enable Social Responsibility’ and the objectives of ensuring that everyone can access good quality healthcare, including dental care, when they need it’, as well as narrowing the gap in attainment and realise high aspirations for every child.
1. **Issues**

1.1 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.

1.2 In 2013 Barking and Dagenham participated in a national oral health survey of 3-year-old children. Though results showed that oral health had improved compared to the 2010 survey, Barking and Dagenham still had worse oral health than the London and England averages.

- 18% of Barking and Dagenham children had experienced dental disease, compared with figures of 13.6% for London and 11.7% for England;
- Barking and Dagenham children 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 amongst Barking and Dagenham children at 1.9% compared to 0.5% for London; and

1.3 Based on the above data, members agreed that Oral health in Early Years was an issue where the Committee could potentially add value by reviewing the reasons for poor oral health in early years, considering the quality of services available to residents to improve and treat oral health and considering what further could be done to get the right messages out to parents and children about looking after children’s oral health.

2. **Terms of Reference (ToR) for the Scrutiny Review**

   i. What are the reasons for young children in Barking and Dagenham having poor oral health?
   
   ii. What is the quality of services that are available to residents and what do they deliver to improve oral health?
   
   iii. What are the best ways of getting the right messages out to parents about looking after their children’s oral health?

3. **Proposed Work Plan for the Scrutiny Review**

<table>
<thead>
<tr>
<th>Date of HASSC session</th>
<th>Activity</th>
<th>ToR questions covered</th>
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<tbody>
<tr>
<td>20 September 2017 (HASSC meeting)</td>
<td>Presentation on the local context of oral health in early years</td>
<td>1, 2</td>
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<tr>
<td>6 October 2017 (tbc)</td>
<td>Members to meet parents of young children and professionals at Gascoigne Children’s centre</td>
<td>1, 2 &amp; 3</td>
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<tr>
<td>20 October 2017 (tbc)</td>
<td>Members meet staff at pre-school</td>
<td>1, 2 &amp; 3</td>
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<tr>
<td>Nov – (tbc)</td>
<td>Members to visit a community dentist</td>
<td>1, 2 &amp; 3</td>
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<td>11 Dec 2017</td>
<td>Draft report and recommendations circulated</td>
<td>1, 2 &amp; 3</td>
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<tr>
<td>10 Jan 2018 (HASSC meeting)</td>
<td>Members to provide comments on draft report</td>
<td>1, 2 &amp; 3</td>
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<tr>
<td>21 February 2018 (HASSC meeting)</td>
<td>Final report</td>
<td>1, 2 &amp; 3</td>
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3.1 The Local Dental Committee has been invited to participate in this Review and has agreed to be involved which will provide an expert source of advice and recommendations for improving oral health in young children. Officers will endeavour to ensure they are represented at the above sessions.

4. Financial Implications

4.1 The costs for undertaking this scrutiny review will need to be met from existing Scrutiny and Public Health budgets.

5. Legal Implications

Implications completed by: Paul Feild, Senior Lawyer, Law and Governance

5.1 The Health and Social Care Act (2012) conferred the responsibility for health improvement, including oral health improvement to local authorities. This Select Committee’s terms of reference establish its function to scrutinise any matter relating to the planning, provision and operation of the health services in the borough. The proposals are in keeping with this Committee’s function.

6. Background information

6.1 Members are recommended to familiarise themselves with the reading materials listed below under background papers which will be referred to throughout the preparation of the scrutiny report.

Background Papers Used in the Preparation of this briefing:

