

HEALTH SCRUTINY PANEL

<p>Date: Monday 23rd October, 2023 Time: 4.30 pm Venue: Mandela Room, Town Hall, Middlesbrough</p>

AGENDA

1. Apologies for Absence
2. Declarations of Interest
3. Minutes - Health Scrutiny Panel - 11 September 2023 3 - 10
4. Dental Health and the Impact of Covid-19 - Evidence from Public Health South Tees 11 - 26

The Scrutiny Panel will receive:

- an overview of Public Health's responsibilities in respect of oral health;
- statistical data and information in respect of oral health in Middlesbrough and the impact of Covid-19; and
- details of any future developments and innovative practice that plan to improve the oral health of Middlesbrough's population.

5. Overview and Scrutiny Board - An Update

The Chair will present a verbal update on the matters that were considered at the meeting of the Overview and Scrutiny Board held on 20 September 2023.

6. Any other urgent items which in the opinion of the Chair, may be considered.

Charlotte Benjamin
Director of Legal and Governance Services

Town Hall
Middlesbrough
Friday 13 October 2023

MEMBERSHIP

Councillors J Banks (Chair), M Storey (Vice-Chair), C Cooper, D Coupe, D Jackson, D Jones, J Kabuye, S Tranter and J Walker

Assistance in accessing information

Should you have any queries on accessing the Agenda and associated information please contact Georgina Moore, 01642 729711, georgina_moore@middlesbrough.gov.uk

HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on Monday 11 September 2023.

PRESENT: Councillors J Banks (Chair), M Storey (Vice-Chair), C Cooper, D Coupe, D Jackson and J Kabuye

ALSO IN ATTENDANCE: C Blair (Director) (North East & North Cumbria Integrated Care Board), M Fishpool (Programme Director) (You've Got This) and J Hartley (Programme Officer) (You've Got This)

OFFICERS: M Adams and G Moore

APOLOGIES FOR ABSENCE: Councillors D Jones and J Walker

23/9 **DECLARATIONS OF INTEREST**

Name of Member	Type of Interest	Item/Nature of Interest
Councillor J Banks	Non-Pecuniary	Agenda Item 4 (An Introduction to You've Got This) and Agenda Item 5 (Setting the Scrutiny Panel's Work Programme - 2023/24) - Works as a PE Teacher at a local school.

23/10 **MINUTES - HEALTH SCRUTINY PANEL - 10 JULY 2023**

The minutes of the Health Scrutiny Panel meeting held on 10 July 2023 were submitted and approved as a correct record.

23/11 **AN INTRODUCTION TO YOU'VE GOT THIS**

The Programme Director and the Programme Officer were in attendance to provide the scrutiny panel with information on the vision and key messages of the You've Got This programme, an overview of the community-focused work undertaken in Middlesbrough and details of how the programme aimed to contribute to the broader ambitions of South Tees.

The Programme Director provided the information detailed below:

- The local You've Got This programme was one of twelve Sport England place partnerships, which explored innovative ways of enabling inactive people to become more active and increase population level of physical activity.
- The local You've Got This programme was initially established in 2018.
- The aim of the programme was to explore experimental approaches to achieving population level change by focusing on those individuals who were the least physically active.
- The programme had a strong focus on applying insight (information gathered from partners and communities) and learning.
- Learning from the place partnerships was central to Sport England's new 10 year strategy, "Uniting the Movement".
- Locally, the programme formed part of Public Health South Tees, working through a wide collective partnership of organisations.
- The programme supported residents of Middlesbrough and Redcar and Cleveland.
- You've Got This co-led one of Public Health's five programme themes, the Health Environments Programme.
- The vision for the You've Got This programme was Active Lives as a Way of Life.
- A whole-system approach was taken, by the programme, to tackle inactivity.
- The programme recognised that tackling inactivity was much more than individual changes, it required action to be built into all levels of the system.
- The programme adopted a Test and Learn approach by focusing on gathering insight and learning, being open and honest about what approaches had and had not worked

and exploring the “how” and “why”, not just the “what”.

- The programme adopted Distributed Leadership, which recognised that to achieve positive outcomes, leadership and buy-in at all levels of the system was required.
- The programme recognised that not one person or group of people was able to achieve population level change.
- Collaboration was key and You've Got This involved working in partnership with over 70 organisations working together to address inactivity.
- In developing the partnership approach, a common purpose had been established to increase physical activity.
- Sport England encouraged the programme to develop and explore new ways of working.
- In achieving population level change through a whole-system approach, the programme explored the following factors:
 - Individual - attitudes, beliefs, knowledge, needs and behaviour
 - Social environment - relationships, families, support groups and social networks
 - Organisations and institutions - schools, healthcare, businesses, faith groups, charities and clubs
 - Physical environment - built, natural and transport links
 - Policy - laws, rules, regulations and codes
 - Wider determinants - socio-economic considerations, poverty
- It was acknowledged that Middlesbrough had high levels of poverty and research had identified that lower-income families were less likely to engage in physical activity.
- Smoking cessation was a good example of developing a whole-system approach to achieve population level change, by preventing smoking in public buildings and making it less socially acceptable.
- An example of relating insight work to the whole-system approach was provided in respect of the factors influencing bike usage:
 - Individual - self-confidence
 - Social environment - perceptions of safety
 - Organisations and institutions - access to bike repair services
 - Physical environment - infrastructure
 - Policy - driver behaviour
 - Wider determinants - bike theft
- The key focuses of the programme were:
 - Insight, Learning and Evaluation
 - Policy and System Change
 - Collaboration and Partnership
- Across the South Tees, the programme worked to promote physical activity into a number of different pathways, such as prehabilitation before surgery and the Type 2 Diabetes Programme. Work was also being undertaken to integrate physical activity and health into the planning of housing developments and transport provision.
- The programme also had a more focussed approach, working across four wards, two in Middlesbrough (Brambles Farm & Thorntree and North Ormesby) and two in Redcar and Cleveland (South Bank and Grangetown), taking a community led approach and focussing on areas such as growing healthy foods and creating active greenspaces.

The Programme Officer explained that in terms of workstreams, You've Got This had worked with Public Health South Tees and South Tees NHS Foundation Trust in the delivery of Prepswell, prehabilitation before surgery. Prepswell had been designed to support patients by helping them to improve their fitness, health and wellbeing before major surgery. It was the first of its kind across the UK, whereby funding from Sport England had been utilised to support work with a hospital trust. It was commented that the work aimed to ensure that surgeries were a success and to speed up recovery and healing for patients. Members heard that after the funding for You've Got This ended, the South Tees NHS Foundation Trust would continue to deliver Prepswell. The scrutiny panel was advised that the insight work and learning, which had been fundamental in the development of Prepswell, was being utilised to inform the delivery of a new service entitled Waiting Well. It was commented that Waiting Well was a similar service, which supported people who had been added to long waiting lists for surgery.

You've Got This had developed a positive working relationship with the Local Authority, which

had enabled the programme to support the delivery of the Holiday Activities Fund (HAF). Members were advised HAF was a grant fund provided to local authorities to coordinate free holiday provision for eligible children. HAF focused on providing a meal and enrichment for young people. Members heard that You've Got This had been developing a training model to empower those organisations who delivered HAF with the necessary confidence, knowledge and skills to deliver a suitable and inclusive physical activity program for young people. The work undertaken in respect of the delivery of HAF enabled You've Got This to work with the Local Authority to support wider health outcomes. By creating an inclusive environment, community organisations were able to create meaningful experiences for all participants, promoting physical and mental well-being.

It was explained that You've Got This worked closely with schools, particularly the primary education sector. Members heard that one school had monitored children's activity levels and during an hour's PE lesson, it had been identified that children were only active for 18 minutes of that hour. The scrutiny panel heard that a research model named Creating Active Schools (CAS) looked at supporting schools to understand and work towards increasing and improving physical activity across the whole school day and beyond (not just in PE lessons). It was commented that in its first year, the programme had been piloted in five schools across South Tees. In Middlesbrough, CAS had supported Easterside Academy and Breckon Hill Primary School. It was explained that whole school training, across the CAS model, had been delivered to over 100 school staff, ranging from teachers, senior leadership teams and lunchtime supervisors.

Members heard that You've Got This aimed to integrate physical activity and health into the planning of housing and transport developments. A pilot had been developed, by utilising funding, to support and advocate physical activity across the planning and transport departments of both Middlesbrough Council and Redcar and Cleveland Council. The pilot planned to coordinate the delivery of a whole-system approach to address the wider determinants of physical activity and health, with a focus on the role of the planning and transport departments across South Tees. A specific post had been created to lead the work with the local authorities. It was added that the post would be funded for the remainder of the pilot, following which it was anticipated that it would be embedded within Public Health South Tees as a way of creating legacy and sustainability.

It was advised that You've Got This had commissioned work to examine how open and green spaces were developed and to understand their uses and value in communities. The project aimed to work with communities to understand the barriers that deter residents from utilising local spaces. It was explained that the project planned to connect and bring together stakeholders, who influenced and worked with residents, to develop place-based plans and strategies. Members heard that the overall aim was to create better coordination and provide support to increase usage of open and green spaces.

Members heard that You've Got This had been supporting youth provision in the Brambles and Thorntree area, via Youth Focus North East. It was commented that the work with Youth Focus North East aimed to support community wellbeing, physical activity and engagement with open spaces.

Members heard that work had been undertaken to secure capital funding for Henry Street Field in North Ormesby. Those funds had been utilised to support Thirteen Housing and a community group to promote the use of that outdoor space and improve the community's perception of it.

In terms of growing healthy foods and gardening, You've Got This had undertaken work with Community Ventures to create a community garden (Galloway Gardens) in Thorntree, where residents could connect in a supportive, friendly environment. It was commented that the development of the community garden aimed to empower residents to make healthier choices and lifestyle changes.

The scrutiny panel heard that You've Got This had undertaken work in respect of allotment regeneration. That work had involved designing and developing opportunities to improve the physical infrastructure of allotment sites across the local area. Furthermore, it aimed to upskill existing users to enable them to manage sites and encourage new users.

It was explained that You've Got This was able to allocate small grants to increase the value

of physical activity in organisations. In phase one of the pilot, the programme had provided £100,000 of funding to facilitate the delivery of 28 different projects across South Tees. It was commented that over half of those projects would be delivered in Middlesbrough. It was highlighted that the second phase was currently open and two separate schemes of £200,000 were available. It was clarified that one fund would be open across South Tees, the other would focus on the four wards, which for Middlesbrough included Brambles Farm & Thortree and North Ormesby.

The Programme Director advised that You've Got This had been initially funded up until March 2025 and that had now been extended to September 2025. It was commented however, that Sport England's 10-year strategy: Uniting the Movement aimed to ensure the work undertaken by local delivery pilots, such as You've Got This, would continue. Members heard that work would be undertaken to ensure a continued focus on building the capacity of community organisations, embedding physical activity in services and ensuring positive collaboration and partnership work. It was commented that Tees Valley Sport had worked together with You've Got This on several projects to help communities across South Tees to become more active. It was also crucial that insight and learning continued to ensure effective ways of increasing physical activity, promoting wellbeing and influencing long-term change in local communities across South Tees.

A Member made reference to the lack of community facilities available, to encourage residents to engage in physical activity. In response, the Programme Director explained that You've Got This had been working with Tees Valley Sport and Redcar & Eston Schools Sports Partnership on a project entitled Warm Welcome. It was commented that the purpose of the project was to increase participation and opportunities by encouraging residents (particularly new residents) to engage with community activities. It was hoped that by increasing the number of residents participating in community activities, there would be an increased likelihood of those activities continuing. The importance of capacity building and leadership was highlighted. It was commented that You've Got This was able to provide small grants to enable the delivery of training, which aimed to empower residents to take on leadership roles.

A Member queried how the impact of You've Got This was measured. In response, the Programme Director explained that there were national indicators that applied and Sport England's Active Lives Survey was undertaken on an annual basis, to assess how physically active residents were across each local authority area. For the period 2018 to 2025 more detailed data was being collected on the 4 focus wards and was being compared with other areas, with similar demographics, which had not been subject to intervention. It was commented that, to date, there had been a slight increase in the uptake of physical activity. It was explained that Sport England was particularly interested in stories and the positive impact of You've Got This on individuals and their wider network.

A Member queried how You've Got This proposed to achieve whole-system change, given that some areas were outside of the programme's remit. The Programme Director explained that You've Got This worked in partnership with over 70 organisations. It was commented that, rather than implementing change, You've Got This focussed on being an enabler for population level, whole-system change. The importance of the physical environment and the planning system, in providing opportunities for everyone to be physically active, was highlighted. A Member commented that it would be useful for You've Got This to be consulted on the development of the Local Plan.

A discussion ensued in respect of the work undertaken with CAS and primary schools and Members commented on the importance of:

- children being allowed to go to school in their PE kits when undertaking sports or physical activity; and
- children being encouraged to walk or cycle to and from school.

The Programme Officer advised that schools were encouraged to assess and identify areas for improvement, that could be made throughout the whole school day. Members heard that working with CAS involved a research based whole-school behaviour change approach to increasing and improving physical activity in schools. It was commented that peer learning and insight work provided an evidence-base for change.

A Member raised a query about secure cycle storage and shelters when shopping. In response, the Programme Director explained that a partner organisation was currently undertaking some research to encourage shops to allow bicycles inside. It was also commented that the location, security and design of cycle storage facilities were also being examined.

A Member raised a query regarding housing developments and cycle infrastructure design. In response, the Programme Director advised that a plan had been published by the Government entitled Gear Change: A bold vision for cycling and walking. It was commented that the plan set out new cycling design guidance to improve the quality of cycling infrastructure. Members heard that future work would be undertaken by You've Got This to provide an evidence base, locally, to outline expectations with an aim to ensuring new developments were easily and safely accessible and navigable by foot and bike.

A Member raised a query in respect of how the focussed wards were selected. The Programme Director advised that when submitting the bid for funding to Sport England, it had been proposed that You've Got This would primarily offer support to 2 wards in Middlesbrough (Brambles & Thorntree and North Ormesby) and 2 wards in Redcar & Cleveland (South Bank and Grangetown). It was explained that those wards had been selected as they were neighbouring wards, located in a disadvantaged area and within the boundaries of South Tees. When developing the proposal, there was a need to be realistic with targets and ambitions. However, the Programme Officer advised that You've Got This was flexible in its approach and would continue to deliver projects that benefitted not only the focussed wards, but also the wider community of South Tees.

A Member raised a query about access to school facilities to promote physical activity and engagement with sports. In response, the Programme Officer explained that Sport England offered schools support and funding to open their facilities to the community during evenings, weekends and holiday periods.

A Member raised a query regarding the Prepswell programme. In response, the Programme Officer explained that the programme supported patients who were scheduled to undergo major, high-risk surgeries. It was commented that the South Tees NHS Foundation Trust had utilised funding from You've Got This to also focus on orthopaedic surgeries.

The scrutiny panel was advised that work was currently being undertaken to deliver a project with health professionals entitled Flipping Pain. The project focussed on examining ways in which professionals could offer support and advice to those people suffering with chronic pain, to help enable them to become more active with an aim to effectively alleviate and manage pain. The Director of Place Based Delivery from the ICB advised that part of the programme involved re-training professionals to think differently about pain and pain management to achieve cultural change.

The Director of Place Based Delivery advised that the Waiting Well programme focused on targeting a particular demographic within society, which meant that some residents would not be eligible. It was explained however, that advice and guidance could be accessed from those professionals who had re-trained. Members heard that each GP practice should have access to a first contact practitioner that could offer additional physio support.

The Director of Place Based Delivery explained that Prepswell provided a good example of cultural change, not only at a population level but also in the health service. Prepswell aimed to achieve better outcomes by ensuring those scheduled to undergo surgery were fit and well. It was also added that there were patient reported outcome measures and surgery outcome measures, which aimed to evidence the tangible benefits of Prepswell.

AGREED

That the information presented to the scrutiny panel be noted.

23/12

SETTING THE SCRUTINY PANEL'S WORK PROGRAMME - 2023/24

The Health Scrutiny Panel was asked to consider its work programme for the 2023/24 municipal year.

The Democratic Services Officer presented the submitted report and the following points were referenced:

- At the start of every municipal year, scrutiny panels discussed the topics that they would like to review during the coming year.
- Work programmes were useful as they provided some structure to a scrutiny panel's activity and allowed for the effective planning and preparation of work.
- The topic of Dental Health and the Impact of Covid-19 had been carried over from the previous year. It was hoped that the Health Scrutiny Panel would be in a position to conclude its evidence gathering, in respect of the topic, at its meetings scheduled to be held in October and November. Further details regarding the topic of Dental Health and the Impact of Covid-19, and the evidence that would be considered at future meetings, had been included at paragraphs 5 and 6 of the report. In addition to the information contained within the report, arrangements would also be made for Professor Tim Thompson from Teesside University to attend a future meeting, to provide information on how the university processed referrals from local dentists and people could have procedures (mostly simple extractions, scale and polish etc) for free.
- Referenced in the report was a list of topics that were anticipated to be of particular interest to the scrutiny panel. Those topics were detailed in the first table of the submitted report and included:
 - Access to GPs;
 - Avoidable Deaths and Preventable Mortality;
 - Sexual Health Services;
 - Obesity; and
 - Vaccination Uptake.
- Suggestions had also been received from the HealthWatch South Tees Project Lead and those included:
 - Women's Health Services;
 - Dentists;
 - GPs; and
 - Secondary Care.
- When considering its work programme, the scrutiny panel was asked to ensure that topics agreed for inclusion met the criteria detailed at paragraph 13 of the report.
- It was recommended that the scrutiny panel used the aid, attached at Appendix 1 of the submitted report, to prioritise issues where scrutiny could make an impact, add value or contribute to policy development.
- The scrutiny panel was asked to identify two topics it would like to include in its work programme. Once agreed, those topics would be submitted to the Overview and Scrutiny Board, on 20 September 2023, for consideration and approval.

A discussion ensued and Members referenced the following areas of interest and concern:

- Avoidable Deaths and Preventable Mortality, due to Middlesbrough's low life expectancy and high rates of under 75 mortality from causes considered preventable.
- Women's Health Services, due to the wide range of experiences encountered for those seeking support for perimenopause and menopause that had been well documented in the press.
- Access to Dental Care, due to its impact on oral health.
- Obesity, due to Middlesbrough's high levels of obesity and its association with reduced life expectancy and chronic diseases.
- Access to GPs, due to the need for patients to receive the care they require as soon as possible.

The Director of Place Based Delivery advised that the topic of Access to GPs was a national issue. Therefore, it was commented that it would be more worthwhile for that issue to be considered at a Tees Valley level by the Tees Valley Health Scrutiny Joint Committee.

Following discussion, the scrutiny panel was in agreement that the topics of Avoidable Deaths and Preventable Mortality and Obesity should be given highest priority, due to the fundamental impact on Middlesbrough's population.

In addition to those prioritised topics, a Member commented on the importance on the topic of

Women's Health Services. In response, the Director of Place Based Delivery advised that work was being undertaken to develop women's health hubs and it would be advantageous for the scrutiny panel to receive an update on the specific areas of work aimed at improving access to integrated women's health services.

A discussion ensued and Members agreed topics for inclusion in the scrutiny panel's work programme for 2023/24.

AGREED

That the topics listed below be submitted to the Overview and Scrutiny Board for approval and inclusion in the work programme of the Health Scrutiny Panel for 2023/2024:

Topic carried over from 2022/23:

- **Dental Health and the Impact of Covid-19**

In-depth reviews:

- **Avoidable Deaths and Preventable Mortality**
- **Obesity**

Update:

- **Women's Health Services (including the development of women's health hubs)**

23/13

OVERVIEW AND SCRUTINY BOARD - AN UPDATE

The Chair explained that at the meeting of the Overview and Scrutiny Board, which was held on 26 July 2023, the Board had considered:

- an update from the Deputy Mayor and Executive Member for Education and Culture;
- the Executive Forward Work Programme;
- an update on Middlesbrough's Boundary Review 2023; and
- updates from the Scrutiny Chairs.

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Oral Health in Middlesbrough

Why is Oral Health Important?

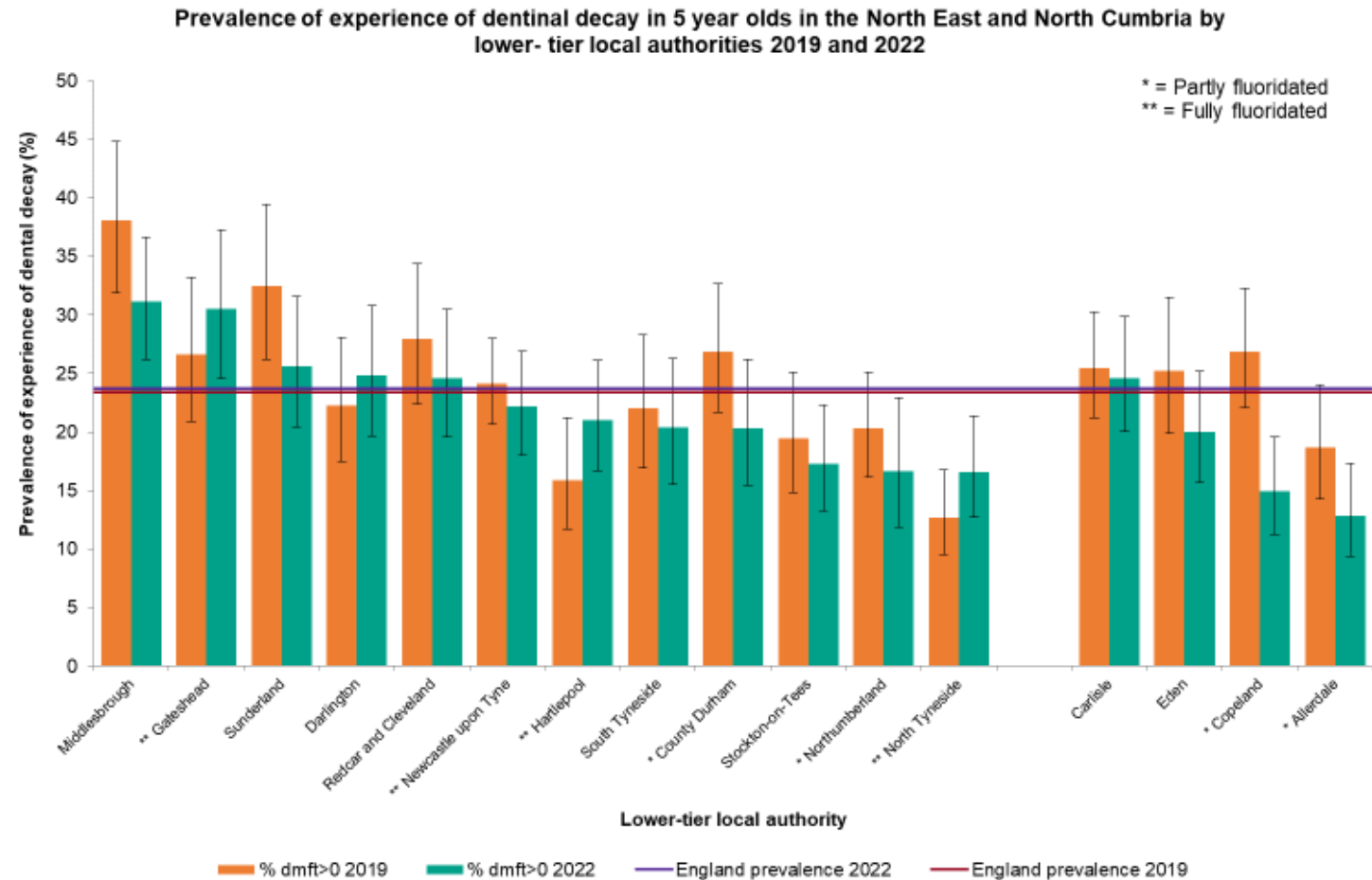
- Oral health is an important public health concern and can have a significant impact on society and individuals.
- Tooth decay is the most common oral disease affecting children and young people (CYP) in England, yet it is largely preventable.
- The extraction of decayed teeth has become the most common reason for hospital admission of under-18-year-olds in England.
- Poor oral health can affect children's and young people's ability to sleep, eat, speak, play and socialise with other children. Other impacts include pain, infections, poor diet, and impaired nutrition and growth.
- Poor oral health also has wider impacts at school and for families if a child misses' school or when a parent must take time off work if their child needs dental treatment. When children are not healthy, this affects their ability to learn, thrive and develop. Good oral health can contribute to “school readiness”.

Why is Oral Health Important?

- There is a **significant relationship between deprivation and poorer oral health**, directly impacting many oral health related illnesses (dental decay, tooth loss, oral cancer), as well as the wider impact related to quality of life.
- Poor oral health may be indicative of dental neglect and wider safeguarding issues.
- Dental neglect is defined as “the persistent failure to meet a child’s basic oral health needs, likely to result in the serious impairment of a child’s oral or general health or development”.
- Dental teams can contribute to a multi-agency approach to safeguard children and guidance is available to support this role.
- Tooth extractions under general anaesthetic are not only potentially avoidable for most children but also costly. The cost of extracting multiple teeth in children in hospitals in 2011-2012 was £673 per child with a total NHS cost of nearly £23 million.

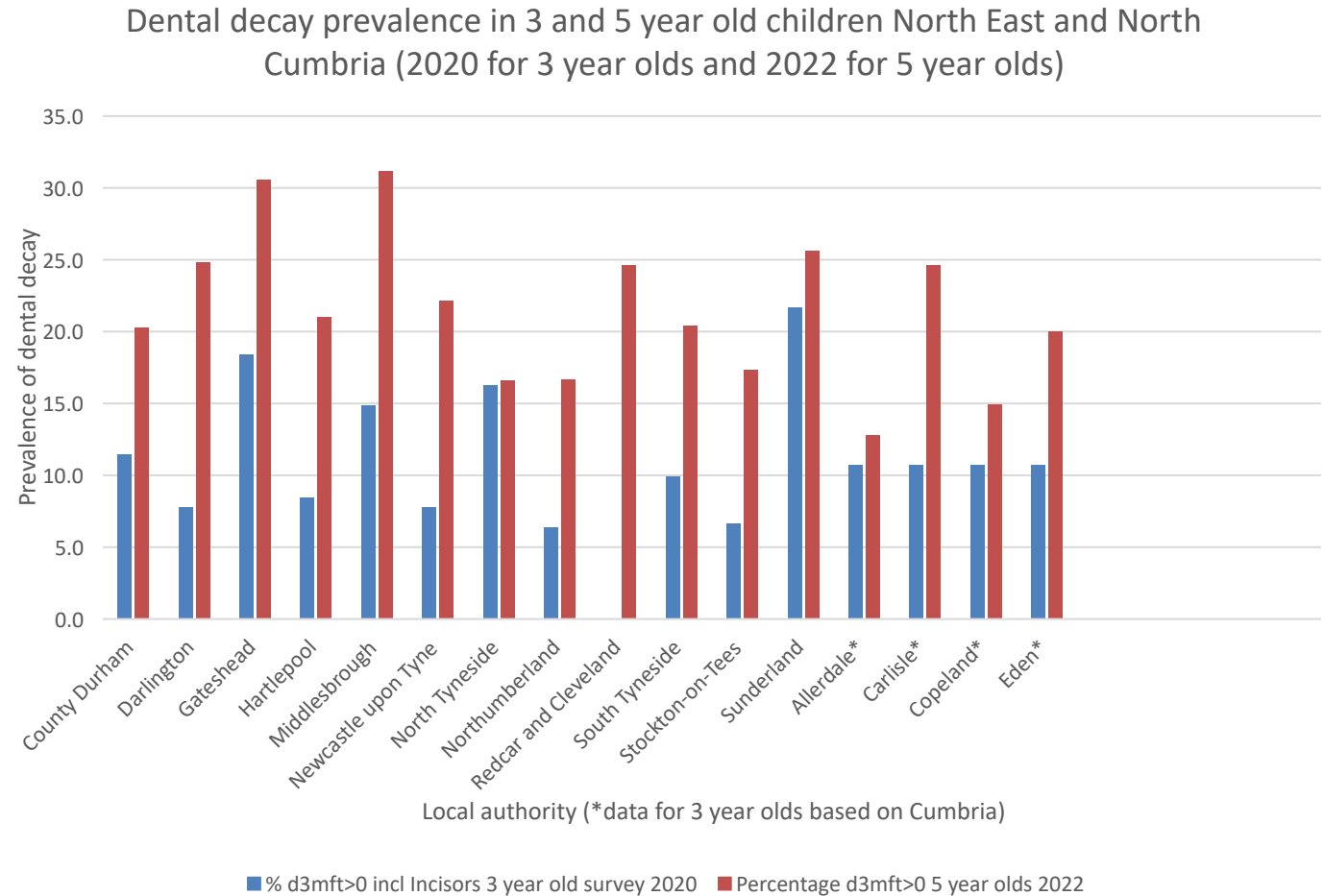
- Across NENC there have been no significant improvements in oral health in 5-year-old children.
- **Middlesbrough had significantly more dental decay than the England average.**
- **Oral health inequalities are stark in all NENC areas and closely aligned to deprivation.** It's not possible to show the inequalities at ward level due to sample sizes.
- A further census survey of 5-year-old children carried out in 2023/24 will provide a larger sample size and enable analysis at ward level to identify health inequalities and the impact of COVID.

Page 14



- There is a significant increase in dental decay prevalence from age 3 to 5 years old in all areas of NENC.
- In Middlesbrough, there is a **doubling of decay from 3- to 5-year-olds** from the most recent surveys undertaken in 2020 and 2022.
- The increase in rates of dental disease can be explained by the decay process. It can take 18 months or more from the start of decay (enamel decay) to progress to a stage when a filling is required (dentinal decay).

Page 15



- Early diagnosis (enamel decay) and treatment with fluoride, can reverse the early decay process.
- Encouraging dental attendance when teeth first come through (check at age 1) can provide opportunities for prevention advice and fluoride intervention to reverse the effect of early decay.
- Optimising fluoride interventions (fluoride varnish) within dental practices and supervised toothbrushing programmes in schools can reduce the significant increases in disease rates in very young children.

- The 2018 oral health survey of adults attending general practice reports 1 in 3 participants living in more deprived areas had untreated tooth decay compared to 1 in 5 in the less deprived areas.

- Poor oral health impacts daily living, including self-consciousness or embarrassment because of problems with teeth, mouth or dentures, difficulty eating any foods and painful aching in the mouth.

- Adults in Middlesbrough (27.9%) suffered more oral health impacts than the average for the North East (22.6%) or England (17.7%).

Upper-Tier LA Name	% with active decay (DT>0)	Average number of decayed teeth (for those with active decay)	% with dentures	% with PUFA	% with any treatment need	% with an urgent treatment need	% suffering any oral health impacts fairly or very often	Local authority IMD ranking (2019)
England	26.8	2.1	15.4	5.2	70.5	4.9	17.7	
North East	27.3	2.2	18.6	5.3	75.4	3.5	22.6	
County Durham	26.8	1.8	16.9	2.8	84.5	7.2	17.6	62
Darlington	27.3	2.4	19.6	3.6	87.3	7.9	21.2	77
Gateshead	26.0	2.8	15.4	2.5	63.1	0.8	22.8	47
Hartlepool	25.9	3.0	11.8	3.2	80.0	2.4	24.5	10
Middlesbrough	28.5	2.9	20.7	10.7	75.7	3.4	27.9	5
Newcastle							11.8	41
North Tyneside								111
Northumberland	43.8	1.8	22.3	1.8	84.8	11.6	13.6	116
Redcar and Cleveland	27.4	2.3	17.9	9.2	80.4	1.7	21.8	40
South Tyneside	18.6	1.8	19.6	6.8	47.9	0.5	25.8	27
Stockton-on-Tees	29.5	1.9	17.5	6.7	87.4	0.0	25.0	73
Sunderland	24.0	2.8	20.0	4.1	64.0	1.3	24.7	35
Cumbria (No data for Eden)	29.9	2.0	17.8	5.1	66.7	4.3	19.0	No data
England	26.8	2.1	15.4	5.2	70.5	4.9	17.7	

- The Health and Social Care Act (2012) amended the National Health Service Act (2006) to confer responsibilities on local authorities for health improvement, including oral health improvement, in relation to the people in their areas.
- Local authorities are statutorily required to provide or commission oral health promotion programmes to improve the health of the local population, to an extent that they consider appropriate in their areas.
- They are also required to provide or commission oral health surveys. The oral health surveys are carried out as part of the Public Health England (PHE) dental public health intelligence programme (formerly known as the national dental epidemiology programme):
 - assessment and monitoring of oral health needs
 - planning and evaluation of oral health promotion programmes
 - planning and evaluation of the arrangements for the provision of dental services
 - reporting and monitoring of the effects of any local water fluoridation schemes covering their area
- Local authorities also have the power to make proposals regarding water fluoridation schemes, a duty to conduct public consultations in relation to such proposals and powers to make decisions about such proposals.
- NICE Guidelines include improving oral health by developing and implementing a strategy that meets the needs of people in the local community. The strategy should aim to promote and protect people's oral health by improving their diet and oral hygiene, and by encouraging them to visit the dentist regularly.

What are Public Health Delivering? Prevention

- Toothbrushing programmes taking place in primary schools and early years settings, delivered by the Tees Oral Health Promotion.
- Eat Well Schools and Early Years Awards - raising awareness of the importance of oral health, as part of a 'whole-school/settings' approach in all primary and secondary schools, along with early years settings.
- Health Visitors - 2-2.5-year review advising families to register with a dentist
- Care homes:
 - MUST programme – oral health advice included within staff training.
 - MUST involved in the Teesside University ELDER Study – improving the oral health of older adults using milk supplemented with fluoride and probiotics.
 - Implementing Caring for Your Smile Programme

What are Public Health Delivering? Education

- Toothbrushing scheme within primary schools and early years settings. Staff trained to deliver oral health advice and information.
- Midwives and Health Visitors to promote oral health and complete oral health training.
- Train staff working within early years including family hubs, nurseries and childminders in oral health promotion.
- Care homes – staff training and oral health campaigns
- Looked After Children – PH Nurses receive oral health training.

- Health & Social Care staff:

Care delivered at home, Learning disabilities, vulnerable groups e.g., drug alcohol services, travellers, homeless etc. All receive annual oral health training.

Table: Percentage of children and adults accessing NHS primary dental care

- Access to NHS primary dental care for children in March 2022 has not fully recovered to pre-pandemic levels. It is lower (48.5%) than 2020 (67.8%).
- The post COVID recovery position is replicated for adults (39.9% compared to 63.4%) for Middlesbrough.
- Data from the 0-19 Healthy Child Programme in Middlesbrough, shows registrations with a dentist for children aged 2-2.5 years old at the health visiting mandated visit, is now 60%. Pre pandemic this figure was approximately 85%.

Area	Percentage of children (0-17y) accessing dental care in 12 months before:			Percentage of adults (18y+) accessing dental care in 24 months before:		
	31 March 2020	31 March 2021	31 March 2022	31 March 2020	31 March 2021	31 March 2022
England	58.3%	23.1%	45.4%	49.3%	43.1%	34.6%
North East Region	61.1%	21.6%	45.8%	56.2%	48.7%	39.1%
North ICP	63.4%	22.7%	47.4%	56.2%	48.7%	38.9%
Gateshead	64.9%	21.9%	49.2%	57.8%	50.6%	41.2%
Newcastle	65.0%	24.7%	48.6%	57.4%	48.0%	39.3%
North Tyneside	60.1%	19.2%	45.0%	55.0%	47.5%	37.3%
Northumberland	63.1%	23.5%	46.6%	54.8%	49.0%	38.3%
Central ICP	57.6%	18.2%	41.9%	55.1%	47.0%	37.6%
County Durham	54.0%	17.6%	40.7%	50.5%	42.5%	33.8%
Sunderland	61.6%	18.5%	43.0%	59.3%	51.3%	40.7%
South Tyneside	62.9%	19.8%	44.2%	63.8%	55.0%	45.5%
Tees Valley ICP	63.0%	22.8%	48.4%	57.7%	50.9%	41.3%
Darlington	64.0%	26.5%	44.6%	56.6%	49.6%	38.8%
Hartlepool	54.2%	18.6%	42.9%	51.6%	45.6%	38.6%
Middlesbrough	67.8%	20.5%	48.5%	63.4%	53.6%	39.9%
Redcar and Cleveland	61.9%	20.9%	47.0%	61.1%	53.9%	45.1%
Stockton-on-Tees	63.6%	25.9%	53.6%	54.8%	50.0%	42.3%
Cumbria	60.6%	27.0%	48.3%	46.6%	39.8%	30.6%

- At a population level, **Flouridation is the most effective way of reducing inequalities**, as it ensures that people in the most deprived areas receive fluoridated water.
- Water fluoridation should be part of an overall oral health strategy.
- The Health and Care Act 2022 has moved the responsibilities for initiating and varying schemes for water fluoridation from local authorities to the Secretary of State.
- Public consultation will continue to be an important part of any future water fluoridation proposals.

- Acknowledge the statutory requirements placed on the local authority and its partners
- Develop an Oral Health Strategy for Middlesbrough
- Acknowledge Oral Health is a key health and wellbeing priority
- Implementation of the Dental Epidemiology Survey for 5-year-old children in 2023
- Continue to deliver oral health promotion training to all front-line practitioners
- Ensure frontline health and social care staff can give advice on the importance of oral health

- Create healthy environments and to promote oral health – Healthy Weight Declaration (drinking water, sugar free food, breastfeeding).
- Incorporate oral health promotion in existing services for all children, young people and adults at high risk of poor oral health, including the continuity of delivering supervised toothbrushing programmes in early years settings and schools.
- Consider fluoride varnish programmes in areas where children are at high risk of poor oral health
- Review evidence-based interventions to improve oral health in Middlesbrough over the next 5 years

Questions?

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