

BASCD 2024 Abstract #15

Targeted oral health prevention for children living in deprived areas within Hertfordshire

Taylor, D., Cowland, C., Monaghan, U., Adams, L., Stennett, M.
Hertfordshire Community NHS Trust, England*

Background:

Children living in areas of deprivation experience poorer oral health than their less deprived counterparts. Child oral health inequalities can also be observed according to other dimensions, such as ethnicity or special educational needs and disabilities (SEND).

Objectives:

Under the commissioning of Hertfordshire County Council we developed a pop-up dental clinic scheme for children under the age of five, collaborating with family centre service providers across Hertfordshire, focusing on the 30% most deprived areas.

Methods:

Using the English Index of Multiple Deprivation (IMD) measure, the two Hertfordshire boroughs of Stevenage and Broxbourne were targeted. Family centre service providers were contacted, and 38 pop-up dental clinic sessions were arranged at family centres throughout these regions. These clinics were conducted by a dentist and oral health nurse to provide dental screening, fluoride varnish application if clinically appropriate and tailored 1:1 preventive advice. Each child was provided with a toothbrush, fluoridated toothpaste, and oral health promotion literature. Selected demographic and clinical data were recorded, alongside feedback from parents and family centre staff. Oral health webinars were provided to family centre staff, enabling them to better support families with their oral health. Ethical approval was not required for this initiative.

Results:

A total of 401 children were screened. We assessed 18 children with SEND, and 151 children from minority ethnic groups. 108 children were registered with a general dental practitioner, and 31 children had at least one carious tooth. We applied topical fluoride to 271 children. All families accepted toothbrushes, toothpaste, and oral health advice. Initial feedback from families, family centre staff and dental staff was positive.

Conclusion:

We plan to extend this contract to another two Hertfordshire boroughs to access a greater number of children at high risk of poorer oral health and provide prevention at this optimal, developmental stage.

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Correspondence to:

Deirdre Taylor (nee Stewart)

Email: deirdre.stewart2@nhs.net

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