

# Leeds Health & Wellbeing Board

Report author: Steph Jorysz,  
Advanced Health Improvement  
Specialist, Public Health, LCC.  
Tel: 07712214843

**Report of:** Director of Public Health

**Report to:** The Leeds Health and Wellbeing Board

**Date:** 30<sup>th</sup> September 2015

**Subject:** Children and Young People Oral Health Promotion Plan.

Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

## Summary of main issues

The Leeds Children and Young People (CYP) Oral Health Promotion Plan (2015-19) is a preventative programme from 0-19 which aims to ensure that every child in the city has good oral health. Parents, carers, children and young people will have access to effective oral health support. Targeted interventions will support families with children and young people at risk of oral health inequalities.

Leeds Health and Wellbeing Board recognise the priority of giving every child the Best Start in life and has made Best Start one of its four commitments. Leeds CYP Plan (2011-1015) has five outcomes and one of the outcomes is that children and young people choose healthy lifestyles. The CYP Oral Health Promotion Plan supports children and parents/carers to choose a healthy lifestyle and enables children to have the best start in life.

The overall outcomes of the programme are that:

- Children and young people, parents and carers are supported to care for oral health
- Children and young people's intake of sugar is reduced
- Every child's teeth are exposed to adequate amounts of fluoride

- Children and young people access preventative services from their dentist

The headline indicators for the programme are: a reduction in mean number of teeth with dental caries; extraction rates and restoration rates (if available).

## **Recommendations**

The Health and Wellbeing Board is asked:

- To consider the content of the Plan and note the process of discussion and engagement that has taken place.
- To endorse the strategic Plan and to support the development of a detailed implementation plan.
- To agree that the Board will monitor progress as part of its Best Start priority.

### **1 Purpose of this report**

- 1.1 To present the Best Start Plan to the Health and Wellbeing Board for discussion about the proposed priorities and indicators, and to seek endorsement for the Plan and support for the further development of a detailed implementation plan.

### **2. Background information**

- 2.1 In 2012 Directors of Public Health in Local Authorities became responsible for oral health improvement. Guidance for Local Authorities and oral health improvement work has been issued. 'Oral Health: local authority oral health improvement strategies' was issued by the National Institute for Health and Clinical Excellence, 2014 and Public Health England (PHE) issued 'Local Authorities improving oral health: commissioning better oral health for children and young people. An evidence informed toolkit for local authorities' in 2014.
- 2.2 Public Health undertook the Leeds Children and Young People's Oral Health Promotion Health Needs Assessment and a wide range of public engagement exercises (October 2014).
- 2.3 The Children and Young People Oral Health Promotion strategy group developed the Children and Young People Oral Health Promotion Plan. There has been wide consultation and discussion on the Plan. The Plan was discussed at Health Scrutiny on 28<sup>th</sup> July.
- 2.4 An implementation plan is currently being developed.

### **3. Main issues**

- 3.1 The Leeds Children and Young People Oral Health Promotion Health Needs Assessment (October 2014) was undertaken by Public Health. The development of the health needs assessment was supported by a steering group with representatives from the Leeds Oral Health Promotion team, Leeds Community Dental Service and a Dental Public Health Consultant, PHE. The

Health Needs Assessment provides analysis of relevant national policy and guidance; assessment of the oral health of children and young people in Leeds and an analysis of the evidence base for oral health improvement interventions. The Health Needs Assessment showed that on average children and young people in Leeds experience more tooth decay than their peers in England. There are inequalities in oral health experience in Leeds children and young people which are linked to social deprivation.

- 3.2 Six broad interventions to improve oral health were identified from the evidence base. These are to: increase uptake of preventative dental services; improve dietary intake and decrease sugar intake; support the wider workforce to promote oral health; increase exposure to fluoride products; reduce tobacco and alcohol intake.
- 3.3 A process of user engagement took place between October 2014 and December 2014 through guided discussion of key themes with parents, carers, children and young people in a range of settings. A variety of settings were selected to promote and enable users from diverse backgrounds to take part in the engagement (para 4).
- 3.4 The Children and Young People Oral Health Promotion Plan (C&YP Oral Health Promotion Plan) was developed by the Oral Health Promotion Strategy group which includes a range of stakeholders from across the council, NHS and the Third sector. Public Health chairs the strategy group.
- 3.5 The Plan was developed by the strategy group and circulated widely to partners between March and June 2015. The plan has been discussed and circulated to relevant departments in the Council, the NHS (including local dentists and Leeds Dental Network) and Third sector representatives. The process of discussion and engagement showed widespread support for the Plan, and specific strategic suggestions have been incorporated in the Plan or will be addressed in the implementation plan.
- 3.6 The Plan was discussed at Health Scrutiny on the 28<sup>th</sup> July 2015.

## **4. Health and Wellbeing Board Governance**

### **4.1 Consultation and Engagement**

- 4.1.1 A process of public engagement took place between October 2014 and December 2014 to understand experiences and views on maintaining and improving oral health. The results from the user engagement have informed the Plan and will inform the action plan.
- 4.1.2 A variety of settings were selected to undertake the engagement so a diversity of parents, carers, children and young people's views could be heard through the facilitated discussions. The settings were:
  - Parents/carers and children at Parklands Children's Centre. Different groups were consulted using a questionnaire and a focus group. Class teachers engaged with the children to understand and record their views.

- Parents/carers at Asha Bangladeshi Centre. A focus group took place.
- Young people at the Cupboard project. A focus group was facilitated.
- Young people at Leeds Youth Council. A session at Leeds Youth Council was dedicated to facilitated discussion exercises.
- Parents/carers, children and young people at Leeds Community Dental Service. Families with young people and children with dental caries were interviewed to understand their views and experiences of caring for oral health.
- A focus group of parents/carers with children and young people who have additional learning and/or complex health needs.

Key themes emerged from the public engagement exercises and these will be addressed in the implementation plan:

- There are barriers in attending the dentist. These include waiting list, travelling times and distances to a dentist.
- Parents and carers showed they did not know the key oral hygiene messages and did not know how to find the key messages. Parents said they need regular reminders about how to look after their children's teeth especially when the children are young.
- Parents said they found it difficult to brush their child's teeth and they needed support to learn how to do this.
- Parents felt that sweetened drinks and foods were so easily available to consume that a 'whole community approach' was needed to limit children and young people's intake.
- Young people said they relied on their parents and carers for oral health messages and did not directly receive messages about oral health from other sources. They said they want to develop the practical skills to brush and floss effectively.

## **4.2 Equality and Diversity / Cohesion and Integration**

4.2.1 The Plan describes a universal approach with the aim to ensure that every child and young person has an optimal opportunity to maintain and improve their oral health. The paper refers to key issues around inequalities, and describes additional targeted interventions to address oral health inequalities. An example of this is supervised toothbrushing schemes in areas with highest oral health inequalities. An equality impact assessment has been undertaken and demonstrated that the needs assessment and Plan have appropriately taken inequalities into consideration.

### **4.3 Resources and value for money**

4.3.1 The evidence based recommendations for actions to improve oral health are contained in National Institute for Health and Care Excellence (NICE) guidelines. The guidelines take account of cost effectiveness and value for money.

### **4.4 Legal Implications, Access to Information and Call In**

NONE

### **4.5 Risk Management**

NONE

## **5. Conclusions**

5.1 Children and young people in Leeds have worse oral health than their peers in England and this is an unacceptable inequality that requires action across the city. Within Leeds there are oral health inequalities which require targeted interventions. The evidence base shows there are cost effective interventions to improve oral health.

5.2 The Children and Young People Oral Health Promotion Plan will provide structure to a programme of work across multiple agencies and sectors to improve the oral health of children and young people.

## **6. Recommendations**

6.1 The Health and Wellbeing Board is asked to:

- To consider the content of the Plan and note the process of discussion and engagement that has taken place.
- To endorse the strategic Plan and to support the development of a detailed implementation plan.
- To agree that the Board will monitor progress as part of its Best Start priority.