



Task & Finish Group Report

**Spotlight review concerning dental
health and childhood obesity**

September 2018

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and childhood obesity**
Chairperson's Foreword



The children and young people scrutiny committee agreed that a spotlight review focusing on dental health and childhood obesity was added to the committee's work programme for 2018/19. This was requested resulting from concern about the levels of tooth decay and childhood obesity in Herefordshire as reported in the Understanding Hereford Joint Strategic Needs Assessment 2017.

We would like to place on record our thanks to all who contributed. The attendance at the spotlight review from a range of local partner organisation was excellent and I am grateful for the time and effort of the council's officers and all our local partners. I commend the quality of the presentations which provided a comprehensible and concise overview of some very complex areas. The quality of the presentations and the involvement of all those in attendance in the lively and constructive discussions allowed for a number of recommendations to emerge from the day.

I must also thank all those members of the council who attended and contributed to the day including:

Cllr Polly Andrews, Cllr Sebastian Bowen, Cllr Chris Chappell, Cllr John Hardwick, Cllr Jenny Hyde, Cllr Peter Jinman, Cllr Jon Johnson, Cllr Jonathan Lester, Cllr Felicity Norman Cllr Anthony Powers, Cllr Paul Rone, Cllr David Summers and Cllr Elissa Swinglehurst

Councillor Carole Gandy, October 2018
Chairperson of the Spotlight Review

1 Executive Summary

1.1 At its work programming session on 4 June members of the children and young people scrutiny committee requested that a spotlight review focusing on dental health and childhood obesity was added to the committee's work programme for 2018/19. This was requested resulting from concern about the levels of tooth decay and childhood obesity in Herefordshire as reported in the Understanding Hereford Joint Strategic Needs Assessment 2017. At its following meeting, on 16 July, the committee agreed that the spotlight review would take place in the afternoon of 17 September.

1.2 The outcomes and recommendations from the spotlight review can be condensed into nine topics. The recommendations focus on:

Dental Health

1. Recruitment of dentists
2. Dental Access Centres and Rurality
3. Early Years Dental Access
4. Sugary Food Advice
5. Access to Dentists
6. Fluoridation

Childhood Obesity

7. Maternity Services
8. Childhood Obesity and Mental Health
9. Planning Restrictions on Fast Food Restaurants

2. Composition of the Spotlight Review

2.1 Initially members of the children and young people scrutiny committee and the adults wellbeing committee were invited to participate in the review and this was later extended to all members of the council. At the spotlight review 14 members attended to contribute to discussions and the consideration of recommendations.

3 Context

Why did we set up the group?

3.1 The spotlight review was convened in order to:

- To provide a forum to undertake a comprehensive spotlight review of statistics, services and issues surrounding childhood obesity and dental/oral health;
- To enable the identification of gaps and opportunities for joint working;
- To assess the progress of key projects and available performance data;
- To consider potential future initiatives and projects; and
- To inform a report to the children's scrutiny committee with potential recommendations relating to childhood obesity and dental health in Herefordshire.

What were we looking at?

3.2 A range of local partner organisations were invited to the review and they were asked to present evidence and detail of work to progress the priorities of dental health and childhood obesity.

Who did we speak to?

3.3 The spotlight review engaged the following organisations in the discussions:

Organisation	Attendee
NHS England West Midlands	Nuala Woodman, Deputy Head of Commissioning David Rosling, Contracts and Projects Manager
Healthwatch Herefordshire	Christine Price, Chief Officer
Health and Wellbeing Board	Jonathan Lester (Chair)
Herefordshire Clinical Commissioning Group	Richard Watson, Children's Joint Commissioning Manager Jade Brooks, Deputy Director Of Operations at NHS Herefordshire Clinical Commissioning Group

3.4 There were also attendees from Herefordshire Council including representatives from public health, children and families (early help), transportation and strategic planning, as below:

Organisation	Attendee
Public Health (Herefordshire Council)	Karen Wright, Director of Public health Lyndsay MacHardy, Public Health Specialist Caryn Cox, Consultant in Public Health
Children's Wellbeing Directorate (Herefordshire Council)	Nicky Turvey, Early Help Manager Susan Eales, Senior Support Worker
Transportation Team (Herefordshire Council)	Jeremy Callard, Transportation Strategy Manager
Strategic Planning (Herefordshire Council)	Kevin Singleton, Team Leader, Strategic Planning

3.5 Apologies for the spotlight review were received from the Care Quality Commission.

What did we read?

3.6 The group looked at the information below to undertake this review:

Dental Health – Facts and Figures about Herefordshire
Obesity – Facts and Figures about Herefordshire
Understanding Herefordshire 2018 – JSNA
Care Quality Commission – Dental Services Inspections
Children's Dental Health – Healthwatch Herefordshire Report – April 2018
Herefordshire Health and wellbeing Strategy
National Child Measurement Programme (NCMP)
Healthy Lifestyles
Over the rainbow
Local Transport Plan
Tipping the scales – LGA guidance, Use of Planning Powers to limit takeaways

What did we ask?

3.7 In order to undertake the review the lines of questioning below were proposed:

- What evidence exists of the provision and performance of services for dental health and childhood obesity in Herefordshire: and
- What work has been undertaken to progress the priorities of dental health and childhood obesity.

What did we find from our research?

3.8 In 2014/15, 59.0 per cent of Herefordshire's five-year-olds were free from dental decay, a significantly lower proportion than nationally (75.2 per cent) and regionally (76.6 per cent). The proportion was no better than in 2007/08 (61.3 per cent), and it is significantly worse than in Herefordshire's comparator group of local authorities. The average (mean) number of decayed, missing or filled teeth in five-year-olds in Herefordshire was 1.43, much higher than in the West Midlands region (0.72) and in England as a whole (0.84). Herefordshire is also the worst performing authority of its comparator group for this indicator and is performing poorly compared to other areas where the water supply is not fluoridated. In 2015, the National Dental Epidemiology Programme survey of five-year-olds found that the proportion of children with dental decay was slightly higher in Leominster wards than Hereford, although the level of decay (i.e. the number of decayed, missing or filled teeth) was higher in Hereford.

3.9 Fluoride is a natural product and can be found in drinking water and foods; it is also added to toothpaste. Lower incidence of severe tooth decay has been recorded in populations whose drinking water contains greater concentrations of fluoride than in populations with low drinking water fluoride concentrations. Water fluoridation schemes adjust fluoride levels in water supplies in some parts of England in an effort to reduce dental decay. Areas in the Midlands including Birmingham have had fluoridated water since the early 1960s. They have lower levels of tooth decay than comparable areas in England where the water does not have added or naturally occurring fluoride in. Around 5.8 million people in England, across 27 councils, receive fluoridated water (Source: Gov.UK).

3.10 In England, child BMI is measured at Reception Year (age 4-5 years) and Year 6 (aged 10-11 years) through the mandatory National Child Measurement Programme (NCMP). For the majority of children excess weight gain is the result of eating more calories than needed and/or undertaking too little physical activity to match calorie intake, or a combination of both. In 2016/17, data from the NCMP indicate that 9.8 per cent of reception year children in Herefordshire were obese, while the combined proportion of obese and overweight was 22.9 per cent. For year 6 children, the prevalence of obesity was 19.2 per cent, while the combined figure for obese and overweight children was 34.8 per cent. For both age groups there were no significant differences between the local and national figures. In Herefordshire, as a year group passes from reception to year 6 the proportion of obese children increases by 102 per cent, a pattern similar to that seen both nationally and regionally. Children most at risk of becoming obese when older are those where one or both parents are overweight or obese, suggesting that tackling adult obesity has to run in tandem with addressing childhood obesity.

3.11 Active Travel Measures are contained in the Herefordshire Council Local Transport Plan 2016- 2031. One of the transport plan's objectives is to Promote healthy lifestyles – by making sure that new developments maximise healthier and less polluting forms of transport by

delivering and promoting active travel schemes and by reducing short distance single occupant car journeys on the roads of Herefordshire.

3.12 Some councils are using the planning system to introduce restrictions on the proliferation of fast food takeaways, as part of a holistic approach to tackling obesity.

What did we find from talking to Partner Organisations and Officers?

3.13 Each of the organisations in attendance at the spotlight review presented details of system responsibilities across dental health and childhood obesity. Details of those projects and initiatives in progress across Herefordshire were also presented together with latest statistics and further detail on potential, future projects.

3.14 Those presentations undertaken on the day can be provided on request. Healthwatch Herefordshire presented findings and recommendations of the Healthwatch Herefordshire Children's Dental Health Report from April 2018 (weblink).

4. Summary of our findings

Dental Health

4.1 Recruitment of dentists

The spotlight review heard from NHS England West Midlands of the problems involved in the recruitment of dentists. The issue was a national problem and one which affected Herefordshire. The spotlight review was concerned about reports of recruitment issues and the impact this could have on access for local residents to dental facilities. It was important that NHS England West Midlands prioritised efforts on the recruitment of dentists in Herefordshire. The spotlight review was informed that a regularly reported reason for the lack of attendance at the dentists was a perception that local surgeries were not taking on NHS patients. A campaign to increase the recruitment of dentists would help to address this issue.

4.2 Dental Access Centres and Rurality

The spotlight review heard from NHS England West Midlands regarding the forthcoming review of dental access centres. It was explained that the review would focus on issues concerning a lack of usage of the facilities and an evaluation of effectiveness in meeting the dental needs of local residents. The spotlight review highlighted the rural nature of Herefordshire and the potential impact this had upon access rates to dental surgeries. It was discussed that dental facilities in the county should take account of Herefordshire's rurality and it was proposed that mobile surgeries should be included in any review of the dental access centres. NHS England confirmed that in some areas of the West Midlands mobile dental facilities were used and there could be scope to investigate provision of mobile surgery in Herefordshire.

Herefordshire Healthwatch had raised a similar recommendation in its Children's Dental Health report for a *dental bus in rural areas to assist people to register for dentists, have a basic check-up and to receive fluoride varnish for children.*

4.3 Early Years dental access

The spotlight review was informed by NHS England of the Starting Well initiative which was focused on improving access to dentistry for children aged 0-2. The latest access rates for children were reported to the spotlight review which provided evidence that most of the children using NHS dental services were of school age or above and 12% of

children attended a dentist before their second birthday in Herefordshire. Whilst this was better than regional and national averages it was not felt to be a sufficiently high level.

The director of public health presented details of the Herefordshire public health oral health leaflet 0-17 years which had been produced as part of the Make Every Contact Council (MECC) initiative. Early Help services confirmed that children centres provided let's play sessions which included a focus on dental health, and there were visits to the centres by health workers to promote good dental hygiene and provide dental packs to the most vulnerable families. The early help team at the council also regularly asked families in contact with the service if they were registered with a dentist and if they attended annual health checks. If this was not the case support was provided.

The spotlight review supported efforts to increase the number of children under the age of 2 to attend dentists which was of particular importance given the high rate of tooth decay in 5 year olds. There is a need to overcome any issues of silo working between NHS England, and council teams, such as public health and early help to ensure all efforts to increase access to dentists for the under-2s are coordinated and integrated across organisations. The spotlight review was interested to receive statistics of the number of children, below the age of 2, in Herefordshire who attended dentists and the number who did not attend. NHS England confirmed data could be provided though an analysis of the number of children attending for Band 1, 2 and 3 treatments of those children in attendance.

4.4 Sugary food advice

The spotlight review discussed potential confusion regarding food perceived as healthy but which contained a high sugar content e.g. sultanas. Whilst considered a healthy option the high levels of sugar could contribute toward tooth decay. The spotlight review felt that clarification by public health to provide detail of food which was sugar smart would help to address confusion regarding sugar content. This accords with a recommendation from Herefordshire Healthwatch's Children's Dental Health report to *coordinate a bigger multiagency campaign about sugar smart and oral health between the early year's partners in Herefordshire to create impact and reach to parents.*

4.5 Access to dentists

The spotlight review considered confusion in local communities concerning access to dentists and registration at surgeries. NHS England West Midlands explained that registration was an inappropriate term for people who accessed surgeries and the spotlight review felt this needed further clarification and how it impacted on access for people to dental services.

The spotlight review referred to the perception that dentists were not taking on NHS patients and this was felt to be a particular concern in the market towns. NHS England West Midlands countered that the capacity of dentists in the market town was not considered a current problem however there was an issue in ensuring information contained on dental surgeries was up to date and specified where capacity at surgeries existed for new patients.

This discussion accorded with Healthwatch's recommendation from its Children's Dental Health report to *Increase NHS dental activity and dentists, particularly in market towns for adults so they can register and take their children.*

4.6 Fluoridation

The spotlight review learned of the importance of fluoride varnish for children in Herefordshire where fluoride was not added to the water supply. Public Health presented

information regarding the establishment of an Oral Health Strategy Group and the development of an oral health needs assessment which would consider the benefits of fluoridation.

Childhood Obesity

4.7 Maternity Services

The spotlight review heard from the Herefordshire Clinical Commissioning Group regarding the review of maternity services across Herefordshire and Worcestershire as part of the sustainability and transformation plans (STP). It was recognised that obesity in pregnancy represented a significant issue and the CCG outlined the serious implications of excess weight during pregnancy to the mother and the child. As part of the single specification for maternity services across the two counties the promotion of healthy ante-natal and post-natal weight could be considered. A programme to assess women's weight during pregnancy and set targets to be assessed by midwives could also be considered as part of the STP review. It is felt that weight management support during pregnancy and in the postnatal period would assist mothers to have a mentality of healthy weight management which would be applied to their offspring throughout childhood.

4.8. Obesity and Mental Health

The spotlight review considered the impacts of childhood obesity on mental health and it was felt that schools should talk to children at an early age about obesity. Public health stated that they would be looking to work more closely with schools and develop effective relationships with governors. A proposal to ask the executive and CCG as joint commissioners of mental health services in Herefordshire to investigate links between mental health and obesity and the potential for therapy to be delivered through the Child and Adolescent Mental Health Services (CAMHS).

4.9 Planning Restrictions on Fast Food Restaurants

The spotlight review received a presentation from Strategic Planning providing detail of National Planning Guidance which provides guidance to limit the proliferation of fast food takeaways where clear evidence from public health exists. Local policy E6 in the Core Strategy can be used to restrict takeaways, however not on health grounds but in order to retain the character of an area. Strategic Planning could look at clear evidence from the Council's public health team to develop a policy in the future.

5 Summary of Recommendations

From our findings, the spotlight review would like to make the following **14 recommendations** to the executive and ask that they are given appropriate consideration:

Dental Health

5.1 Recruitment of dentists

Recommendation –

- i) NHS England West Midlands is recommended to investigate methods and identify best practice in other areas to increase the levels of recruitment of dentists in Herefordshire.**

5.2 Dental Access Centres and Rurality

Recommendations –

- ii) **That the children and young people scrutiny committee supports NHS England’s review of the provision of dental access centres to determine if they are providing an effective and cost-efficient service to the rural population of Hereford;**
- iii) **NHS England is recommended to consider alternative methods of providing dental care to rural populations including the provision of mobile dental services;**

5.3 Early Years dental access

Recommendations –

- iv) **The children and young people scrutiny committee supports NHS England West Midlands, and the executive in the shared aim of promoting the attendance of children under 2 at dentists;**
- v) **NHS England West Midlands, the executive and the health and wellbeing board are recommended to coordinate efforts in the promotion of campaigns to encourage early years attendance at dentists;**
- vi) **NHS England West Midlands is asked to provide details of the number of children below the age of 2 attending dentists in Herefordshire;**

5.4 Sugary food advice

Recommendation –

- vii) **The executive is recommended to undertake a campaign to highlight those foods which are harmful to teeth and those which are sugar smart;**

5.5. Access to dentists

Recommendations –

- viii) **NHS England West Midlands is recommended to provide clarity regarding how people access dental services;**
- ix) **NHS England West Midlands is recommended to work with dental surgeries to ensure that information about capacity and access on websites is up to date;**

5.6. Fluoridation

Recommendation –

- x) **The executive is recommended to expedite a feasibility review of fluoridation in all of Herefordshire’s water supplies (mains and private) through the Oral Health Strategy Group and produce a full cost and health benefit analysis of it’s potential introduction;**

Childhood Obesity

5.7 Maternity Services

Recommendation –

- xi) The CCG is recommended to include in the review of maternity services: methods of promoting a healthy ante-natal and post-natal weight for mothers; consideration of the weighing of pregnant mothers by midwives and setting target weights; and the promotion of breast feeding.**

5.8 Obesity and Mental Health

Recommendation –

- xii) The executive and CCG as joint commissioners of mental health services are recommended to consider the provision of therapy to address underlying mental health causes of excess weight and impacts of childhood obesity;**

5.9 Planning Restrictions on Fast Food Restaurants

Recommendations –

- xiii) The executive is recommended to use public health data to identify areas where evidence exists to support a restriction on fast food takeaways; and**
- xiv) The executive is recommended to evaluate the introduction of a policy to regulate the prevalence of fast food outlets in those areas identified.**