

Herefordshire Oral Health Improvement Action Plan (2020-2023)

Herefordshire Council - Public Health Team

Revised 30/08/2022: For discussion Oral Health Improvement Partnership Board September 5th
2022

Updated September 8th 2022

HEREFORDSHIRE ORAL HEALTH IMPROVEMENT ACTION PLAN (2020-2023)

1) BUILDING HEALTHY PUBLIC POLICY

Key action	Planned activity	By who	Milestone Note: 2020 milestones adjusted to 22 due to Covid delay	Progress update
1A. Ensure the OHIP is endorsed by executive committees in Herefordshire Council and Health and Well-being Board partners	Obtain approval from Herefordshire Council's Cabinet and Management Board	HC PHT	By end of Mar 2020	June 2022 Completed. Management Board via DPH 2020/21. Health and Well-being Board discussion 2022, to review in September 2022. September 22 Agenda item at HWB Board in September 22.
	Share the plan with partners identified as key stakeholders for achieving the OHIP aim and objectives		OHIG to review quarterly	
1B. Ensure oral health is included in the Joint Strategic Needs Assessment (JSNA)	Engage with HC Intelligence Unit, to identify drafting and publication timelines for the JSNA and discuss oral health content	HC PHT	OHIG to review quarterly	June 2022 Completed. In revised JSNA published Dec 2021.

<p>1C. Advocate for inclusion of oral health promotion within all health and wellbeing policies, strategies and commissioning</p>	<p>In partnership with public health colleagues and wider professionals to identify opportunities for inclusion of oral health across relevant work streams e.g. smoking, substance use and NHS Health Checks</p>	<p>HC PHT</p>	<p>OHIG to review quarterly</p>	<p>June 2022 On-going, review of training materials in early stages. September 2022 Still on-going, to review opportunities as new service specifications are prepared for the main public health contracts.</p>
<p>1D. Influence early years and adult social care settings to adopt healthy food and drink policies</p>	<p>Share latest guidance (NICE/PHE) and online resources with early years and adult social care leads and providers to inform policy development and implementation</p>	<p>HC PHT</p>	<p>OHIG to review quarterly</p>	<p>June 2022 On-going, on work-plan for two public health practitioners. September 2022 On-going and being delivered by the two PH practitioners who have fixed term contracts until March 23.</p>
<p>1E. Support the implementation of smoke-free policies across public, private and voluntary/sector organisations</p>	<p>Provide system-leadership and role modelling for smoke-free policies and ensure proactive communication of messaging around smoke-free settings.</p>	<p>All OHIG members</p>	<p>OHIG to review quarterly</p>	<p>June 2022 Not yet progressed. National Tobacco Control Strategy publication imminent, with local Strategy to be developed from that. September 2022</p>

				Update on this is now an agenda item for HWB Board in September, with a recommendation to form a system wide tobacco control group.
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2) CREATING SUPPORTIVE ENVIRONMENTS

Key action	Planned activity	By who	Milestone	Progress update
2A. Increase the provision of healthy food and drink in early years, children's and all settings that the local authority reaches wider public sector settings	Influence key settings to reduce availability of sugar sweetened beverages/snacks in high sugar and increase offer of healthy alternatives (including provision of free plain drinking water)	HC PHT HC EYT	OHIG to review quarterly	June 2022 Oral health promotion in selected nurseries and primary schools in progress. September 2022 Continues as above.
	Develop healthy vending guidance for all settings that the local authority reaches			
	Encourage primary and secondary schools to engage with the 'Healthy schools rating scheme' (Department for Education)			
2B. Introduce targeted supervised tooth brushing (STB) in targeted early years and children's settings	Conduct market engagement exercise to inform future commissioning decisions	HC PHT	By end of Apr 2020/22	June 2022 Oral health promotion in selected nurseries and primary schools in progress. September 2022 Continues to be delivered by PH practitioner and update given at September meeting of OHIB. By December, this will be in place at 31 settings which were selected for being areas with higher levels of social deprivation.
	Commence procurement/service development process to deliver required provision		By end of Sept 2020/22	
	Conduct market engagement exercise to inform future commissioning decisions	HC PHT	By end of Apr 2020/22	June 2022

2C. Introduce targeted provision of toothbrushes and toothpaste (i.e. through health visitors and food banks)			By end of Sept 2020/22	Oral health promotion in selected nurseries and primary schools in progress. Health visiting and food banks under consideration. September 2022 Options being considered by PH, but there is no ear-marked budget for this. Sponsorship has been found to be unworkable through Council regulations. Food bank visit being planned to consider what is needed.
	Commence procurement/service development process to deliver required provision			
2D. Support adult care settings to improve the oral health of their clients	Increase the number of settings adopting relevant NICE guidelines and complying with CQC standards for improving oral health in adult care settings	HC PHT/ HC QT	OHIG to review quarterly	June 2022 Care home audit against NICE guidelines underway with follow up training work planned. Review of relevant policies and commissioning activity yet to be actioned. September 2022
	Encourage oral health to be reflected in all relevant policies and commissioning activity			

				Audit complete and training sessions planned with materials ready. First session 30/9/2022. Relationships to enable ASC commissioning amendments is being established.
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3) STRENGTHENING COMMUNITY ACTION

Key action	Planned activity	By who	Milestone	Progress update
<p>3A. Engage with individuals/groups to explore oral health needs and barriers and facilitators to good oral health</p>	<p>To coincide with introduction of oral health improvement programmes locally, conduct targeted engagement with the following priority groups (or those who work with or support these groups) –</p> <ul style="list-style-type: none"> • Looked After Children • Children or adults with a physical or learning disability • Children who are home-schooled • Adults in social care settings 	<p>HC PHT HH</p>	<p>By end of Sept 2020/22</p>	<p>June 2022 Not yet progressed. Care home staff being engaged through care home audit. September 2022 Care home staff engaged now through the training offer following on from the audit. Active connections being made now by PH practitioner with LAC and home schooled children.</p>
<p>3B. Explore opportunities to develop oral health champions to promote oral health in key organisations and community settings.</p>	<p>Engage with multi-sector stakeholders* to identify options for developing oral health champions, who will receive training and support to be able to deliver evidence-based oral health messages to individuals, families and communities.</p> <p><i>* For example - Talk Community Hubs, Healthwatch Herefordshire, Homeless Outreach and more broadly with early years, health and social care settings.</i></p>	<p>HC PHT HH</p>	<p>By end of Jun 2020/22</p>	<p>June 2022 Early years oral health champions in place. Care home champions being identified through the care home audit. Training materials review being planned. September 2022 Being taken forward now in care homes as well as in early years</p>

				settings. Champions to be identified through the care home training session.
3C. Explore the feasibility of a 'Oral Health Community Fund', to support the third sector to improve oral health and reduce oral health inequalities	To coincide with the introduction of oral health improvement programmes, identify opportunities for developing a grant based funding scheme or oral health resource programme for voluntary and community organisations.	HC PHT HH	By end of Sept 2020/22	June 2022 Not yet progressed. September 2022 Not yet progressed and working in a challenging financial environment. To be discussed at the HWB Board.

4) DEVELOPING PERSONAL SKILLS

Key action	Planned activity	By who	Milestone	Progress update
4A. Increase the oral health literacy of children and adults across Herefordshire	Undertake social marketing campaigns to promote the importance of oral hygiene, access to dental services and applications of fluoride varnish	HC PHT and Comms	Bi-annually	June 2022 Additional 4 month health visitor check now commissioned and library campaign on brushing in place.
	Provide dental practices (both NHS providers and private) with guidance on improving the oral health literacy of patients	HC PHT NHSE/ LDC	Ongoing	Dental practice work not yet progressed. September 2022

				Social marketing aimed at families continues with strong engagement from libraries. Dental practice approach to be considered by PH practitioner in the next work period (Sept – March.)
4B. Increase oral health promotion and signposting to NHS dental services by front line professionals in early years and educational settings	Provide oral health training (according to PHE's 'Delivering better oral health') to wider professionals across early years and schools	HC PHT	OHIG to review quarterly	<p>June 2022 Progressed via additional health visitor contact at 4 months and early years and schools work in selected settings.</p> <p>September 2022 HV contacts continue and their effectiveness will be reviewed in the needs assessment and service redesign for the new 0-19s contract, from April 2024. This will include both health visiting and school nursing. 112 staff in Early Years settings have been trained.</p>
	Share online resources and latest guidance (NICE/PHE) with key multi-agency partners in early years and schools			

4C. Increase the oral health knowledge and skills of professionals within adult social care settings	Provide oral health training to (according to PHE's 'Delivering better oral health') professionals working in adult social care settings	HC PHT	OHIG to review quarterly	June 2022 In progress via care home audit. September 2022 Training planned and includes links for further on-line guidance.
	Share online resources and latest guidance (NICE/PHE) with all adult social care settings i.e. residential and nursing homes and domiciliary providers			

5) REORIENTING HEALTH SERVICES

Key action	Planned activity	By who?	Milestone	Progress update
5A. Engage with NHS England and NHS Improvement to ensure access to good-quality NHS dental services.	Review quarterly NHS Dental Statistics (obtained from NHS Digital and NHS Business Services Authority), to monitor access levels for children and adults in Herefordshire	HC PHT NHSE/I	OHIG to review quarterly	June 2022 Data to be presented at OHIG for review. Health and Well-being Board presentation by NHSEI in March 2022. September 2022 Discussed at OHIB and indicators agreed. Continued issues with poor access, despite efforts to recruit to dentistry. In the past year, five practice have ceased NHS
	Engage with the Local Dental Network (NHS England and NHS Improvement) to gain insight and understand best practice around improving NHS dental access.			

				work and access continues to worsen. NHSE have sourced additional funding for more paediatric sessions at the community service based on Wye Valley Trust, and additional admin support. Work is beginning for the commissioning of a new contract based in Hereford City, building on the findings of the Healthwatch survey.
5B. Engage with NHS England and NHS Improvement to increase the use of fluoride varnish in local NHS dental practices across Herefordshire	Expectation to provide fluoride varnish is reiterated to NHS dentists as a core universal offer and monitoring of its delivery is undertaken at end of year review meetings with providers and contract monitoring visits.	HC PHT NHSE/I LDC HH	OHIG to review quarterly	June 2022 Not yet progressed.
	Engage with the Local Dental Network (NHS England and NHS Improvement) to gain insight and understand best practice around increasing use of fluoride in dental practices.			September 2022 NHSE/UKSHA colleagues are sourcing a national specification but it is understood that options need to be explored, including the separate commissioning of a nurse led service, with clinical governance from a qualified dentist. No ear-
	Raise awareness of fluoride varnish and preventative measures with members of the public.			

				marked budget yet for this.
5C. Engage with dentists to increase awareness and support behaviour change related to common risk factors.	Deliver Making Every Contact Count (MECC) training for dental practices (both NHS providers and private).	HC PHT NHSE LDC	OHIG to review quarterly	June 2022 Not yet progressed. September 2022
	Develop stronger referral pathways between dental practices (both NHS providers and private) and public health services i.e. stop smoking services.			Not yet progressed but initial work is being done on the County smoking cessation pathway.
5D. Introduce a targeted community-based fluoride varnish programme for children and young people most at risk of poor oral health	Conduct market engagement exercise to inform future commissioning decisions	HC PHT NHSE/I	By end of Apr 2020/22	June 2022 Not yet progressed. September 2022 Not yet progressed but it is understood that options need to be explored. It is noted that we are working in a challenging financial environment.
	Commence procurement/service development process to deliver required provision			HC PHT

KEY PERFORMANCE INDICATORS

To inform the performance management of the OHIP, as part of quarterly meetings the OHIG will routinely monitor, a range of key performance indicators (see table below). Measurable improvements in each of the key performance indicators listed, is deemed to contribute to the OHIP Objectives and longer term to the overall OHIP Aim.

Key performance indicators	OHIP Objectives	OHIP Aim
Rate (%) of fluoride varnish applications in children (3-16 years)	Increase the access of and exposure to fluoride	Improve oral health and reduce oral health inequalities in Herefordshire,
Number of targeted settings providing a supervised tooth brushing programme		

Number (%) of targeted oral health packs distributed		particularly in children, older people in residential care settings and those in high risk groups. Aim measured by – <ul style="list-style-type: none"> Local results of Public Health England’s dental epidemiological programme i.e. % of 5 year olds with decayed, missing or filled teeth Local trends in dental extractions under general anaesthetic (aged up to 18 years)
Number (%) of primary/secondary schools engaged with Healthy schools rating scheme	Improve dietary behaviours and reduce consumption of sugar, alcohol and tobacco	
Number (%) early years settings adopting healthy food/drink policies		
Number settings adopting smoke-free policies		
Number (%) of children (1-18 years) accessing NHS Dental Services	Improve uptake and access to NHS dental care	
Number (%) Looked After Children receiving NHS dental check		
Number (%) of adults accessing NHS Dental Services		
Number of dental practices who have received ‘Making Every Contact Count training’	Ensure prevention is at the core of NHS dental services	
Number (%) of NHS Dental practices who show an increase in their fluoride varnish rates each quarter		
Number of professionals (across children’s and adults services) trained in oral health promotion	Ensure oral health is considered in all relevant settings and policies	
Number (%) residential care settings adopting relevant national guidelines/achieving CQC standards		