



Childsmile

National Headline Data

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November 2016



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Executive summary

This report presents longitudinal headline data for the integrated Childsmile programme at a national level. Where appropriate, data are presented by NHS Board and Scottish Index of Multiple Deprivation (SIMD).

Childsmile Core

Participating establishments

- According to the data recorded on the Childsmile@HIC system, 2,619 pre-school establishments and 1,333 primary schools were participating in the Childsmile Core toothbrushing programme in Scotland during the 2015/16 academic year (Tab 1, p.3). This is similar to the 2014/15 figures (2,617 and 1,310, respectively).

Childsmile Nursery & School

Participating establishments

- 961 pre-school establishments and 908 primary schools were participating in the Childsmile Nursery and School programme in Scotland during the 2015/16 academic year (Fig 1, p.4 and Tab 2, p.5). For comparison, in 2014/15, 962 pre-school establishments and 895 primary schools participated.

NOTE: The proportions of consented children and children receiving fluoride varnish are not comparable to the previous year's proportions as the method of calculating the number of targeted children in participating nurseries/schools has been changed for the 2015/16 data

Consent rates

- During the 2015/16 academic year, the average consent rate for Scotland among nursery children was 76%, while among school children it was 89% (as a percentage of targeted children) (Figs 2 & 3, p.6-7).
- In the 2015/16 academic year consent rates varied between boards. For nurseries the range was from 59% to 87%, and for schools 83% to 93%, of targeted children (Tabs 3 & 4, p.8-9).

Fluoride varnish application rates

- 62% of targeted nursery children received at least one fluoride varnish application in the 2015/16 academic year (Fig 2, p.6). 84% of targeted school children received at least one fluoride varnish application in the 2015/16 academic year (Fig 3, p.7).
- Variation in fluoride varnish application rates was evident across boards. The percentage of targeted children receiving *at least one* fluoride varnish application ranged from 51% to 73% in nurseries and from 78% to 88% in schools (2015/16 academic year) (Tabs 3 & 4, p.8-9).
- 37% of targeted nursery children received *two or more* fluoride varnish applications in the 2015/16 academic year (Fig 2, p.6). 70% of targeted school children received *two or more* fluoride varnish applications in the 2015/16 academic year (Fig 3, p.7).
- The percentage of children receiving *two or more* fluoride varnish applications ranged from 26% to 46% for nurseries, and from 65% to 76% for primary schools across NHS Boards (as a percentage of targeted children, 2015/16 academic year) (Tabs 3 & 4, p.8-9).

SIMD quintile distribution of children receiving a fluoride varnish application:

- 37% of nursery children and 43% of school children who received *at least one* fluoride varnish application within 2015/16 academic year were in SIMD 1 quintile (health board (local) SIMD 2016) (Figs 4 & 5, p.11-12).
- Similarly, 36% of nursery children and 43% of school children who received *two or more* fluoride varnish applications were in SIMD 1 quintile (health board (local) SIMD 2016) (Figs 4 & 5, p.11-12).

Proportion of SIMD1 population receiving a fluoride varnish application:

- 53% of the population of nursery aged children residing in SIMD 1 quintile received *at least one* fluoride varnish application in the 2015/16 academic year. 31% received *two or more* fluoride varnish applications (health board (local) SIMD 2016) (Figs 6 & 7, p.13-14).
- 71% of the population of P1-P4 aged children residing in SIMD 1 quintile received *at least one* fluoride varnish application in the 2015/16 academic year. 58% received *two or more* fluoride varnish applications (health board (local) SIMD 2016) (Fig 8 & 9, p.15-16).

Childsmile referral from 6-8 week review

- In April–September 2015, 22% (5,819) of children who received a Health Visitor’s review at 6-8 weeks of age were referred to Childsmile (NHS Board range: 0%-52%), 56% (14,474) of children were not referred (‘No’ selected; NHS Board range: 9%-95%) and 3% (859) of families refused Childsmile (NHS Board range: 0%-11%). Moreover, 17% (4,269) of all review forms were incomplete (Fig 12, p.19 and Tab 7, p.22).
- In October 2015 – March 2016, 12% (3,048) of children who received a Health Visitor’s review at 6-8 weeks of age were referred to Childsmile (NHS Board range: 1%-31%), and 2% (468) of families refused Childsmile (NHS Board range: 0%-7%) (Fig 12, p.19 and Tab 8, p.23).

Childsmile Practice

Child referral and Dental Health Support Worker contact

- 14,610 children in Scotland were recorded on the Childsmile@HIC system as referred to a Dental Health Support Worker in the 2015/16 financial year – a 2% increase in comparison with 2014/15 (Fig 15, p.24).
- 14,079 children were successfully contacted by a Dental Health Support Worker in the 2015/16 financial year – an increase of 3% in comparison with 2014/2015 (Fig 15, p.24).
- In the 2015/16 financial year the majority of children were referred to Dental Health Support Workers by a Health Visitor – 12,186 children. 1,454 children were referred to Childsmile via ‘Other’ source; 382 via Clinic; 168 from a dentist; 103 were self-referrals; and for 317 children, a type of referral was not specified (Fig 16, p.25).
- There were 13,594 children with at least one kept Dental Health Support Worker appointment; 512 families who refused Childsmile; 279 families that could not be contacted; and for 2,027 families the end result was a ‘Failed to Attend / Not at home’ (Fig 17, p.26).
- Within the 2015/16 financial year, 12,728 children had their first ever kept appointment with a Dental Health Support Worker. 1,225 children had their second kept appointment and 379 had their third (or greater) kept DHSW appointment within 2015/16 (for these children, their prior kept appointment may have occurred in an earlier reporting period) (Fig 18, p.27).

Practice engagement

- 85% (858) of independent contractor General Dental Service practices were delivering Childsmile interventions in the 2015/16 financial year. For comparison, 92% (838) were delivering Childsmile in the 2014/15 financial year (Tab 10, p.28).

Delivery in dental practice

- The proportions of 0-2 and 3-5-year-old children registered with an NHS dentist receiving toothbrushing and dietary advice in the 2015/16 financial year increased in comparison with the 2014/15 financial year. The proportion of 0-2-year-olds receiving toothbrushing instruction increased by 3%, and for 3-5-year-olds, the increase was 2%. The same trend was observed for children receiving dietary advice: the increase for 0-2-year-olds was 3%; and for 3-5-year-olds 2% (Figs 20 & 21, p.29).
- During the 2014/15 financial year, 69% of 0-2 year old children registered with an NHS dentist in Scotland (NHS Board range: 51%-91%), and 42% of 3-5 year old children registered with an NHS dentist in Scotland received *toothbrushing instruction* (NHS Board range: 31%-58%) (Tabs 11 & 12, p.30-31).

- 68% of 0-2 year old children registered with an NHS dentist in Scotland (NHS Board range: 51%-89%), and 42% of 3-5 year old children registered with an NHS dentist in Scotland received *dietary advice* (NHS Board range: 32%-58%) (Tabs 11 & 12, p.30-31).
- The proportions of 2-5-year-old children registered with an NHS dentist receiving fluoride varnish application in the 2015/16 financial year increased slightly in comparison with the 2014/15 financial year. Both the proportion of children who received *at least one* fluoride varnish application, and those who received *two or more* fluoride varnish applications increased by 1% (Fig 20, p.33).
- In the 2015/16 financial year, 38% of 2-5 year old children registered with an NHS dentist (NHS Board range: 27%-65%) received *at least one* fluoride varnish application and 18% received *two or more* fluoride varnish applications (children who had received at least one fluoride varnish application within the reporting period and who had also received another fluoride varnish application in the 12 months prior to that application), NHS Board range: 11%-29% (Tab 13, p.34).
- Proportions of 2-5 year old children registered with an NHS dentist who received *at least one* fluoride varnish application increased gradually across the SIMD quintiles (from 32% in the most deprived quintile to 48% in the least deprived quintile). Similarly, proportions of 2-5 year old children registered with an NHS dentist who received *two or more* fluoride varnish applications rose gradually across the SIMD quintiles from 13% in the most deprived quintile to 24% in the least deprived quintile) (Fig 21, p.35).

Number of fluoride varnish applications in nursery, school and practice settings

- In the 2015/16 academic year, 70,326 fluoride varnish applications were applied in nursery settings, 196,726 in school settings and 97,024 in dental practice settings (Tab 14, p.36).

Childsmile Workforce

- In the 2015/16 financial year, 21 Childsmile training courses were run, 42 Dental Health Support Workers and 87 Extended Duty Dental Nurses were trained (Fig 23, p.38). For comparison, in the 2014/15 financial year 17 courses were run with 31 Dental Health Support Workers and 93 Extended Duty Dental Nurses trained.

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Abbreviations

List of abbreviations of NHS Board names

AA	Ayrshire & Arran
B	Borders
DG	Dumfries & Galloway
F	Fife
FV	Forth Valley
G	Grampian
GGC	Greater Glasgow & Clyde
H	Highland
La	Lanarkshire
Lo	Lothian
O	Orkney
S	Shetland
T	Tayside
WI	Western Isles
Sco	Scotland

Other abbreviations

CHSP-PS	Child Health Surveillance Programme Pre-School system
DHSW	Dental Health Support Worker
EDDN	Extended Duty Dental Nurse
FVA	Fluoride Varnish Application
GDS	General Dental Services
HIC	Health Informatics Centre
ISD	Information Services Division
NES	NHS Education for Scotland
P	Primary school year groups (e.g. P4 – Primary 4)
PCDS	Primary Care Dental Services
PDS	Public Dental Service
SDR	Statement of Dental Remuneration
SIMD	Scottish Index of Multiple Deprivation

Introduction

This report presents headline data for the integrated Childsmile programme at a national level. Where appropriate, data are presented by NHS Board and Scottish Index of Multiple Deprivation (SIMD). A key aim of the report is to show progress over time for all components of the programme.

Childsmile National Headline Data reports are produced and circulated once a year. Data for the Childsmile Core, Nursery and School sections of this report correspond to the academic year (for the purposes of this report an academic year is from 1 July to 30 June). Data for Childsmile Practice are given by financial year (1 April to 31 March). Childsmile referrals from the Child Health Surveillance Programme Pre-School (CHSP-PS) system at the 6-8 week review are provided by financial year.

Childsmile Core, Nursery & School and Childsmile Practice Dental Health Support Worker (DHSW) sections of the report are based on data available at 2nd October 2016, and Childsmile Practice Primary Care Dental Services (PCDS) section – as of July 2016. Figures may be subject to further updating¹.

This report covers the following periods:

- Childsmile Core: 2015/2016 academic year (data from the Health Informatics Centre (HIC));
- Childsmile Nursery & School: 2011/12 to 2015/16 academic year (data from HIC);
- Referrals to Childsmile from the 6-8 Week Review: 2011/12 to 2015/16 financial year (data from CHSP-PS via the Information Services Division (ISD) Scotland);
- Childsmile Practice – DHSW data: 2011/12 to 2015/16 financial year (data from HIC);
- Childsmile Practice – PCDS data: 2011/12 to 2015/16 financial year (data from ISD);
- Childsmile Workforce – training figures: 2011/12 to 2015/16 financial year (data from NHS Education for Scotland (NES)).

Data availability

The data covering the most recent five-year period are presented in each report. For earlier data, please refer to previously published reports (available at: <http://www.child-smile.org.uk/documents/5225.aspx>).

The information on Childsmile Core programme, as entered into the Childsmile@HIC system for the 2015/2016 academic year, is presented in this report. Toothbrushing data for earlier years were presented in previous reports (see the web link above).

Public Dental Service

The new contract of employment designed to modernise the terms and conditions of community and salaried dentists was introduced in Scotland in September 2013. The community dental service and the salaried general dental services in Scotland are now part of the Public Dental Service (PDS).

Delivery of fluoride varnish in NHS Orkney, NHS Shetland and NHS Western Isles

There are different arrangements for delivery of fluoride varnish in nurseries and schools in NHS Orkney, NHS Shetland and NHS Western Isles. From January 2011 **all** children in nurseries and schools up to P2 (inclusive) are targeted to receive fluoride varnish through Childsmile Nursery/School components of the programme, whereas children in school years P3 to P7 are followed up through Childsmile Practice. The monitoring of these P3 to P7 children started in January 2011 in NHS Orkney, April 2011 in NHS Shetland and August 2011 in NHS Western Isles.

Since the incorporation of Childsmile Practice interventions into the SDR on 1 October 2011, data from GP17 forms that were recording the delivery of fluoride varnish to P3-P7 children through Childsmile Practice (i.e. in NHS Orkney, NHS Shetland and NHS Western Isles) has been unavailable. Once this data has been made available, all SDR Childsmile Practice data for these children will be reported in a subsequent report.

Measure of deprivation

The measure of deprivation used throughout this report is Scottish Index of Multiple Deprivation (SIMD) population-weighted quintile (a quintile describes a fifth of the population), with SIMD 1 being the most deprived quintile and SIMD 5 the least deprived quintile.

For Childsmile Core and Childsmile Nursery and School SIMD 2016 was used when reporting 2015/16 data, while SIMD 2012 was used for all previous years (2011/12–2014/15). For Childsmile Practice SIMD 2016 was used for 2015/16 data, SIMD 2012 for 2012/13–2014/15 and SIMD 2009 Version 2 was used for 2011/12.

¹ This is due to time-lags from delivery to data entry and ongoing quality checks.

“Health board (local) SIMD” is used for Nursery and School and “National (Scotland) SIMD” for Childsmile Practice (to be consistent with the SDR payment arrangements with General Dental Services (GDS) practices).

Child allocation to NHS Board

For Childsmile Nursery and School: Children are linked to a nursery/school and the nursery/school is assigned to an NHS Board. However, the child's home postcode is used to assign to a SIMD quintile (e.g. this means if a child goes to school in NHS Grampian but lives in NHS Highland, they will be included in the NHS Grampian data but their SIMD quintile will be for NHS Highland).

For Childsmile Practice: Child's home postcode is used to determine NHS Board. This procedure is in line with ISD reporting of dental statistics. Please note the child may reside in the NHS Board but have attended a dental practice anywhere in Scotland.

Scottish NHS Boards boundary changes 2014

On 1st April 2014, NHS Board boundaries were changed to align with those of local authorities. The purpose of the change is to help NHS Boards and local authorities work closer together in the provision of care in the local community.

As a result of this change, the data for the 2014/15 and 2015/16 academic/financial year are reported using this new NHS Board configuration, whereas the data for previous years are reported using the 2006 NHS Board configuration.

Population baselines

The population baselines for 2015/16 in this report were calculated using Small Area Population Estimates at 30 June 2015 (based on the 2011 Census). The baselines for 2013/14 and 2014/15 are based on the estimates as at 30 June 2013 (2011 Census). The baselines for 2011/12 and 2012/13 are based on Small Area Population Estimates at 30 June 2011 (2001 Census). All population estimates were provided by the National Records of Scotland (NRS; <http://www.nrscotland.gov.uk>).

Definitions

Please refer to Appendix 1 which shows definitions for terms used throughout this report.

Childsmile Core

Please refer to Appendix 1 for definitions of terms used throughout this report.

Childsmile Core data are presented by academic year.

According to the data recorded on the Childsmile@HIC system, 2,619 pre-school establishments and 1,333 primary schools were participating in the Childsmile Core toothbrushing programme in Scotland during the 2015/2016 academic year.

Table 1 Pre-school educational establishments and primary schools participating in Childsmile Core programme (as a % of total number of pre-school establishments / LA primary schools) by NHS Board – Scotland, 2015/2016 academic year

Health Board	Total number of pre-school establishments	Pre-school establishments participating in toothbrushing programme		Total number of LA primary schools	Primary schools participating in toothbrushing programme	
		n	% of total		n	% of total
AA	162	159	98.1%	134	120	89.6%
B	75	75	100.0%	63	53	84.1%
DG	97	93	95.9%	102	89	87.3%
F	165	165	100.0%	135	61	45.2%
FV	142	140	98.6%	108	78	72.2%
G *	343*	309	90.1%	241	81	33.6%
GGC	472	436	92.4%	301	267	88.7%
H	286	262	91.6%	259	153	59.1%
La	271	269	99.3%	245	176	71.8%
Lo	432	418	96.8%	219	106	48.4%
O	21	21	100.0%	20	19	95.0%
S	24	24	100.0%	30	28	93.3%
T	223	223	100.0%	161	77	47.8%
WI	25	25	100.0%	25	25	100.0%
Scotland	2,738	2,619	95.7%	2,043	1,333	65.2%

LA – local authority

NOTES:

- 1) Pre-school establishments / primary schools participating in the toothbrushing programme (Childsmile Core) are those pre-school establishments that had at least one toothbrushing monitoring contact recorded on the Childsmile@HIC system within the period July 2015 to June 2016.
- 2) The total numbers of pre-school establishments as at July 2016 were provided by the Childsmile teams in NHS Boards.
- 3) * No updated total numbers of pre-school establishments were received from Aberdeen City area (NHS Grampian), therefore for this area their previously submitted total numbers as at July 2015 were used.
- 4) Total numbers of local authority primary schools as at September 2015 are from *Openings and Closings Exercise*, June 2015, by the Scottish Government (<http://www.scotland.gov.uk/Topics/Statistics/Browse/School-Education/Datasets/contactdetails>)
- 5) The target is to offer toothbrushing programme to all nurseries (100%) and at least 20% of P1 and P2 classes of schools, those situated in areas with the highest level of need of NHS Boards.
- 6) Data for NHS Boards will be partial, if not all of the monitoring contacts with the establishments participating in the toothbrushing programme were entered onto the Childsmile@HIC system.

Childsmile Nursery & School

Please refer to Appendix 1 for definitions of terms used throughout this report.

Childsmile Nursery & School data are presented by academic year.

Reporting unique children from a record based system: As HIC uses a system based on linked records (i.e. consent constitutes one record and all activity linked with that consent is recorded) a child may have more than one record for any reporting period. For example, a child may be listed on more than one class list or have completed more than one consent form. This affects the data completeness/consistency, e.g. the Scotland total, which reports each unique child, may not be the sum of the NHS Board data. It has not been possible to estimate and report the extent to which this affects the data in this report.

Children under 3 years of age: The Childsmile Nursery programme includes children of 3 years and upwards in all targeted nurseries. Some Health Boards, but not all, offer fluoride varnish to a small number of 2 year old children attending targeted nurseries. To ensure population rates are comparable across all Health Boards, data for 2 year old children, namely records of children who were under three years old at the end of February of each reporting year, are excluded from the Childsmile Nursery & School section.

Within 2015/16 in NHS Lothian twelve establishments participating in the fluoride varnish programme have been closed due to structural faults. This had an impact on a normal routine varnishing service within the Health Board in Session 2 (January to June 2016).

Participating establishments

In the 2015/2016 academic year, 961 nurseries and 908 primary schools were participating in the fluoride varnish programme.

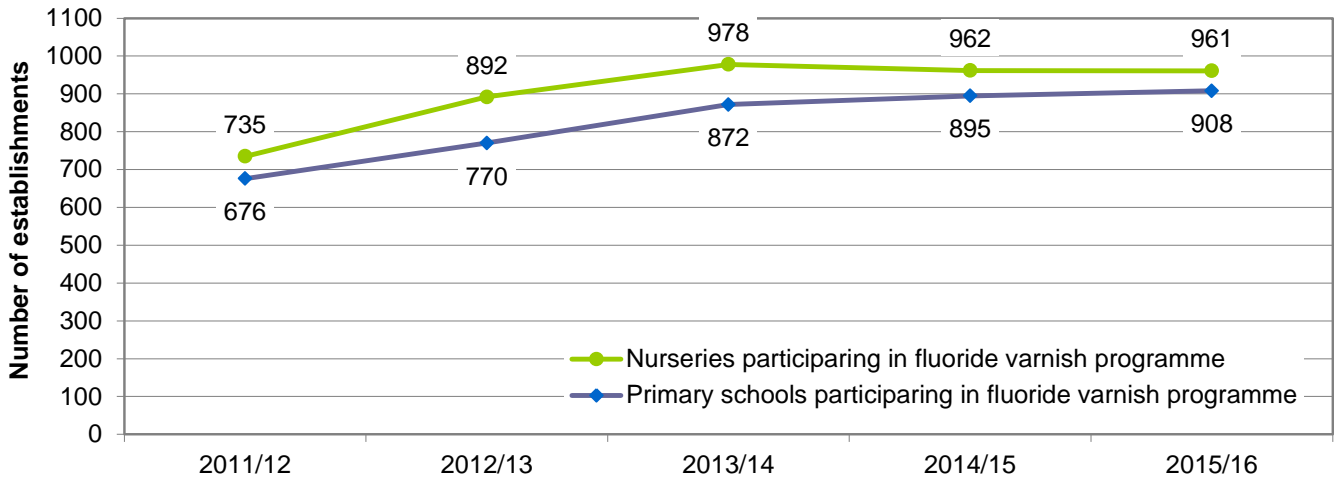


Figure 1: Nurseries and primary schools participating in fluoride varnish programme in Scotland, 2011/12-2015/16 academic year

The breakdown by NHS Board is shown in the table below:

Table 2: Numbers of nurseries and primary schools participating in fluoride varnish programme – by NHS Board, 2011/12-2015/16 academic year

NHS Board	Number of participating nurseries					Number of participating primary schools				
	11/12	12/13	13/14	14/15	15/16	11/12	12/13	13/14	14/15	15/16
AA	32	33	34	38	37	35	35	37	39	44
B	19	18	18	18	18	17	17	17	17	17
DG	10	10	10	10	10	10	10	10	10	10
F	40	39	40	41	40	40	39	41	43	41
FV	22	30	30	30	39	19	30	30	31	34
G	86	117	157	155	148	76	77	85	81	84
GGC	85	88	126	122	123	139	139	139	139	140
H	87	93	95	93	93	67	71	77	77	78
La	171	275	269	262	263	85	159	228	253	253
Lo	70	74	87	80	77	66	72	88	87	89
O	20	20	19	21	21	20	20	20	19	19
S	22	25	24	23	23	29	29	29	27	27
T	44	45	44	45	44	42	44	46	47	47
WI	27	25	25	24	25	31	28	25	25	25
Scotland	735	892	978	962	961	676	770	872	895	908

NOTES:

1) NHS Boards based on the boundaries as at 1st April 2014.

Consent and fluoride varnish application rates

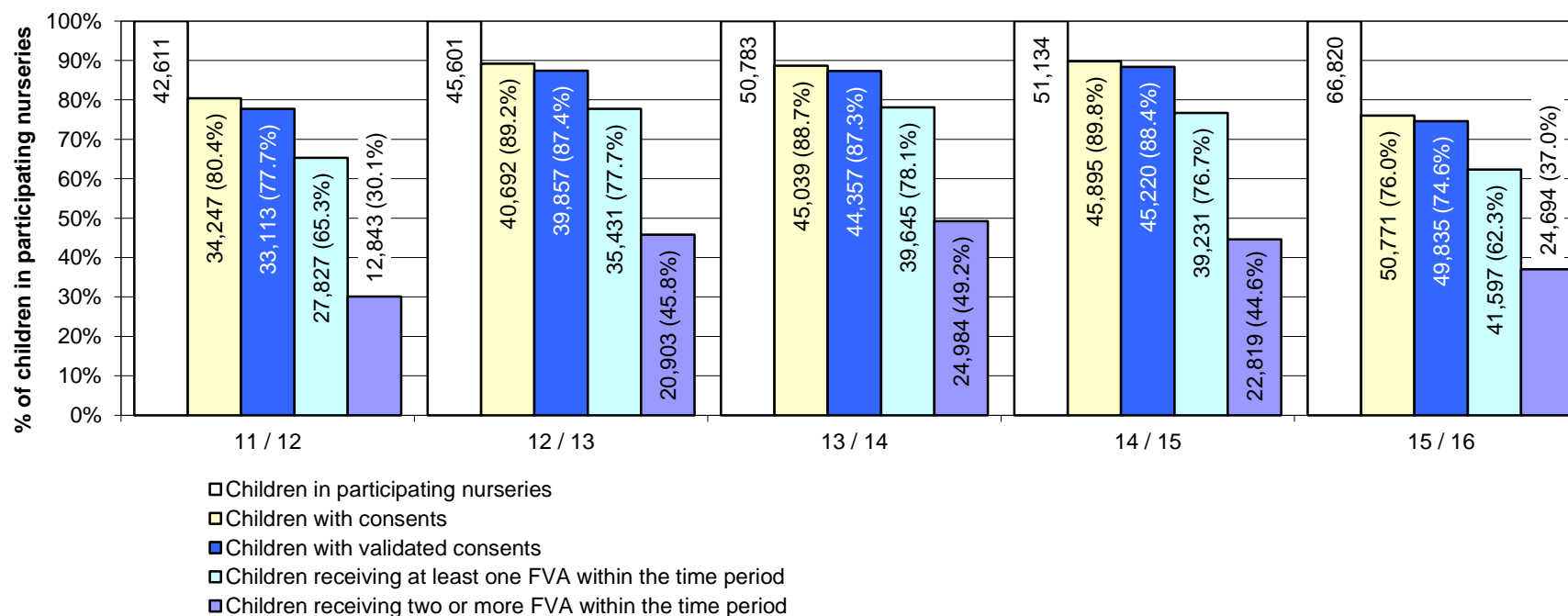


Figure 2: Nursery Consent and FVA rates (as a % of the total number of children in participating nurseries) – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application.

NOTES:

- 1) Figure 2 presents children with consents, children with validated consents, children receiving at least one FVA and children receiving two or more FVAs as a % of the **total number** of children aged 3 years and over in participating nurseries.

For example, for 2015/2016 academic year the number of targeted children in participating nurseries equals 66,820 (100%), of those 50,771 (76.0%) children were consented for FVA, 49,835 (74.6%) had validated consents, 41,597 (62.3%) received at least one FVA and 24,694 (37.0%) children received two or more FVAs.

- 2) The total number of children in participating nurseries is derived from Childsmile@HIC system class lists. There may be some underreporting of the number of children in participating nurseries due to inability to obtain all class lists in full, and over-reporting if children attend more than one targeted nursery.
- 3) The way the number of targeted children in participating nurseries/schools is calculated has been changed for the 2015/16 data. Previously it had been based on an actual date of adding and a date for removing the child to/from a class list, which for 2015/16 data was replaced with a session year and number (where Session 1 is the period July to December and Session 2 is January to June each year) of adding and removing the child to/from a class list. Due to this, the 2015/16 proportions of children with consents, with validated consents and those receiving fluoride varnish is not directly comparable with the previous years' proportions.

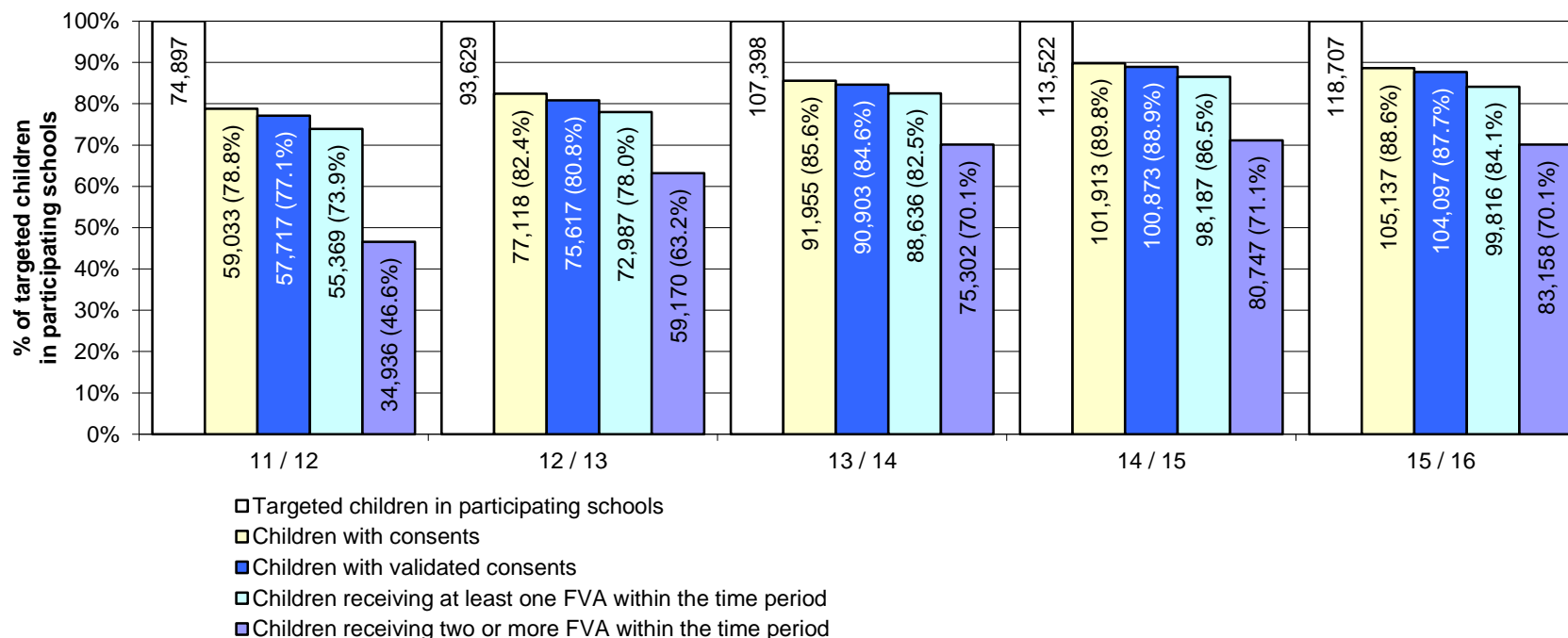


Figure 3: School Consent and FVA rates (as a % of the total number of targeted children in participating schools) – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application.

NOTES:

- Figure 3 presents children with consents, children with validated consents, children receiving at least one FVA and children receiving two or more FVAs as a % of the total number of **targeted** children in participating primary schools. “Targeted children” relates to the children in the primary year(s) group(s) reached by Childsmile teams in schools, e.g. Childsmile teams may have reached up to P5 classes and children in P1, P2, P3, P4 and P5 will be included.
For example, for 2015/2016 academic year the number of targeted children in participating primary schools equals 118,707 (100%), of those 105,137 (88.6%) children were consented for FVA, 104,097 (87.7%) had validated consents, 99,816 (84.1%) received at least one FVA and 83,158 (70.1%) children received two or more FVAs.
- The number of targeted children in participating schools is derived from Childsmile@HIC system class lists. There may be some underreporting of the number of targeted children in participating schools due to inability to obtain all class lists in full.
- The way the number of targeted children in participating nurseries/schools is calculated has been changed for the 2015/16 data. Previously it had been based on an actual date of adding and a date for removing the child to/from a class list, which for 2015/16 data was replaced with a session year and number (where Session 1 is the period July to December and Session 2 is January to June each year) of adding and removing the child to/from a class list. Due to this, the 2015/16 proportions of children with consents, with validated consents and those receiving fluoride varnish is not directly comparable with the previous years’ proportions.

Table 3: Nursery targeting, consent and FVA rates – Childsmile Nursery, by NHS Board, 2015/2016 academic year

NHS board	Population of 3-4 year old children in NHS board (baseline)	Number of targeted nursery children in participating schools		Nursery children with consents		Nursery children with validated consents		Nursery children receiving at least one FVA			Nursery children receiving two or more FVAs		
	P	T	% of P	C	% of T	n	% of T	n	% of T	% of C	n	% of T	% of C
AA	8,105	3,651	45.0%	2,813	77.0%	2,742	75.1%	2,216	60.7%	78.8%	1,354	37.1%	48.1%
B	2,391	939	39.3%	716	76.3%	704	75.0%	621	66.1%	86.7%	413	44.0%	57.7%
DG	2,947	1,032	35.0%	662	64.1%	637	61.7%	603	58.4%	91.1%	373	36.1%	56.3%
F	8,494	3,463	40.8%	2,717	78.5%	2,672	77.2%	2,132	61.6%	78.5%	1,161	33.5%	42.7%
FV	6,735	3,647	54.1%	2,424	66.5%	2,382	65.3%	2,124	58.2%	87.6%	1,372	37.6%	56.6%
G	13,255	10,754	81.1%	7,320	68.1%	7,268	67.6%	6,024	56.0%	82.3%	3,520	32.7%	48.1%
GGC	26,373	8,892	33.7%	7,697	86.6%	7,546	84.9%	6,531	73.4%	84.9%	4,080	45.9%	53.0%
H	6,640	3,826	57.6%	3,132	81.9%	3,074	80.3%	2,538	66.3%	81.0%	1,536	40.1%	49.0%
La *	15,148	17,098	112.9%	14,135	82.7%	13,875	81.1%	11,292	66.0%	79.9%	6,711	39.3%	47.5%
Lo **	20,234	6,845	33.8%	4,934	72.1%	4,777	69.8%	3,913	57.2%	79.3%	2,163	31.6%	43.8%
O *	445	692	155.5%	483	69.8%	466	67.3%	380	54.9%	78.7%	179	25.9%	37.1%
S *	550	858	156.0%	614	71.6%	596	69.5%	519	60.5%	84.5%	318	37.1%	51.8%
T	8,849	4,477	50.6%	2,641	59.0%	2,618	58.5%	2,266	50.6%	85.8%	1,241	27.7%	47.0%
WI *	516	657	127.3%	487	74.1%	481	73.2%	439	66.8%	90.1%	272	41.4%	55.9%
Sco	120,682	66,820	55.4%	50,771	76.0%	49,835	74.6%	41,597	62.3%	81.9%	24,694	37.0%	48.6%

NOTES:

- 1) Table 3 presents number of 3-4 year old children in population, and the numbers of nursery children (aged 3 years and over) targeted, consented and receiving FVA.
- 2) The population baselines for 2015/2016 in this report are based on Small Area Population Estimates at 30 June 2015, provided by the National Records of Scotland (NRS) by Health Board by single year of age. These population estimates are based on the 2011 Census.
- 3) NHS Boards based on the boundaries as at 1st April 2014.
- 4) The way the number of targeted children in participating nurseries/schools is calculated has been changed for the 2015/16 data. Previously it had been based on an actual date of adding and a date for removing the child to/from a class list, which for 2015/16 data was replaced with a session year and number (where Session 1 is the period July to December and Session 2 is January to June each year) of adding and removing the child to/from a class list. Due to this, the 2015/16 proportions of children with consents, with validated consents and those receiving fluoride varnish is not directly comparable with the previous years' proportions.
- 5) * For four NHS Boards (La, O, S and WI) the mid-2015 NRS population estimates were lower than the number of targeted children according to the data recorded on the Childsmile@HIC system. This might be explained by the differences in the estimation methodologies used, as well as by the fact that there might be duplicate children recorded on the Childsmile@HIC system (e.g. when the same child attends more than one nursery and hence has more than one record on the system), or children over the age of 4 years might be on class lists.
- 6) ** Within 2015/16 in NHS Lothian twelve establishments participating in the fluoride varnish programme have been closed due to structural faults. This had an impact on a normal routine varnishing service within the Health Board in Session 2 (January to June 2016).

Table 4: Consent and FVA rates – Childsmile School (as a % of the total number of targeted children in participating schools) – by NHS Board, 2015/2016 academic year

Health Board	Population baseline (up to whatever primary year reached in each HB)	Number of targeted children in participating schools		Number of primary school children with consents		Primary school children with validated consents		Number of children receiving at least one fluoride varnish application			Number of children receiving two or more fluoride varnish applications		
	P	T	% of P	C	% of T	n	% of T	n	% of T	% of C	n	% of T	% of C
AA	27,614	5,152	18.7%	4,712	91.5%	4,643	90.1%	4,446	86.3%	94.4%	3,707	72.0%	78.7%
B	8,423	3,015	35.8%	2,689	89.2%	2,680	88.9%	2,586	85.8%	96.2%	2,295	76.1%	85.3%
DG	6,219	1,553	25.0%	1,381	88.9%	1,352	87.1%	1,323	85.2%	95.8%	1,124	72.4%	81.4%
F	28,687	9,393	32.7%	8,223	87.5%	8,180	87.1%	7,838	83.4%	95.3%	6,567	69.9%	79.9%
FV	16,995	3,781	22.2%	3,381	89.4%	3,351	88.6%	3,251	86.0%	96.2%	2,566	67.9%	75.9%
G	43,993	11,569	26.3%	10,174	87.9%	10,140	87.6%	9,723	84.0%	95.6%	8,046	69.5%	79.1%
GGC	60,401	21,974	36.4%	19,819	90.2%	19,590	89.2%	18,529	84.3%	93.5%	15,985	72.7%	80.7%
H	24,025	10,873	45.3%	9,647	88.7%	9,531	87.7%	9,218	84.8%	95.6%	8,179	75.2%	84.8%
La	52,787	22,173	42.0%	18,925	85.4%	18,719	84.4%	17,865	80.6%	94.4%	14,781	66.7%	78.1%
Lo *	64,687	12,994	20.1%	12,133	93.4%	11,936	91.9%	11,457	88.2%	94.4%	8,422	64.8%	69.4%
O	1,615	1,313	81.3%	1,209	92.1%	1,187	90.4%	1,151	87.7%	95.2%	919	70.0%	76.0%
S	1,877	962	51.3%	795	82.6%	775	80.6%	752	78.2%	94.6%	633	65.8%	79.6%
T	29,693	12,645	42.6%	10,883	86.1%	10,859	85.9%	10,556	83.5%	97.0%	8,984	71.0%	82.6%
WI	2,013	1,326	65.9%	1,174	88.5%	1,162	87.6%	1,122	84.6%	95.6%	949	71.6%	80.8%
Sco	403,180	118,707	29.4%	105,137	88.6%	104,097	87.7%	99,816	84.1%	94.9%	83,158	70.1%	79.1%

NOTES:

- 1) "Targeted children" relates to the children in the primary years groups reached by Childsmile teams in schools, e.g. Childsmile teams may have reached up to P5 classes and children in P1, P2, P3, P4 and P5 will be included.
- 2) The population baselines for 2015/2016 in this report are based on Small Area Population Estimates at 30 June 2015, provided by the National Records of Scotland (NRS) by Health Board by single year of age. These population estimates are based on the 2011 Census.
- 3) NHS Boards based on the boundaries as at 1st April 2014.
- 4) The way the number of targeted children in participating nurseries/schools is calculated has been changed for the 2015/16 data. Previously it had been based on an actual date of adding and a date for removing the child to/from a class list, which for 2015/16 data was replaced with a session year and number (where Session 1 is the period July to December and Session 2 is January to June each year) of adding and removing the child to/from a class list. Due to this, the 2015/16 proportions of children with consents, with validated consents and those receiving fluoride varnish is not directly comparable with the previous years' proportions.
- 5) * Within 2015/16 in NHS Lothian twelve establishments participating in the fluoride varnish programme have been closed due to structural faults. This had an impact on a normal routine varnishing service within the Health Board in Session 2 (January to June 2016).

Table 5: P1-P4 and P1-P2 targeting, consent and FVA rates – Childsmile School, by NHS Board, 2015/2016 academic year

NHS board	P1-P4 aged population in NHS board (baseline)	Targeted P1-P4 children in participating schools		P1-P4 children with consents		P1-P4 children with validated consents		P1-P4 children receiving at least one FVA			P1-P4 children receiving two or more FVAs		
	P	T	% of P	C	% of T	n	% of T	n	% of T	% of C	n	% of T	% of C
AA	15,959	5,094	31.9%	4,695	92.2%	4,626	90.8%	4,433	87.0%	94.4%	3,699	72.6%	78.8%
B	4,768	1,817	38.1%	1,676	92.2%	1,668	91.8%	1,606	88.4%	95.8%	1,413	77.8%	84.3%
DG	6,219	1,531	24.6%	1,377	89.9%	1,348	88.0%	1,322	86.3%	96.0%	1,122	73.3%	81.5%
F	16,819	6,138	36.5%	5,431	88.5%	5,402	88.0%	5,187	84.5%	95.5%	4,322	70.4%	79.6%
FV	13,698	3,688	26.9%	3,381	91.7%	3,351	90.9%	3,251	88.2%	96.2%	2,564	69.5%	75.8%
G	26,359	9,622	36.5%	8,538	88.7%	8,507	88.4%	8,137	84.6%	95.3%	6,702	69.7%	78.5%
GGC	48,814	21,878	44.8%	19,814	90.6%	19,587	89.5%	18,527	84.7%	93.5%	15,984	73.1%	80.7%
H	13,729	6,919	50.4%	6,293	91.0%	6,235	90.1%	6,035	87.2%	95.9%	5,349	77.3%	85.0%
La	30,565	20,364	66.6%	18,008	88.4%	17,815	87.5%	17,087	83.9%	94.9%	14,239	69.9%	79.1%
Lo *	38,693	12,644	32.7%	12,013	95.0%	11,818	93.5%	11,359	89.8%	94.6%	8,343	66.0%	69.4%
T	17,231	7,744	44.9%	6,899	89.1%	6,882	88.9%	6,672	86.2%	96.7%	5,508	71.1%	79.8%
Total	232,854	97,424	41.8%	88,117	90.4%	87,231	89.5%	83,615	85.8%	94.9%	69,246	71.1%	78.6%
NHS board	P1-P2 aged population in NHS board (baseline)	Targeted P1-P2 children in participating schools		P1-P2 children with consents		P1-P2 children with validated consents		P1-P2 children receiving at least one FVA			P1-P2 children receiving two or more FVAs		
	P	T	% of P	C	% of T	n	% of T	n	% of T	% of C	n	% of T	% of C
O	461	456	98.9%	417	91.4%	410	89.9%	400	87.7%	95.9%	313	68.6%	75.1%
S **	554	558	101.0%	535	95.9%	521	93.4%	507	90.9%	94.8%	421	75.4%	78.7%
WI **	538	638	119.0%	537	84.2%	531	83.2%	506	79.3%	94.2%	418	65.5%	77.8%
Total **	1,553	1,652	106.0%	1,489	90.1%	1,462	88.5%	1,413	85.5%	94.9%	1,152	69.7%	77.4%

NOTES:

- 1) Table 5 presents number of children in P1-P4 or P1-P2 population, and the numbers of P1-P4 or P1-P2 children targeted, consented and receiving FVA.
- 2) The population baselines for 2015/2016 in this report are based on Small Area Population Estimates at 30 June 2015, provided by the National Records of Scotland (NRS) by Health Board by single year of age. These population estimates are based on the 2011 Census.
- 3) There are different arrangements for delivery of fluoride varnish in nurseries and schools in NHS Orkney, NHS Shetland and NHS Western Isles. From January 2011 all children in nurseries and schools up to P2 (inclusive) are targeted to receive fluoride varnish through Childsmile Nursery/School components of the programme, whereas children in school years P3 to P7 are followed up through Childsmile Practice.
- 4) NHS Boards based on the boundaries as at 1st April 2014.
- 5) The way the number of targeted children in participating nurseries/schools is calculated has been changed for the 2015/16 data. Previously it had been based on an actual date of adding and a date for removing the child to/from a class list, which for 2015/16 data was replaced with a session year and number (where Session 1 is the period July to December and Session 2 is January to June each year) of adding and removing the child to/from a class list. Due to this, the 2015/16 proportions of children with consents, with validated consents and those receiving fluoride varnish is not directly comparable with the previous years' proportions.
- 6) * Within 2015/16 in NHS Lothian twelve establishments participating in the fluoride varnish programme have been closed due to structural faults. This had an impact on a normal routine varnishing service within the Health Board in Session 2 (January to June 2016).
- 7) ** For two NHS Boards (S and WI) the mid-2015 NRS population estimates were lower than the number of targeted P1-P2 children according to the data recorded on the Childsmile@HIC system. This might be explained by the differences in the estimation methodologies used, as well as by the fact that there might be P2/P3 composite classes lists uploaded, or duplicate children recorded on the Childsmile@HIC system.

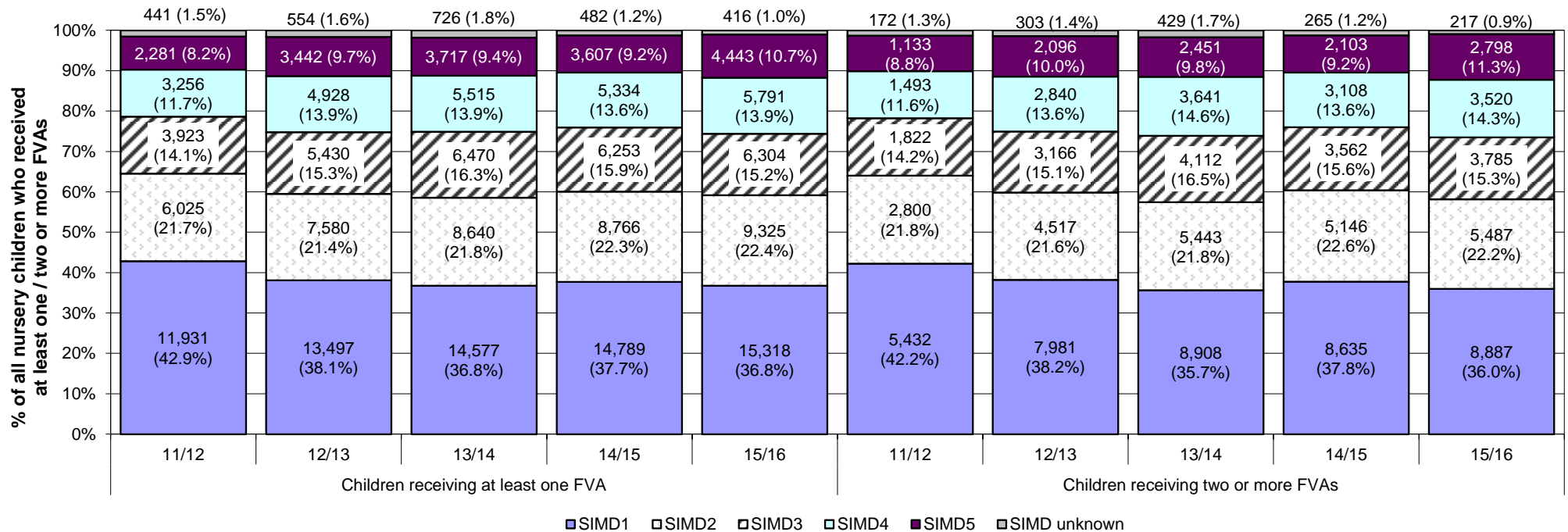


Figure 4: Nursery children receiving at least one and two or more FVAs by SIMD quintile - Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- Figure 4 presents the proportion of children in each SIMD quintile who received at least one and two or more FVAs. The numbers in the sections of the bars represent the numbers (and percentages) of children who received at least one / two or more FVA(s) belonging to each SIMD quintile. For example, in 2015/2016 academic year, 8,887 children who received two or more FVAs belonged to SIMD1 quintile (36.0% of the total number of children who received two or more FVAs); 5,487 (22.2%) children belonged to SIMD2; 3,785 (15.3%) to SIMD3; 3,520 (14.3%) to SIMD4; 2,798 (11.3%) to SIMD5 quintile; and there were 217 (0.9%) children with unknown SIMD (due to insufficient postcode information). All six categories combined add up to 100%.
- SIMD 2016 (local) was used.

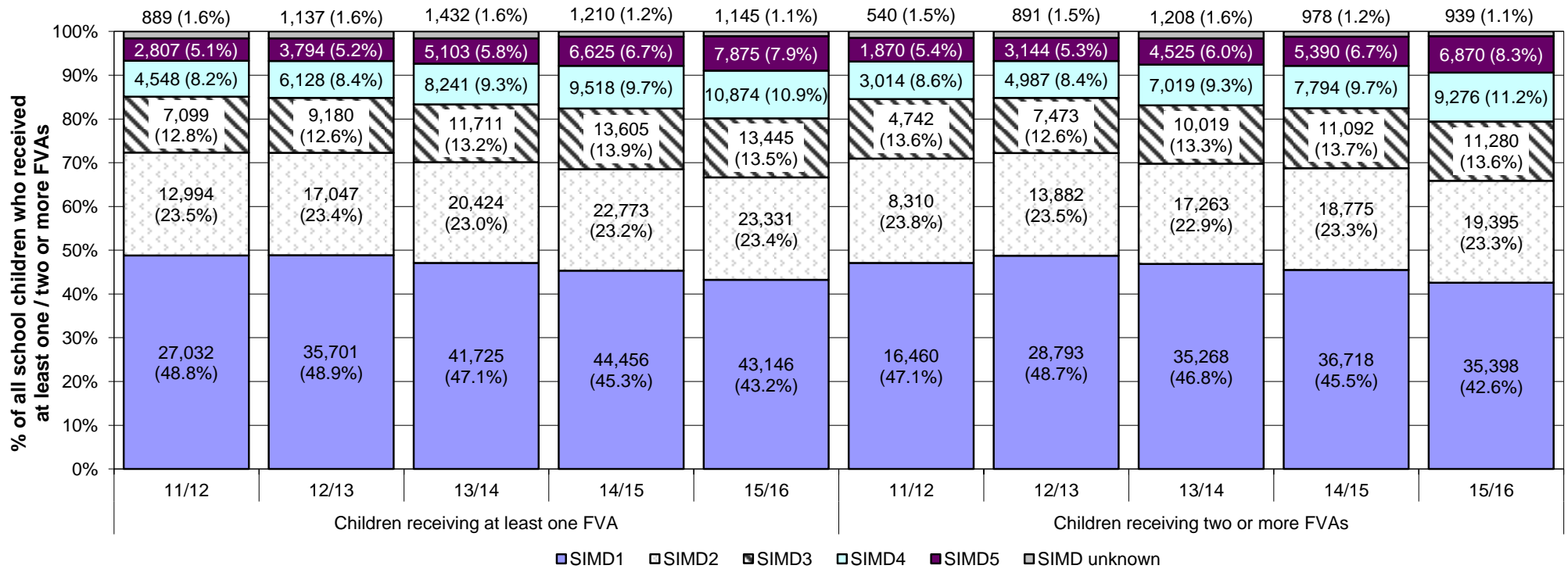


Figure 5: Primary school children receiving at least one and two or more FVAs by SIMD quintile - Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- 1) Primary school children here include all children in P1 to P7 classes receiving fluoride varnish, depending on how high up the primary years Childsmile teams have reached in participating schools. Also see notes for Figure 4.
- 2) SIMD 2016 (local) was used.

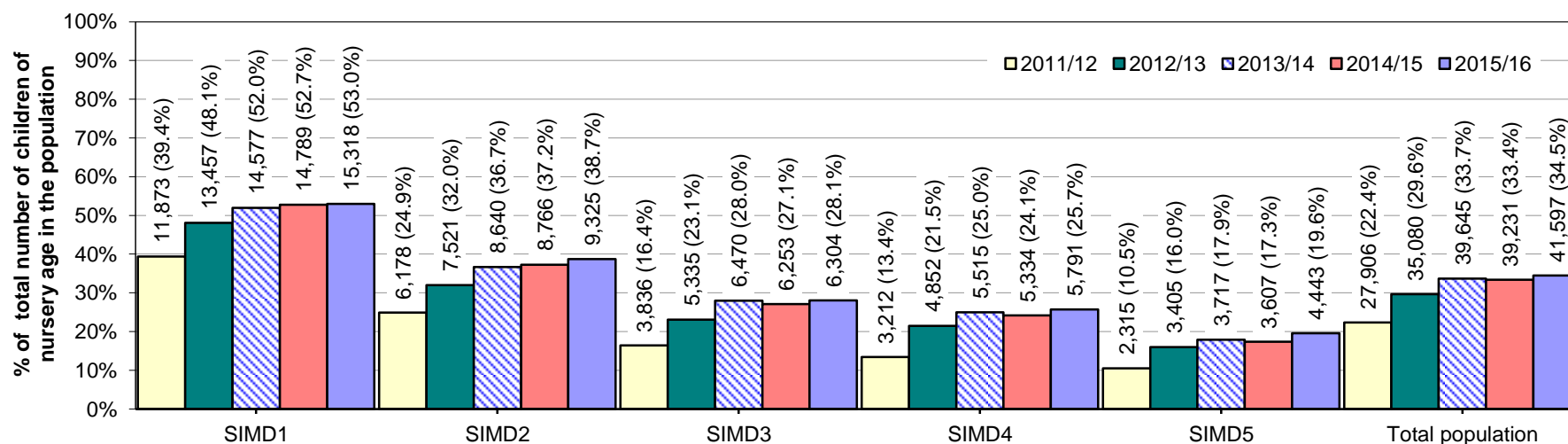


Figure 6: Proportion of population of nursery age children in each SIMD (local) quintile who received at least one FVA – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- 1) Figure 6 presents the proportion of nursery age children in each SIMD (local) quintile who received *at least one* FVA in the period 2011/12-2015/16 academic year (as a proportion of total number of children of nursery age in the population).
- 2) The numerator is children of nursery age (3- and 4-year-olds) who received *at least one* FVA.
- 3) The denominator is all children (nursery age in the population) in each SIMD quintile:
 - The population baselines for 2015/2016 in this report were calculated using Small Area Population Estimates at 30 June 2015 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2013/2014 and 2014/2015 in this report were calculated using Small Area Population Estimates at 30 June 2013 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2011/2012 and 2012/2013 in this report were calculated using Small Area Population Estimates at 30 June 2011 provided by the NRS. These population estimates are based on the 2001 Census.
- 4) “Total population” numbers do not equal the sum of the numbers in the five SIMD quintiles, as total numbers include children who could not be assigned to a SIMD quintile (due to missing or incorrect child postcode).
- 5) SIMD 2016 (local) was used.

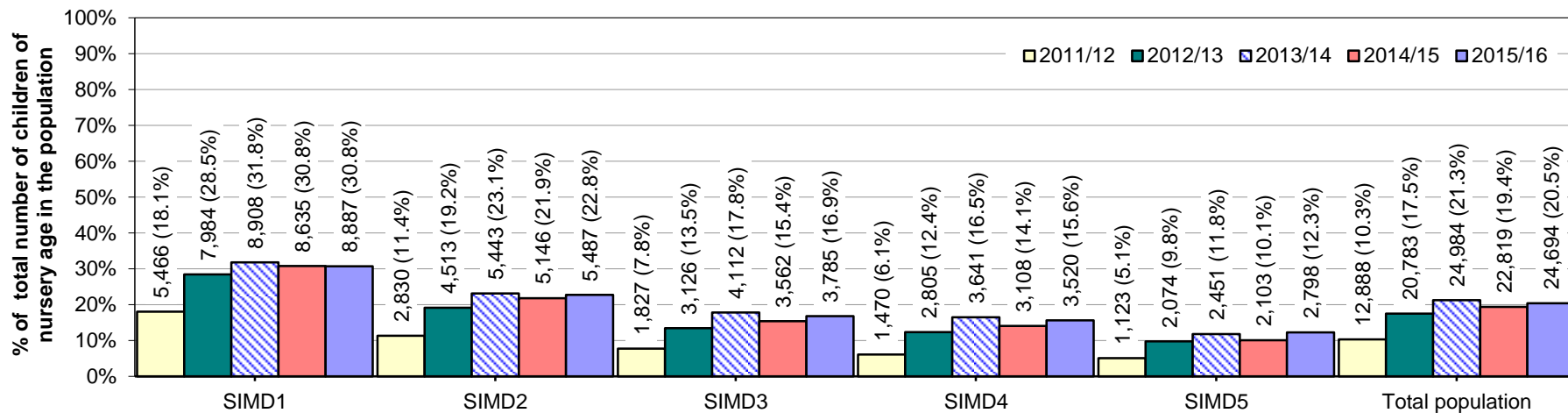


Figure 7: Proportion of population of nursery age children in each SIMD (local) quintile who received two or more FVAs – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- 1) Figure 7 presents the proportion of nursery age children in each SIMD (local) quintile who received *two or more* FVAs in the period 2011/12-2015/16 academic year (as a proportion of total number of children of nursery age in the population).
- 2) The numerator is children of nursery age (3- and 4-year-olds) who received *two or more* FVAs.
- 3) The denominator is all children (nursery age in the population) in each SIMD quintile:
 - The population baselines for 2015/2016 in this report were calculated using Small Area Population Estimates at 30 June 2015 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2013/2014 and 2014/2015 in this report were calculated using Small Area Population Estimates at 30 June 2013 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2011/2012 and 2012/2013 in this report were calculated using Small Area Population Estimates at 30 June 2011 provided by the NRS. These population estimates are based on the 2001 Census.
- 4) “Total population” numbers do not equal the sum of the numbers in the five SIMD quintiles, as total numbers include children who could not be assigned to a SIMD quintile (due to missing or incorrect child postcode).
- 5) SIMD 2016 (local) was used.

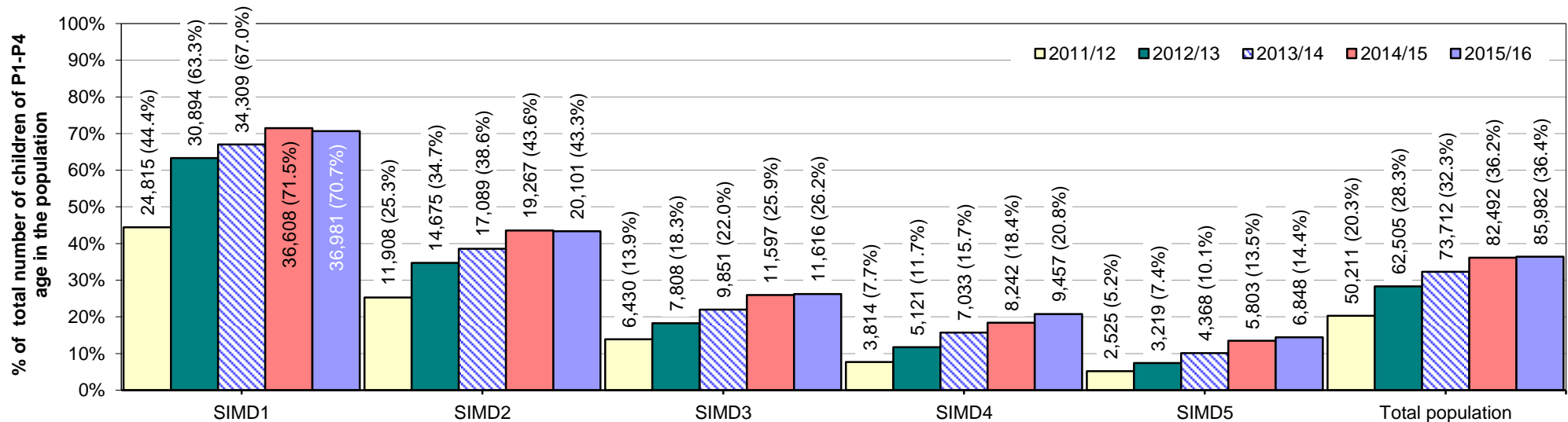


Figure 8: Proportion of population of P1-P4 age children in each SIMD (local) quintile who received at least one FVA – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- 1) Figure 8 presents the proportion of P1-P4 age children in each SIMD (local) quintile who received *at least one* FVA in the period 2011/12-2015/16 academic year (as a proportion of total number of children of P1-P4 age in the population).
- 2) The numerator is children of P1-P4 age who received *at least one* FVA.
- 3) The denominator is all children (P1-P4 age in the population) in each SIMD quintile.
 - The population baselines for 2015/2016 in this report were calculated using Small Area Population Estimates at 30 June 2015 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2013/2014 and 2014/2015 in this report were calculated using Small Area Population Estimates at 30 June 2013 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2011/2012 and 2012/2013 in this report were calculated using Small Area Population Estimates at 30 June 2011 provided by the NRS. These population estimates are based on the 2001 Census.
- 4) “Total population” numbers do not equal the sum of the numbers in the five SIMD quintiles, as total numbers include children who could not be assigned to a SIMD quintile (due to missing or incorrect child postcode).
- 5) SIMD 2016 (local) was used.

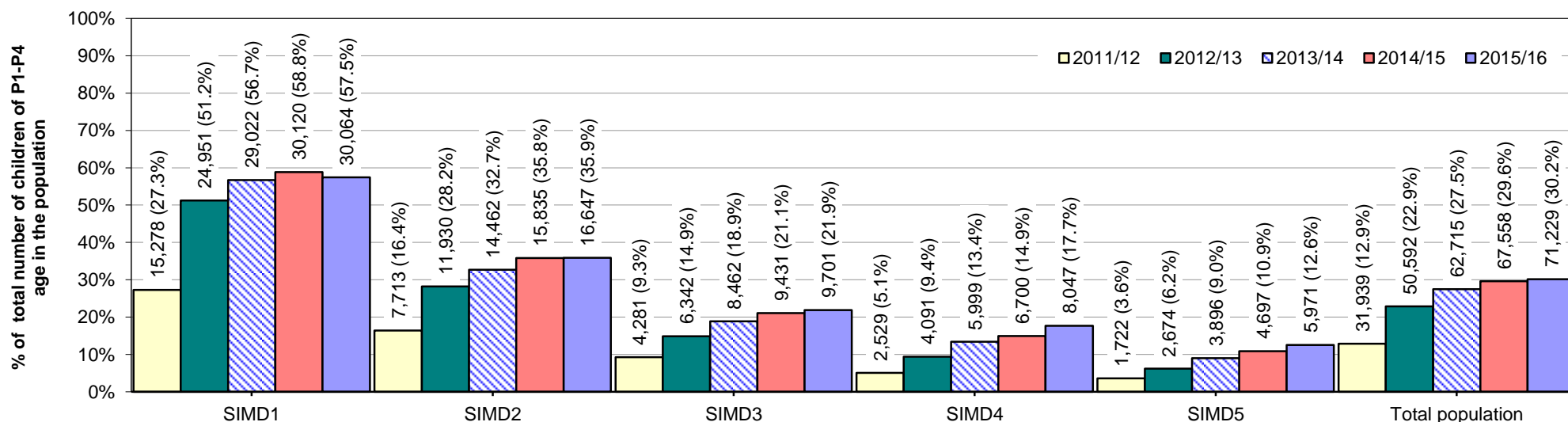


Figure 9: Proportion of population of P1-P4 age children in each SIMD (local) quintile who received two or more FVAs – Scotland, 2011/12-2015/16 academic year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (local).

NOTES:

- 1) Figure 9 presents the proportion of P1-P4 age children in each SIMD (local) quintile who received *two or more* FVAs in the period 2011/12-2015/16 academic year (as a proportion of total number of children of P1-P4 age in the population).
- 2) The numerator is children of P1-P4 age who received *two or more* FVAs.
- 3) The denominator is all children (P1-P4 age in the population) in each SIMD quintile.
 - The population baselines for 2015/2016 in this report were calculated using Small Area Population Estimates at 30 June 2015 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2013/2014 and 2014/2015 in this report were calculated using Small Area Population Estimates at 30 June 2013 provided by the NRS. These population estimates are based on the 2011 Census.
 - The population baselines for 2011/2012 and 2012/2013 in this report were calculated using Small Area Population Estimates at 30 June 2011 provided by the NRS. These population estimates are based on the 2001 Census.
- 4) “Total population” numbers do not equal the sum of the numbers in the five SIMD quintiles, as total numbers include children who could not be assigned to a SIMD quintile (due to missing or incorrect child postcode).
- 5) SIMD 2016 (local) was used.

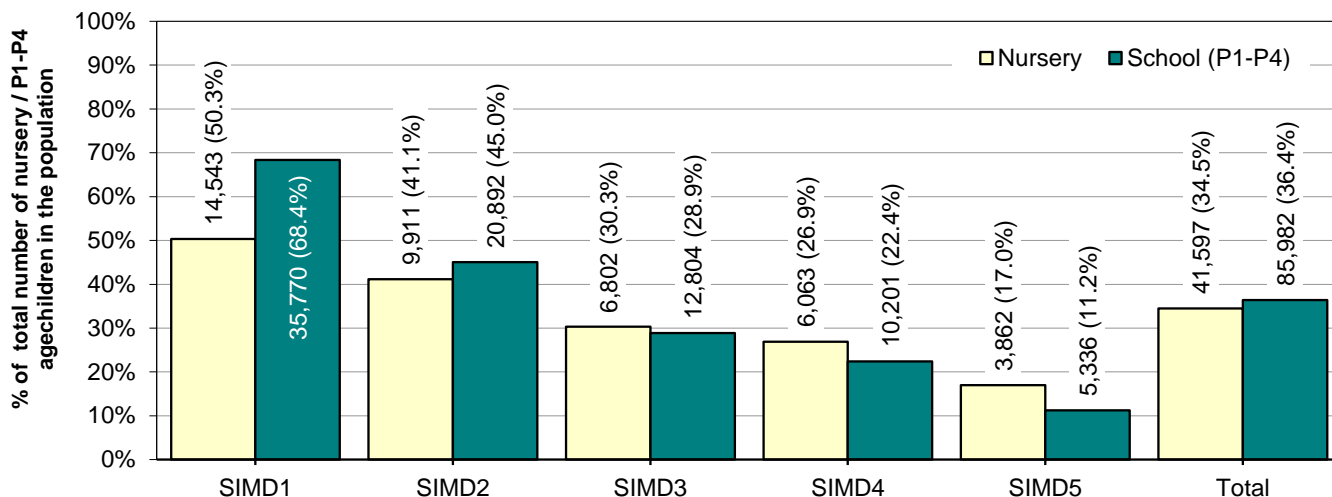


Figure 10: Proportion of population of nursery and P1-P4 children receiving at least one FVA, by national SIMD – Scotland, 2015/2016 academic year

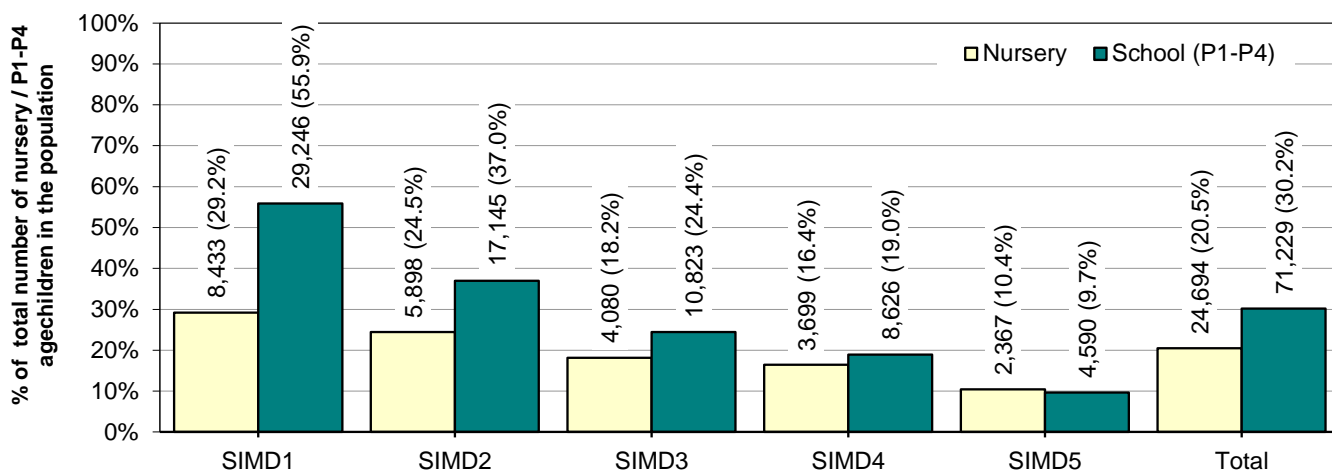


Figure 11: Proportion of population of nursery and P1-P4 children receiving two or more FVAs, by national SIMD – Scotland, 2015/2016 academic year

NOTES:

- 1) Figure 10 presents the proportion of nursery / P1-P4 age children in each SIMD (national) quintile who received *at least one* FVA in 2015/16 academic year (as a proportion of total number of children of nursery / P1-P4 age in the population). Figure 11 presents the proportion of nursery / P1-P4 age children in each SIMD (national) quintile who received *two or more* FVAs in 2015/16 academic year (as a proportion of total number of children of nursery / P1-P4 age in the population).
- 2) The numerator is children of nursery / P1-P4 age who received *at least one* / *two or more* FVAs.
- 3) The denominator is all children (nursery / P1-P4 age in the population) in each SIMD quintile. The population baselines for 2015/2016 in this report were calculated using Small Area Population Estimates at 30 June 2015 provided by the NRS. These population estimates are based on the 2011 Census.
- 4) “Total population” numbers do not equal the sum of the numbers in the five SIMD quintiles, as total numbers include children who could not be assigned to a SIMD quintile (due to missing or incorrect postcode of the child).
- 5) SIMD 2016 (national) was used.

Table 6: Children in special education classes consented to toothbrushing and receiving FVA, by NHS Board, 2015/2016 academic year

Health Board	Number of SpEd children in toothbrushing establishments	SpEd children with toothbrushing consents		Number of SpEd children in fluoride varnishing establishments	SpEd children receiving at least one FVA		SpEd children receiving two or more FVAs	
	T	n	% of T	F	n	% of F	n	% of F
AA	499	405	81.2%	259	143	55.2%	76	29.3%
B	85	81	95.3%	53	26	49.1%	21	39.6%
DG	64	63	98.4%	26	4	15.4%	1	3.8%
F	110	98	89.1%	106	49	46.2%	31	29.2%
FV	361	355	98.3%	107	25	23.4%	14	13.1%
G	215	207	96.3%	63	31	49.2%	23	36.5%
GGC	259	256	98.8%	8	2	25.0%	1	12.5%
H	120	101	84.2%	122	50	41.0%	20	16.4%
La	1,424	1,335	93.8%	1531	891	58.2%	549	35.9%
Lo	1,186	1,152	97.1%	711	434	61.0%	333	46.8%
O	1	1	100.0%	1	0	0.0%	0	0.0%
S	10	10	100.0%	10	7	70.0%	0	0.0%
T	317	291	91.8%	374	274	73.3%	197	52.7%
WI	0	n/a	n/a	0	n/a	n/a	n/a	n/a
Scotland	4,650	4,354	93.6%	3371	1,936	57.4%	1,266	37.6%

SpEd – Special education, FVA – fluoride varnish application

NOTES:

- 1) The table includes children recorded on the Childsmile@HIC system under class type “SpEd”; children in these classes may be of different ages.
- 2) NHS Boards based on the boundaries as at 1st April 2014.

Childsmile Referral at the 6-8 week review

The data in this section of the report present referrals to Childsmile recorded on the Child Health Surveillance Programme Pre-School (CHSP-PS) system at the 6-8 week review (which is generally completed at around 6-8 weeks after the birth of the child by a Health Visitor).

There has been a change in the way referral to Childsmile is recorded. Prior to January 2016 there were five values that could be recorded onto 'Childsmile Referral' field: Yes (Y), No (N), Refused (R), Incomplete (I) and Unknown (U). Starting from January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank.

In addition, since the introduction of the new field the data completeness rates have fallen dramatically. In view of the above, the latest reporting period is presented as two 6-month periods: April – September 2015 and October 2015 – March 2016.

Childsmile Referral at the 6-8 week review data are presented by financial year.

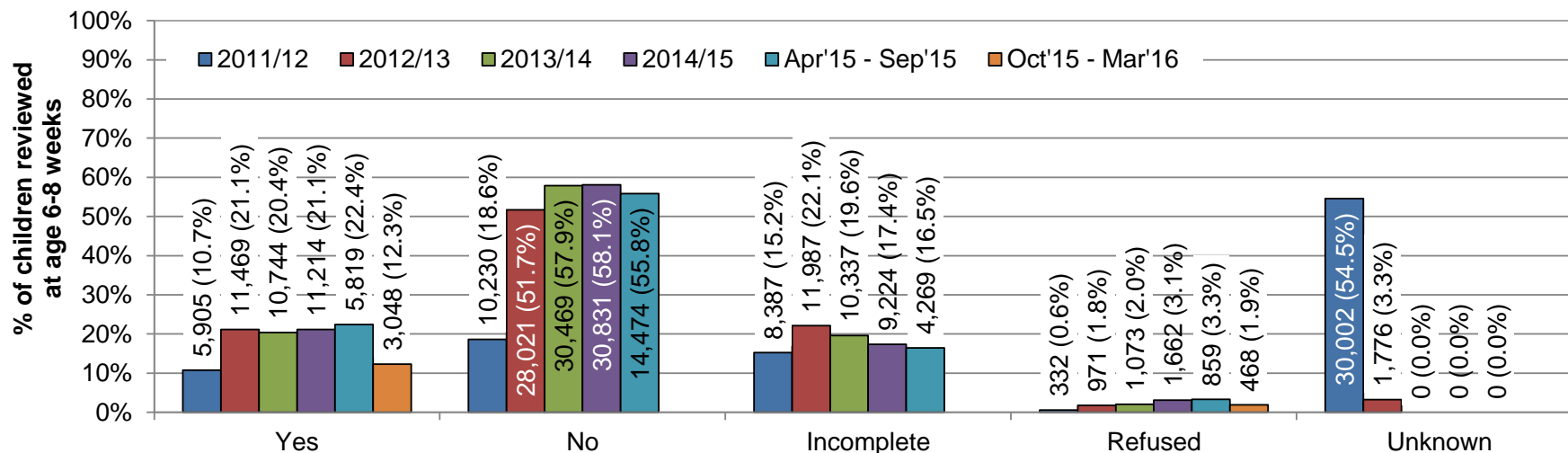


Figure 12: Childsmile referral at 6-8 week review by half of financial year – Scotland, 2011/12-2015/16 financial year

CHSP-PS – Child Health Surveillance Programme Pre-School system

NOTES:

- 1) The 'Childsmile Referral' field was added to the 6-8 week review form on 5 July 2010. The field has the following values: Yes (Y), No (N), Refused (R), Incomplete (I) and Unknown (U). At the review the health visitor records a Y or N in the Childsmile referral box to indicate whether the child should be referred to the programme. If the box is left blank the child health administrator will enter an 'I' when the form is keyed and they will follow up with the health visitor to obtain the actual result. 'U' is the default value for the field. 'R' was added as a valid Childsmile referral value from 4 April 2011.
- 2) All five categories combined ('Yes', 'No', 'Incomplete', 'Refused', 'Unknown') add up to 100%.
- 3) From January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank. Hence only these two values are shown on the graph for the Oct'15 – Mar'16 period.
- 4) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS August 2016 download).

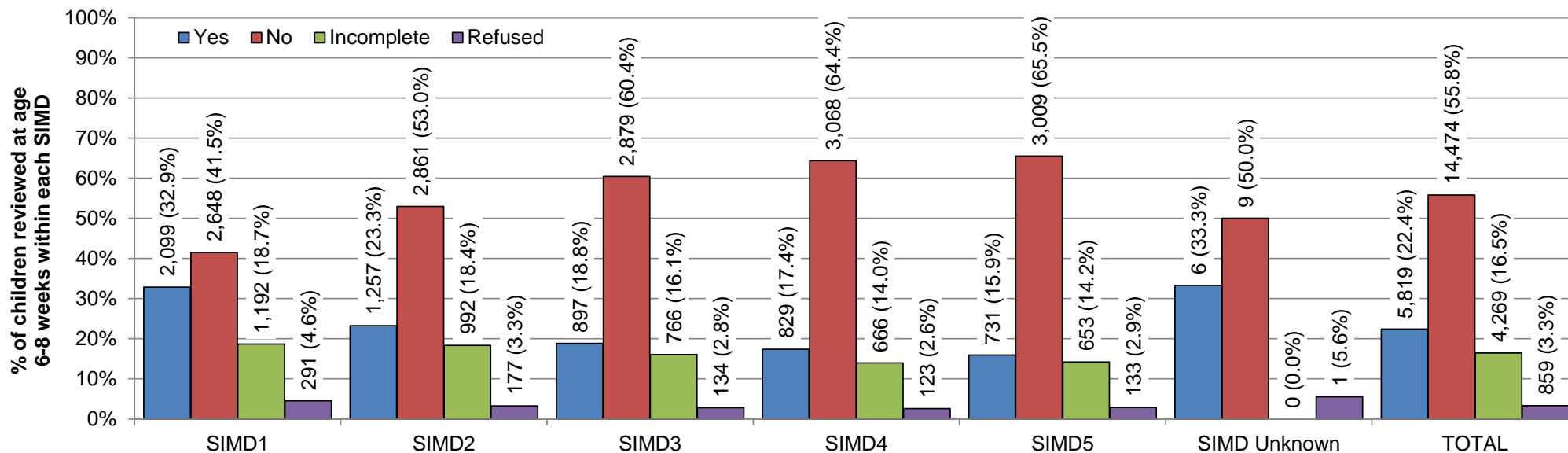


Figure 13: Childsmile referral at 6-8 week review by SIMD of child – Scotland, April – September 2015

SIMD – Scottish Index of Multiple Deprivation (national); CHSP-PS – Child Health Surveillance Programme Pre-School system

NOTES:

- 1) Figure 13 presents the outcomes for the Childsmile referral field on the 6-8 week review form by the SIMD 2016 (national) of the child's home postcode for April – September 2015.
- 2) The 'Childsmile Referral' field was added to the 6-8 week review form on 5 July 2010. The field has the following values: Yes (Y), No (N), Refused (R), Incomplete (I) and Unknown (U). At the review the health visitor records a Y or N in the Childsmile referral box to indicate whether the child should be referred to the programme. If the box is left blank the child health administrator will enter an 'I' when the form is keyed and they will follow up with the health visitor to obtain the actual result. 'U' is the default value for the field. 'R' was added as a valid Childsmile referral value from 4 April 2011. From January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank. In view of the above, the latest reporting period is presented as two 6-month periods: April – September 2015 and October 2015 – March 2016.
- 3) All five categories combined add up to 100%.
- 4) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS August 2016 download).

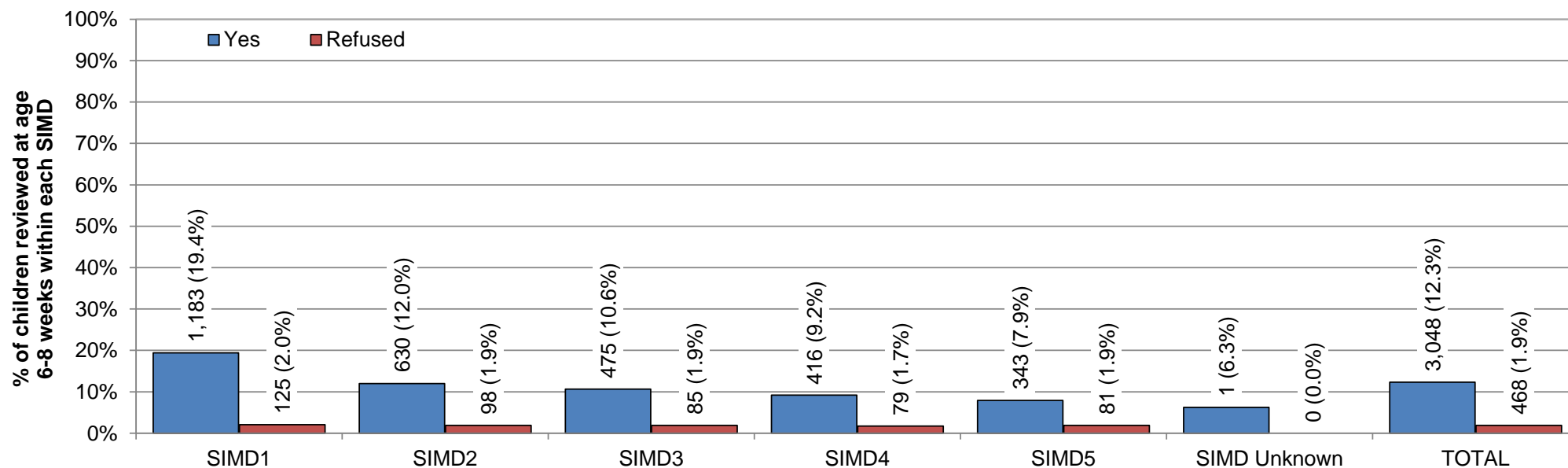


Figure 14: Childsmile referral at 6-8 week review by SIMD of child – Scotland, October 2015 – March 2016

SIMD – Scottish Index of Multiple Deprivation (national); CHSP-PS – Child Health Surveillance Programme Pre-School system

NOTES:

- 1) Figure 14 presents the outcomes for the Childsmile referral field on the 6-8 week review form by the SIMD 2016 (national) of the child's home postcode for April – September 2015.
- 2) The 'Childsmile Referral' field was added to the 6-8 week review form on 5 July 2010. The field has the following values: Yes (Y), No (N), Refused (R), Incomplete (I) and Unknown (U). At the review the health visitor records a Y or N in the Childsmile referral box to indicate whether the child should be referred to the programme. If the box is left blank the child health administrator will enter an 'I' when the form is keyed and they will follow up with the health visitor to obtain the actual result. 'U' is the default value for the field. 'R' was added as a valid Childsmile referral value from 4 April 2011.
- 3) From January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank. In addition, since the introduction of the new field the data completeness rates have fallen dramatically. In view of the above, the latest reporting period is presented as two 6-month periods: April – September 2015 and October 2015 – March 2016.
- 4) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS August 2016 download).

Table 7: Childsmile referral at 6-8 week review by NHS Board, April – September 2015

NHS Board	Number of 6-8 week reviews	Childsmile Referral							
		Yes		No		Incomplete		Refused	
	N	n	% of N	n	% of N	n	% of N	n	% of N
AA	1,656	257	15.5%	1,159	70.0%	172	10.4%	42	2.5%
B	468	135	28.8%	≥317	≥67.7%	*	*	*	*
DG	618	29	4.7%	546	88.3%	15	2.4%	16	2.6%
F	1,883	457	24.3%	1,250	66.4%	141	7.5%	13	0.7%
FV	1,402	221	15.8%	1,110	79.2%	28	2.0%	28	2.0%
G	2,913	114	3.9%	2,556	87.7%	196	6.7%	7	0.2%
GGC	5,594	2,897	51.8%	528	9.4%	1,288	23.0%	599	10.7%
H	1,260	264	21.0%	784	62.2%	82	6.5%	97	7.7%
La	3,199	927	29.0%	389	12.2%	1,828	57.1%	37	1.2%
Lo	4,574	422	9.2%	3,609	78.9%	514	11.2%	10	0.2%
O	109	12	11.0%	76	69.7%	0	0.0%	0	0.0%
S	121	0	0.0%	114	94.2%	0	0.0%	0	0.0%
T	1,999	72	3.6%	≥1,901	≥95.1%	*	*	*	*
WI	112	6	5.4%	106	94.6%	0	0.0%	0	0.0%
Scotland	25,926	5,819	22.4%	14,474	55.8%	4,269	16.5%	859	3.3%

NOTES:

- 1) * denotes numbers in the range between 1 and 5 (inclusive).
- 2) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS August 2016 download).
- 3) NHS Boards based on the boundaries as at 1 April 2014.

Table 8: Childsmile referral at 6-8 week review by NHS Board, October 2015 – March 2016

NHS Board	Number of 6-8 week reviews	Childsmile Referral			
		Yes		Refused	
	N	n	% of N	n	% of N
AA	1,649	117	7.1%	24	1.5%
B	460	57	12.4%	0	0.0%
DG	597	15	2.5%	7	1.2%
F	1,713	232	13.5%	9	0.5%
FV	1,437	106	7.4%	6	0.4%
G	2,822	47	1.7%	*	*
GGC	5,007	1,552	31.0%	342	6.8%
H	1,215	198	16.3%	50	4.1%
La	3,159	471	14.9%	27	0.9%
Lo	4,464	215	4.8%	*	*
O	70	9	12.9%	0	0.0%
S	102	*	*	0	0.0%
T	1,902	23	1.2%	*	*
WI	108	*	*	0	0.0%
Scotland	24,721	3,048	12.3%	468	1.9%

NOTES:

- 1) * denotes numbers in the range between 1 and 5 (inclusive).
- 2) From January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank. In addition, since the introduction of the new field the data completeness rates have fallen dramatically. In view of the above, the latest reporting period is presented as two 6-month periods: April – September 2015 and October 2015 – March 2016.
- 3) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS August 2016 download).
- 4) NHS Boards based on the boundaries as at 1 April 2014.

Childsmile Practice

Please refer to Appendix 1 for definitions of terms used throughout this report.

Child referral and dental health support worker contact

DHSW Practice data are presented by financial year.

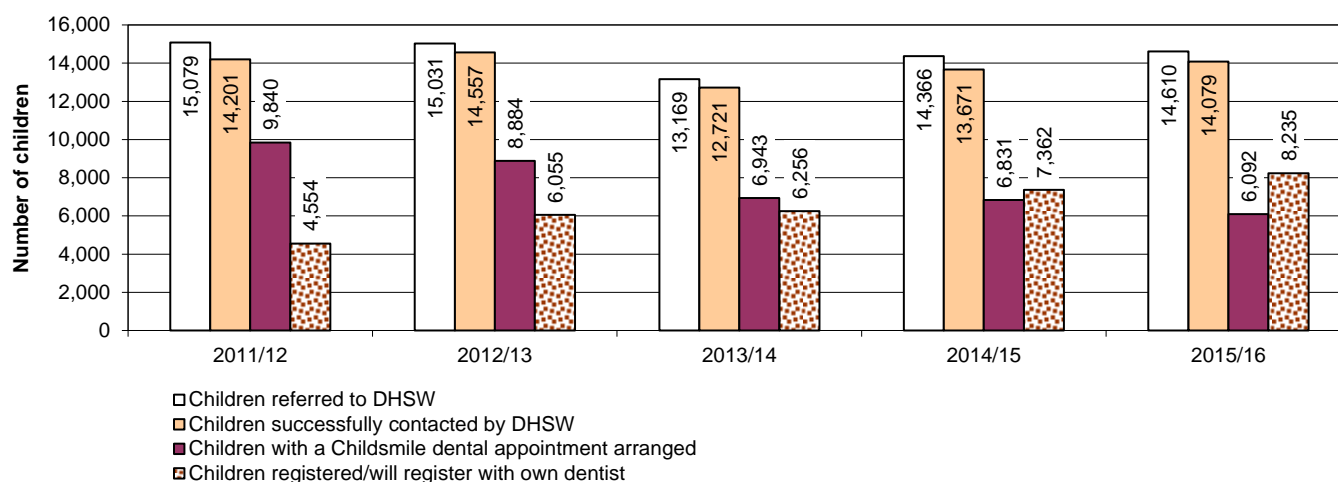


Figure 15: DHSW: Child referrals, contacts, practice appointments made and children registered/will register with own dentist – Scotland, 2011/12-2015/16 financial year

DHSW – Dental Health Support Worker.

NOTES: Figure 15 presents the number of children referred to a DHSW (as entered into the Childsmile HIC system by DHSWs), the number of children / families contacted by a DHSW, the number of children who had a Childsmile dental appointment arranged by a DHSW, and children whose parents/carers indicated that their child was registered / would register with their own dentist, by financial year for the period 2011/12-2015/16. For the previous years' data see earlier reports (available here: <http://www.child-smile.org.uk/documents/5225.aspx>).

Children referred to a DHSW in one reporting period may not be contacted by a DHSW or have a dental appointment arranged within the same reporting period.

Table 9: DHSW: Child referrals, contacts, practice appointments made and children registered with own dentist – by NHS Board, 2015/2016 financial year

NHS Board	Children referred to DHSW	Children successfully contacted by DHSW	Children with a Childsmile dental appointment arranged	Children registered/ will register with own dentist (self-reported)
AA	375	422	244	186
B	365	353	247	103
DG	83	107	63	41
F	506	502	429	87
FV	516	470	64	380
G	251	245	77	179
GGC	7,084	6,858	2,355	4,455
H	1,005	1,115	821	323
La	2,978	2,711	1,541	1,467
Lo	1,006	888	80	763
O	0	0	0	0
S	0	0	0	0
T	155	145	61	102
WI	0	0	0	0
Unknown NHS Board	286	263	110	149
Scotland	14,610	14,079	6,092	8,235

DHSW – Dental Health Support Worker. Please see notes for Figure 15.

NHS Boards based on the boundaries as at 1 April 2014.

In total, according to the Childsmile@HIC system data, in the 2015/2016 financial year: 12,186 children were referred to Childsmile from a Health Visitor; 1,454 via 'Other' source; 382 via Clinic; 168 from a dentist; 103 were self-referrals; and for 317 children the type of referral was not specified.

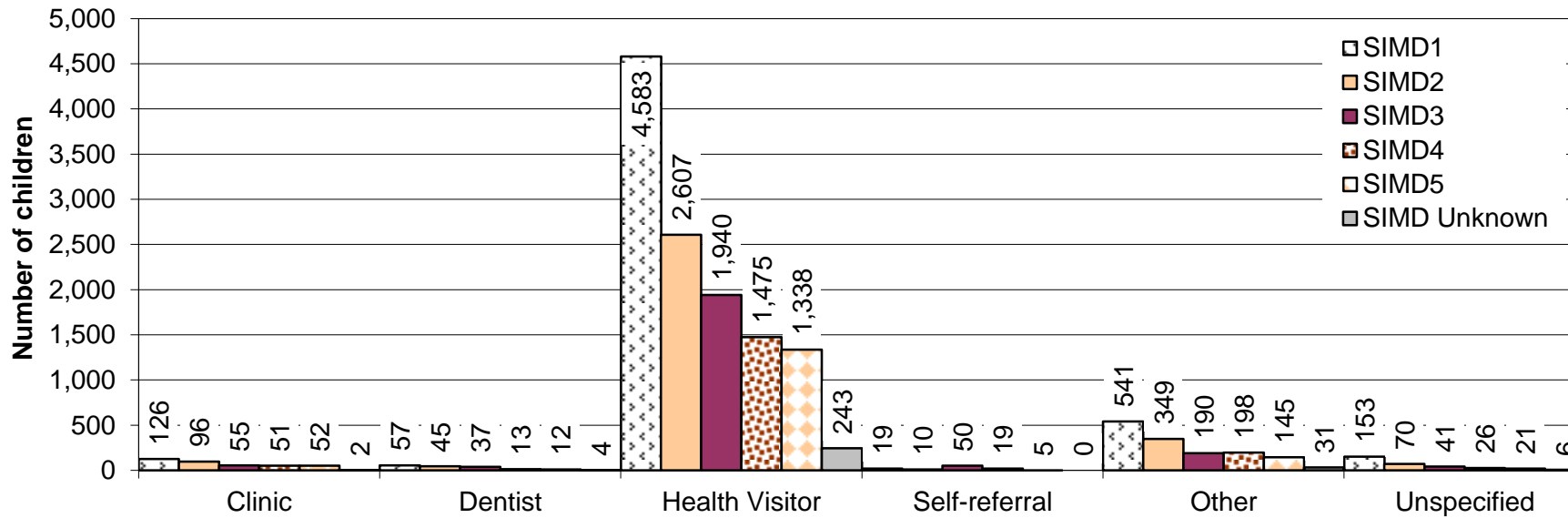


Figure 16: Number of children referred to DHSW by SIMD of child – Scotland, 2015/2016 financial year

DHSW – Dental Health Support Worker, SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 16 presents the number of children referred to a DHSW (by Health Visitor, Dentist, via Clinic, Self-referral or 'Other' route) by SIMD of child's home postcode.
- 2) SIMD 2016 (national) was used.

In total in the 2015/2016 financial year there were: 13,594 children with at least one kept DHSW appointment; 512 families who refused Childsmile; 279 families that could not be contacted; and for 2,027 families the end result was an 'FTA / Not at home'.

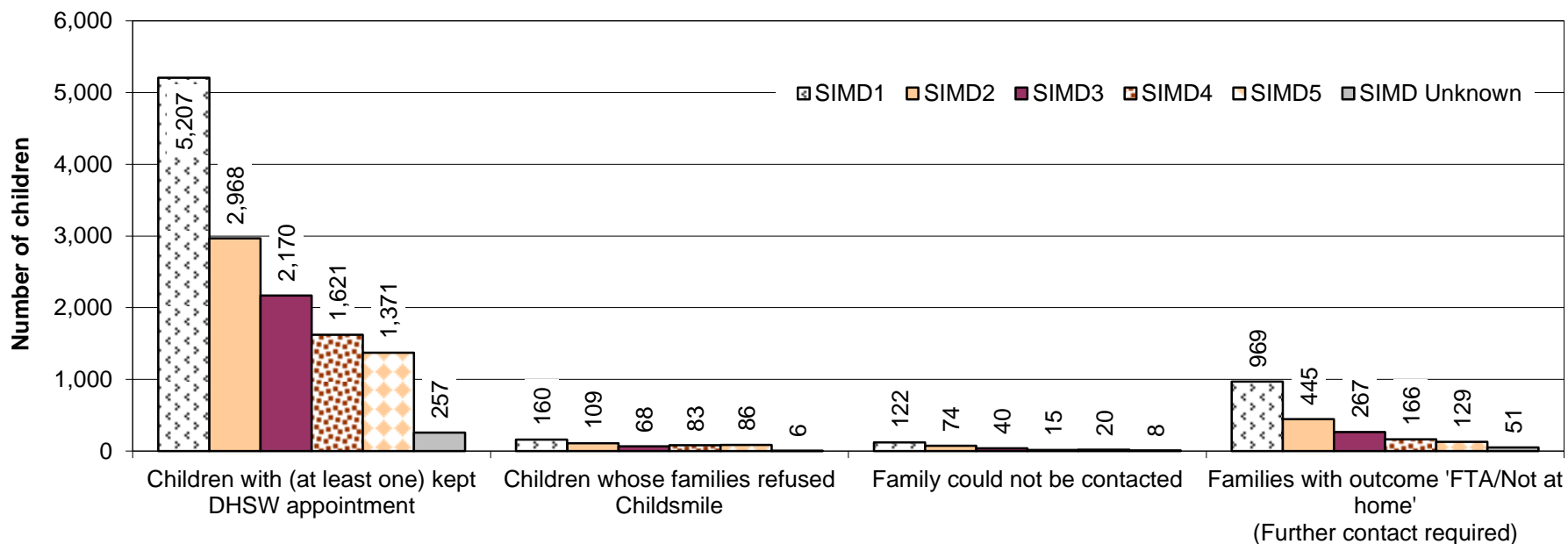


Figure 17: Children successfully contacted and not contacted by DHSW, and families who refused Childsmile, by SIMD of child – Scotland, 2015/2016 financial year

DHSW – Dental Health Support Worker, SIMD – Scottish Index of Multiple Deprivation (national), FTA – failed to attend.

NOTES:

1) Figure 17 presents the number of children with kept DHSW appointments, children whose families refused Childsmile, number of families that could not be contacted and families with the outcome 'FTA / Not at home' by SIMD of child's home postcode.

2) SIMD 2016 (national) was used.

The method of presenting the data on children with different numbers of kept DHSW appointments has changed from earlier reports and therefore the table below it is not comparable with those in earlier reports.

Within the 2015/2016 financial year 13,594 children had at least one kept DHSW appointment. Of these children, 12,728 had their first kept appointment within the reporting period. 1,225 children had their second kept appointment and 379 had their third (or greater) kept DHSW appointment within 2015/2016. For these children, their prior kept appointment may have occurred in an earlier reporting period (from January 2010 onwards).

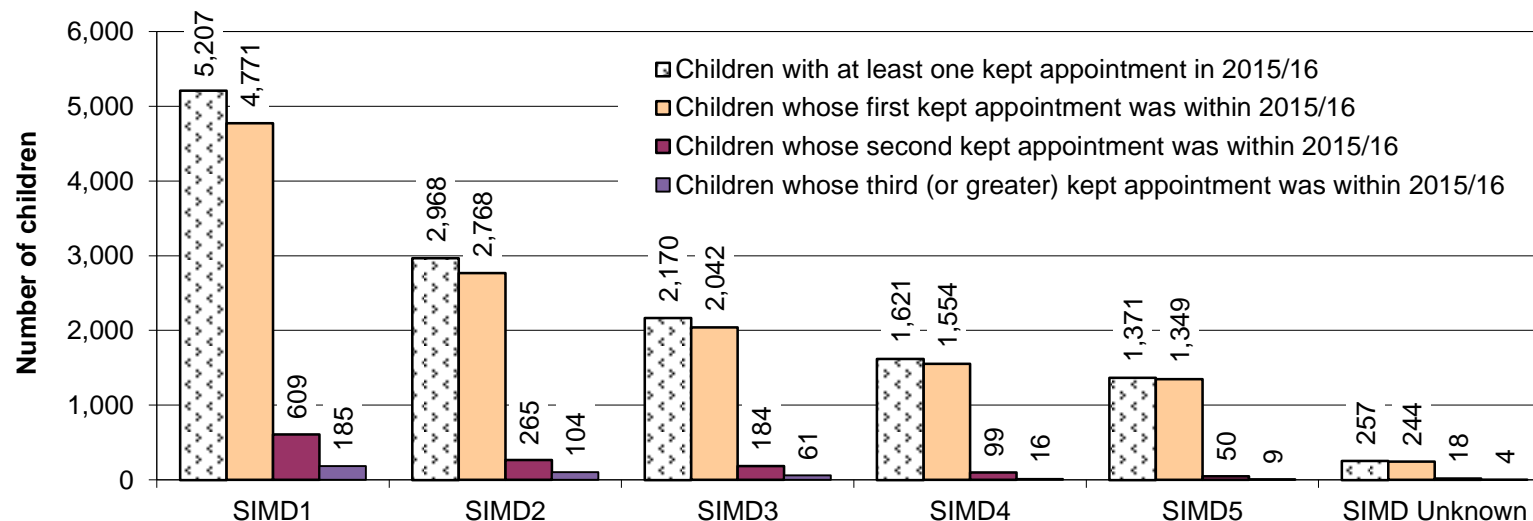


Figure 18: Children with different numbers of kept DHSW appointments by SIMD of child – Scotland, 2015/2016 financial year

SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 18 presents the number of children with at least one kept DHSW appointment within the 2015/2016 financial year and how many of those had their: first, second, or third (or greater) kept appointment within the reporting period by SIMD of the child's home postcode.
- 2) For those children who had their second, or their third (or greater) kept appointment, their prior kept appointment may have occurred in an earlier reporting period (from January 2010 onwards).
- 3) The numbers in the last three bars (children with 1st kept appointment, those whose 2nd appointment was within 2015/16 and those whose 3rd (or greater) appointment was within 2015/16 are not mutually exclusive, as some children might have had several appointments within the same 2015/16 financial year, i.e. their 1st, 2nd and 3rd (or greater).
- 4) Data for this figure are only available for appointments from January 2010 onwards. Kept appointments prior to this were not collected by the Childsmile@HIC system and therefore are not available for inclusion in this figure.
- 5) SIMD 2016 (national) was used.

Practice engagement

Primary Care Dental Services (PCDS) activity data are presented by financial year.

Incorporation of Childsmile Practice into Statement of Dental Remuneration

Childsmile Practice interventions were incorporated into the SDR by the Scottish Government on 1 October 2011. As a result of this change, the contents of the Childsmile Practice section was redesigned to take in account associated changes in data availability.

The data reported in the Practice Engagement and Delivery in Dental Practice sections of this report are directly comparable with the data published in the September 2012 Childsmile National Headline Data report and onwards. However, it is not comparable with the data presented in earlier reports.

Since the incorporation of Childsmile Practice interventions into the SDR, data from GP17 forms that were recording the delivery of fluoride varnish to P3-P7 children through Childsmile Practice have been unavailable (i.e. for NHS Orkney, NHS Shetland and NHS Western Isles). Once these data have been made available, all SDR Childsmile Practice data for these children will be reported in a subsequent report.

ISD are unable to report robust PDS data therefore the total number of PDS practices and those delivering Childsmile interventions cannot be reported.

In total, 858 independent contractor GDS practices were delivering Childsmile interventions during 2015/2016 financial year in Scotland, which is an increase in comparison with 838 independent contractor GDS practices that were delivering Childsmile interventions in 2014/2015.

Table 10: Independent contractor GDS practices delivering Childsmile interventions – Scotland, by NHS Board, 2015/2016 financial year

NHS Board	Total GDS Dental Practices	GDS Dental Practices Delivering Childsmile	
	N	n	% of N
AA	66	60	90.9%
B	17	15	88.2%
DG	30	27	90.0%
F	64	56	87.5%
FV	47	43	91.5%
G	94	79	84.0%
GGC	268	223	83.2%
H	45	31	68.9%
La	118	104	88.1%
Lo	175	149	85.1%
O	4	4	100.0%
S	1	1	100.0%
T	78	66	84.6%
WI	-	-	-
Scotland	1,007	858	85.2%

Independent contractor GDS – independent contractor General Dental Services (non-salaried GDS), ISD – Information Services Division.

NOTES:

- 1) Table 10 presents the number of independent contractor GDS practices delivering Childsmile interventions in each NHS Board, as a percentage of total number of independent contractor GDS practices (total numbers as at 31 March 2016, calculated from the total list of dental practices supplied by ISD). Numbers on top of the columns represent total numbers of independent contractor GDS practices, and numbers/percentages inside the columns represent numbers/percentages of independent contractor GDS practices delivering Childsmile interventions.
- 2) “Dental practices delivering Childsmile interventions” are those practices that have delivered any of the Childsmile interventions (toothbrushing instruction, dietary advice or fluoride varnish application) within the reporting period.
- 3) Total numbers of independent contractor GDS practices include practices with orthodontists only.
- 4) NHS Boards based on the boundaries as at 1 April 2014.

Delivery in dental practice

After the incorporation of Childsmile Practice interventions into the SDR on 1 October 2011 the data on the delivery of Childsmile interventions in dental practice settings are collected for the following age groups:

- For toothbrushing instruction and dietary advice there are two age groups – from 0 to 2 years, and from 3 to 5 years (inclusive).
- For FVA there is only one age group, from 2 to 5 years (inclusive).

In this report, data on the delivery of Childsmile interventions in dental practices are presented in accordance with the above.

Children with *two or more* FVAs (made by a dentist or dental care professional) are those 2-5 years old children (inclusive) who had received an FVA within the reporting period (2015/2016 financial year) and who had also received another FVA in the 12 months prior to that application.

The numbers of children receiving *two or more* FVAs are directly comparable with the data published in the September 2012 report and onwards, but not with the data presented in earlier reports.

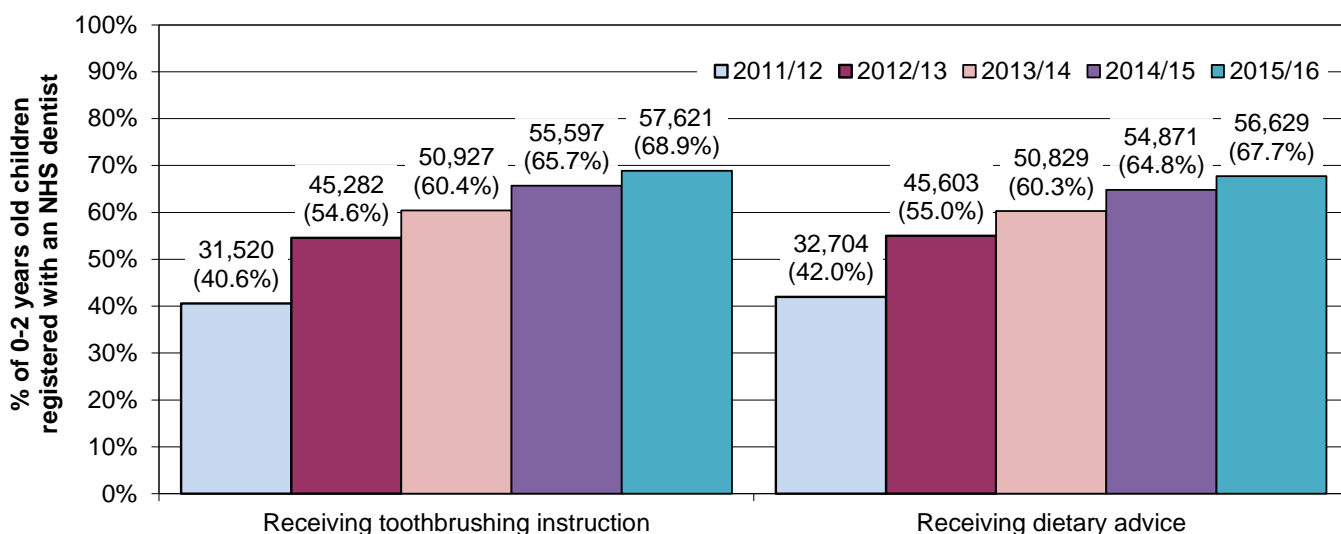


Figure 20: Proportion of 0-2 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, 2011/12-2015/16 financial year

NOTES: Numbers of children registered with an NHS dentist, as at March 2016, were provided by ISD

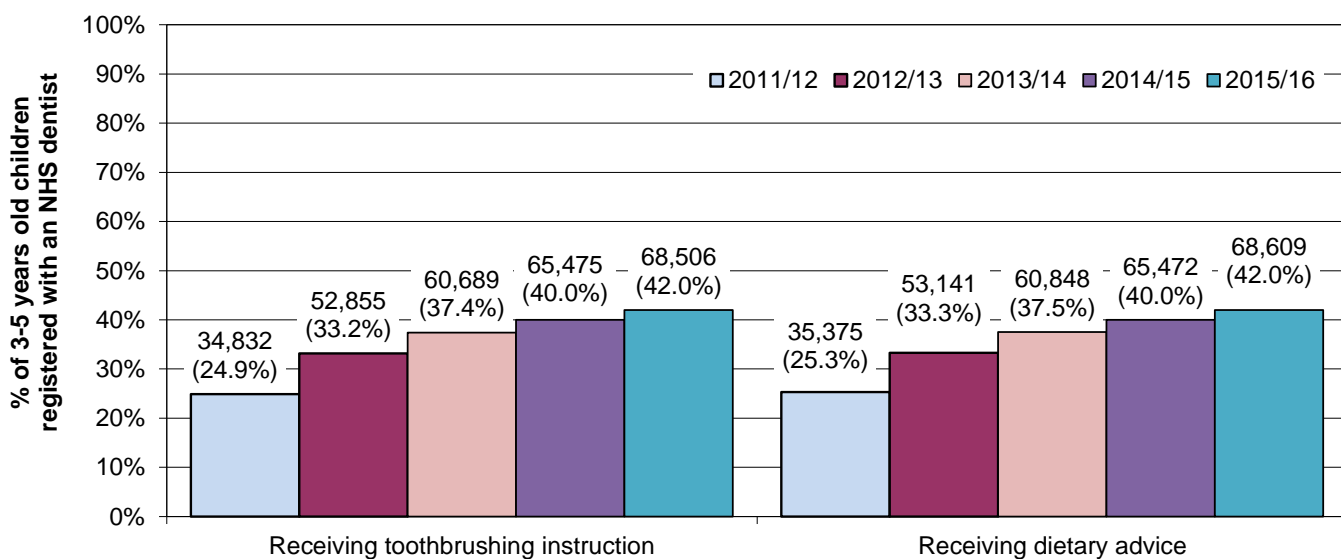


Figure 21: Proportion of 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, 2011/12-2015/16 financial year

Table 11: Proportion of 0-2 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, by NHS Board, 2015/2016 financial year

NHS Board	0-2-year-olds registered with an NHS dentist	0-2-year-olds receiving toothbrushing instruction		0-2-year-olds receiving dietary advice	
	N	n	% of N	n	% of N
AA	5,434	3,359	61.8%	3,316	61.0%
B	1,691	1,186	70.1%	1,166	69.0%
DG	1,981	1,411	71.2%	1,393	70.3%
F	5,943	4,823	81.2%	4,627	77.9%
FV	4,529	2,330	51.4%	2,300	50.8%
G	8,749	5,722	65.4%	5,571	63.7%
GGC	19,765	13,992	70.8%	13,799	69.8%
H	4,602	2,531	55.0%	2,530	55.0%
La	11,294	8,521	75.4%	8,501	75.3%
Lo	12,631	8,573	67.9%	8,323	65.9%
O	456	352	77.2%	354	77.6%
S	503	444	88.3%	448	89.1%
T	5,129	3,245	63.3%	3,196	62.3%
WI	316	287	90.8%	280	88.6%
Scotland	83,665	57,621	68.9%	56,629	67.7%

NOTES:

- 1) Numbers of children registered with an NHS dentist, as at March 2016, were provided by ISD.
- 2) Scotland totals include children who could not be allocated to an NHS Board (due to a missing/incorrect postcode).
- 2) NHS Boards based on the boundaries as at 1 April 2014.

Table 12: Proportion of 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, by NHS Board, 2015/2016 financial year

NHS Board	3-5-year-olds registered with an NHS dentist	3-5-year-olds receiving toothbrushing instruction		3-5-year-olds receiving dietary advice	
	N	n	% of N	n	% of N
AA	10,857	4,025	37.1%	4,019	37.0%
B	3,130	1,568	50.1%	1,568	50.1%
DG	4,017	2,067	51.5%	2,069	51.5%
F	11,692	6,074	52.0%	6,094	52.1%
FV	9,022	3,459	38.3%	3,481	38.6%
G	17,377	7,635	43.9%	7,625	43.9%
GGC	35,740	14,548	40.7%	14,524	40.6%
H	8,940	2,785	31.2%	2,851	31.9%
La	20,398	8,446	41.4%	8,465	41.5%
Lo	25,845	11,610	44.9%	11,659	45.1%
O	627	305	48.6%	304	48.5%
S	817	319	39.0%	332	40.6%
T	11,452	4,471	39.0%	4,443	38.8%
WI	726	424	58.4%	425	58.5%
Scotland	163,202	68,506	42.0%	68,609	42.0%

NOTES:

- 1) Numbers of children registered with an NHS dentist, as at March 2016, were provided by ISD.
- 2) Scotland totals include children who could not be allocated to an NHS Board (due to a missing/incorrect postcode).
- 3) NHS Boards based on the boundaries as at 1 April 2014.

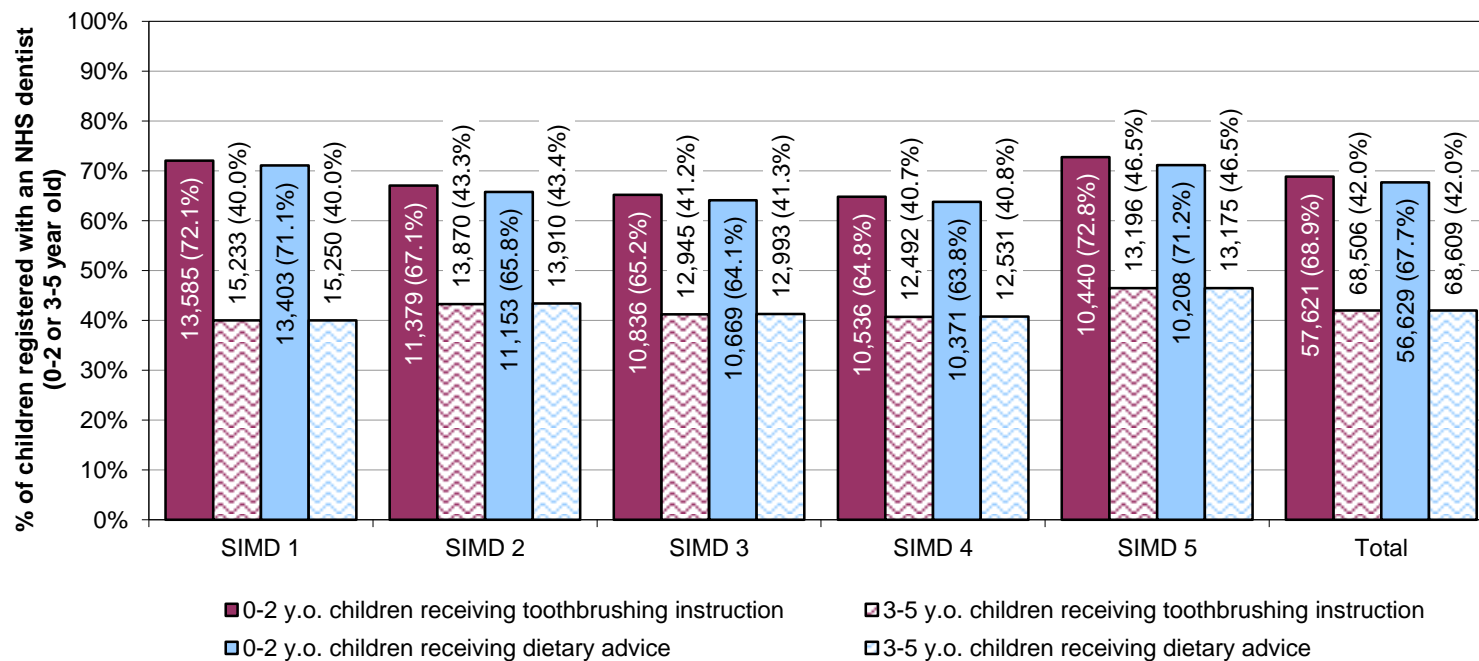


Figure 19: Proportion of 0-2 and 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction / dietary advice – Scotland, by SIMD, 2015/2016 financial year

SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 19 presents the number of 0-2 or 3-5 year old children receiving toothbrushing instruction or dietary advice shown as a proportion of the total number of 0-2 or 3-5 year old children registered with an NHS dentist.
- 2) The numbers of children registered with an NHS dentist as of March 2016 were as follows (data supplied by ISD):
 - 0-2 year olds: SIMD 1 – 18,838 children; SIMD 2 – 16,960; SIMD 3 – 16,632; SIMD 4 – 16,250; SIMD 5 – 14,343; in total – 83,665 (including SIMD Unknown).
 - 3-5 year olds: SIMD 1 – 38,113 children; SIMD 2 – 32,057; SIMD 3 – 31,432; SIMD 4 – 30,682; and SIMD 5 – 28,356 children; in total – 163,202 (including SIMD Unknown).
- 3) Totals include children with SIMD unknown (due to a missing/incorrect postcode).
- 4) SIMD 2016 (national) was used.

For example, in the 2015/2016 financial year 72.1% of 0-2 year old children residing in SIMD 1 and registered with an NHS dentist received toothbrushing instruction at least once (13,585 children), and 71.1% of such children received dietary advice at least once (13,403 children).

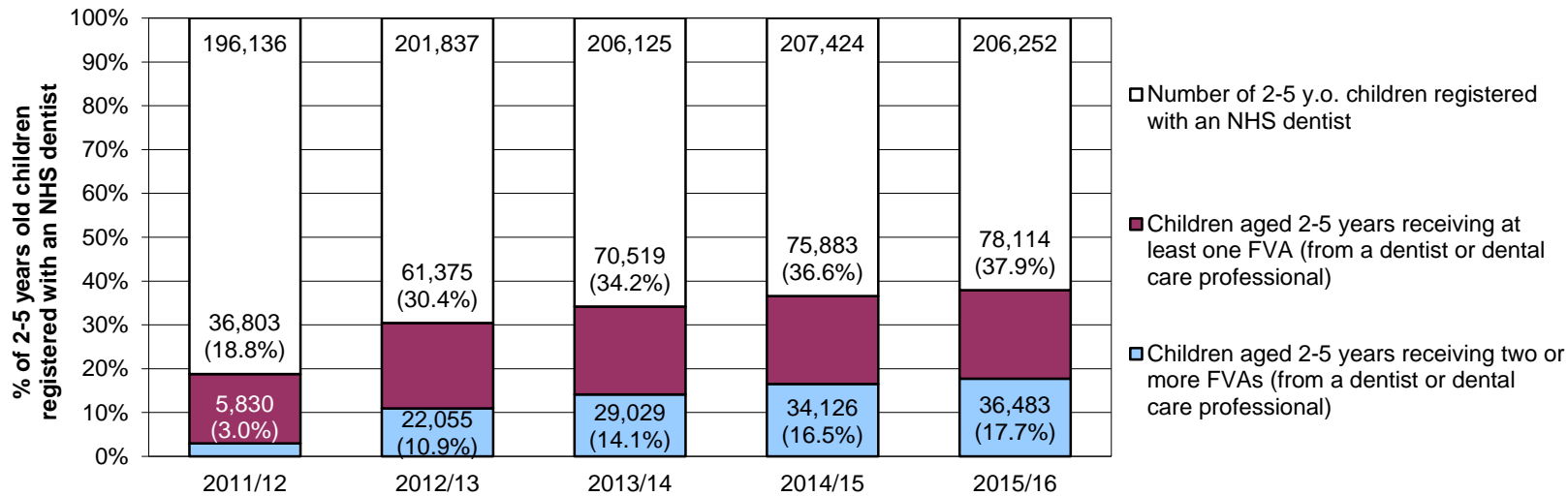


Figure 20: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one FVA or two or more FVAs – Scotland, 2011/12-2015/16 financial year

FVA – fluoride varnish application.

NOTES: Numbers at the top of each column represent the total number of 2-5 year old children registered with an NHS dentist. Numbers and percentages inside the columns represent the numbers/percentages of such children who received FVA at least once within 2015/2016 financial year, and numbers/percentages of such children who received an FVA within the reporting period and who had also received another FVA in the 12 months prior to that application (labelled “two or more FVAs”).

For example, in the 2015/16 financial year 37.9% (78,114) of children registered with an NHS dentist received at least one FVA, and 17.7% (36,483) children received an FVA within 2015/16 and had also received another FVA in the 12 months prior to that application

Table 13: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one FVA or two or more FVAs – Scotland, by NHS Board, 2015/2016 financial year

HB	2-5-year-olds registered with an NHS dentist	2-5-year-olds receiving at least one FVA		2-5-year-olds receiving two or more FVAs	
	N	n	% of N	n	% of N
AA	13,646	4,933	36.1%	2,273	16.7%
B	4,030	1,938	48.1%	1,012	25.1%
DG	5,042	2,271	45.0%	1,094	21.7%
F	14,773	6,138	41.5%	2,823	19.1%
FV	11,361	3,808	33.5%	1,642	14.5%
G	22,048	10,184	46.2%	4,867	22.1%
GGC	45,386	15,694	34.6%	7,125	15.7%
H	11,308	3,104	27.4%	1,268	11.2%
La	25,938	9,109	35.1%	4,182	16.1%
Lo	32,759	13,785	42.1%	6,947	21.2%
O	815	530	65.0%	240	29.4%
S	1,047	454	43.4%	165	15.8%
T	14,245	4,608	32.3%	2,104	14.8%
WI	911	497	54.6%	203	22.3%
Scotland	206,252	78,114	37.9%	36,483	17.7%

FVA – fluoride varnish application.

NOTES:

1) Scotland totals include children who could not be allocated to an NHS Board (due to a missing/incorrect postcode).

2) NHS Boards based on the boundaries as at 1 April 2014.

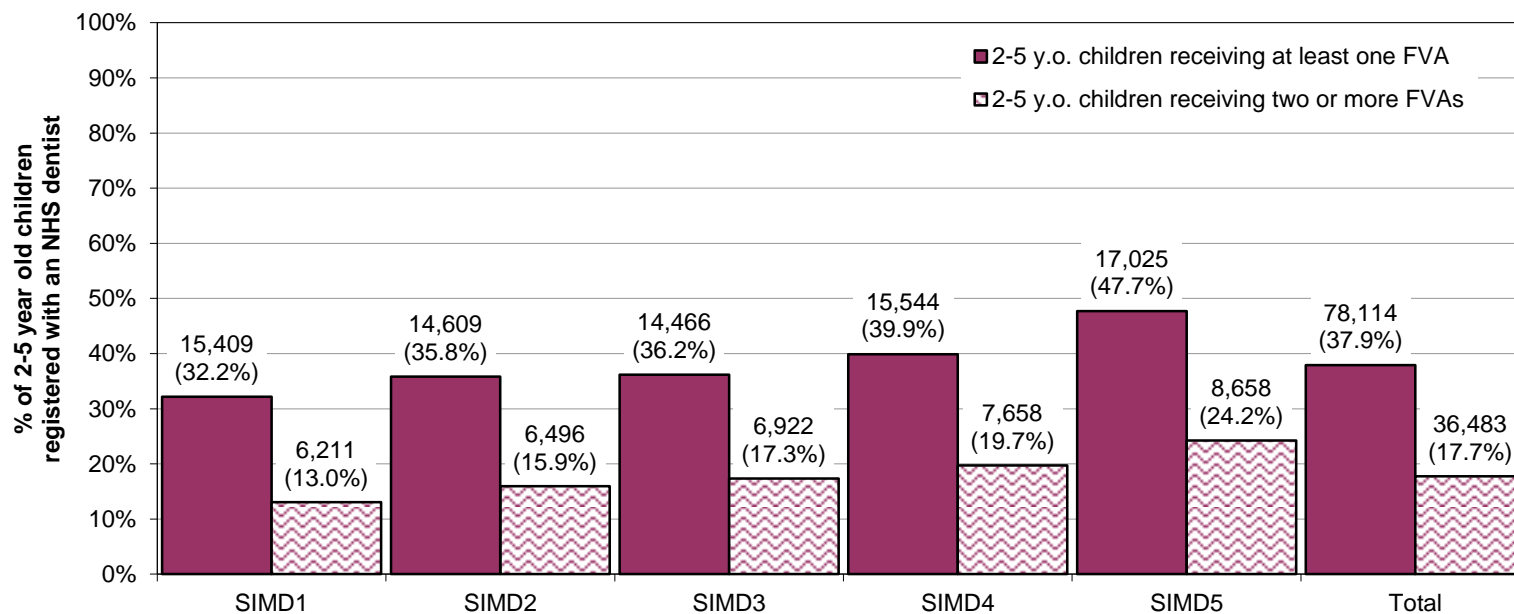


Figure 21: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one / two or more FVAs – Scotland, by SIMD, 2015/2016 financial year

FVA – fluoride varnish application, SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 21 presents the number of 2-5 year old children receiving at least one or two or more FVAs shown as a proportion of the total number of 2-5 year old children registered with an NHS dentist and belonging to one of the SIMD quintiles.
- 2) The numbers of 2-5 year old children registered with an NHS dentist as of March 2016 were as follows (data supplied by ISD): SIMD 1 – 47,869 children; SIMD 2 – 40,778; SIMD 3 – 40,004; SIMD 4 – 38,951; SIMD 5 – 35,707; and in total there were 206,252 (including SIMD Unknown).
- 3) Totals include children with SIMD unknown (due to a missing/incorrect postcode).
- 4) SIMD 2016 (national) was used.

For example, in the 2015/2016 financial year, 32.2% of 2-5 year old children residing in SIMD 1 and registered with an NHS dentist received at least one FVA (15,409 children), and 13.0% (6,211 children) received an FVA within the 2015/2016 financial year and had also received another FVA in the 12 months prior to that application (labelled “two or more FVAs”).

Number of fluoride varnish applications in nursery, school and practice settings

In the 2015/2016 academic year, 364,076 FVAs were applied across all three arms of the programme (Nursery, School and Practice).

Table 14: Number of FVAs in nursery, school and practice settings, by academic year, 2010/11-2014/15

Health Board	2011/2012			2012/2013			2013/2014			2014/2015			2015/2016		
	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice
AA	2,385	4,970	3,237	2,726	6,272	3,935	2,971	7,119	4,972	2,974	7,122	5,676	3,852	8,882	6,079
B	830	2,408	1,356	878	3,590	2,030	1,037	4,458	2,396	1,038	4,458	2,360	1,176	5,879	2,543
DG	819	1,746	1,646	820	2,199	2,019	878	2,384	2,160	878	2,384	2,594	977	2,449	2,720
F	2,768	8,792	3,824	3,119	11,614	5,831	3,460	12,993	6,235	3,457	12,995	7,117	3,311	14,453	7,530
FV	1,400	2,009	2,776	2,247	4,633	4,528	2,554	5,360	4,571	2,556	5,358	4,670	3,496	5,841	4,662
G	4,555	10,130	3,179	6,898	15,578	5,210	9,198	17,326	9,442	9,204	17,323	12,206	10,004	19,468	12,982
GGC	6,485	24,910	11,613	7,368	32,057	14,147	8,257	33,508	16,597	8,253	33,379	18,490	11,233	36,198	19,557
H	3,080	9,602	2,224	3,500	13,601	3,500	4,139	17,639	4,304	4,141	17,643	3,741	4,316	18,436	3,572
La	10,078	5,842	7,495	21,181	13,281	9,942	21,267	23,966	10,446	21,249	23,969	11,033	19,584	35,452	10,980
Lo	6,040	13,667	9,050	5,681	18,739	13,451	8,108	26,937	15,496	8,113	26,942	16,759	6,746	23,277	17,749
O	726	1,251	184	559	1,223	328	539	1,639	494	539	1,639	547	559	2,072	640
S	554	900	569	671	1,302	559	799	1,337	688	799	1,337	553	847	1,405	442
T	2,749	8,719	3,057	3,072	14,249	5,030	3,129	18,093	5,445	3,131	18,093	5,610	3,508	20,841	5,657
WI	395	654	257	636	1,380	596	640	1,448	833	640	1,448	633	717	2,073	698
Unknown NHS Board	-	-	2,409	-	-	3,198	-	-	2,642	-	-	1,661	-	-	1,213
Scotland	42,864	95,600	52,876	59,356	139,718	74,304	66,976	174,207	86,721	66,972	174,090	93,650	70,326	196,726	97,024

FVA – fluoride varnish application.

NOTES:

- 1) Table 14 presents number of FVAs applied in different settings by academic year.
- 2) If a child's postcode is missing or incorrect, the child cannot be assigned to an NHS Board and is reported under "Unknown NHS Board".
- 3) There are no data available on varnishes applied to P3-P7 children in NHS Orkney, NHS Shetland and NHS Western Isles in practice settings in 2011/12 – 2015/16 academic years.
- 4) NHS Boards based on the boundaries as at 1 April 2014.

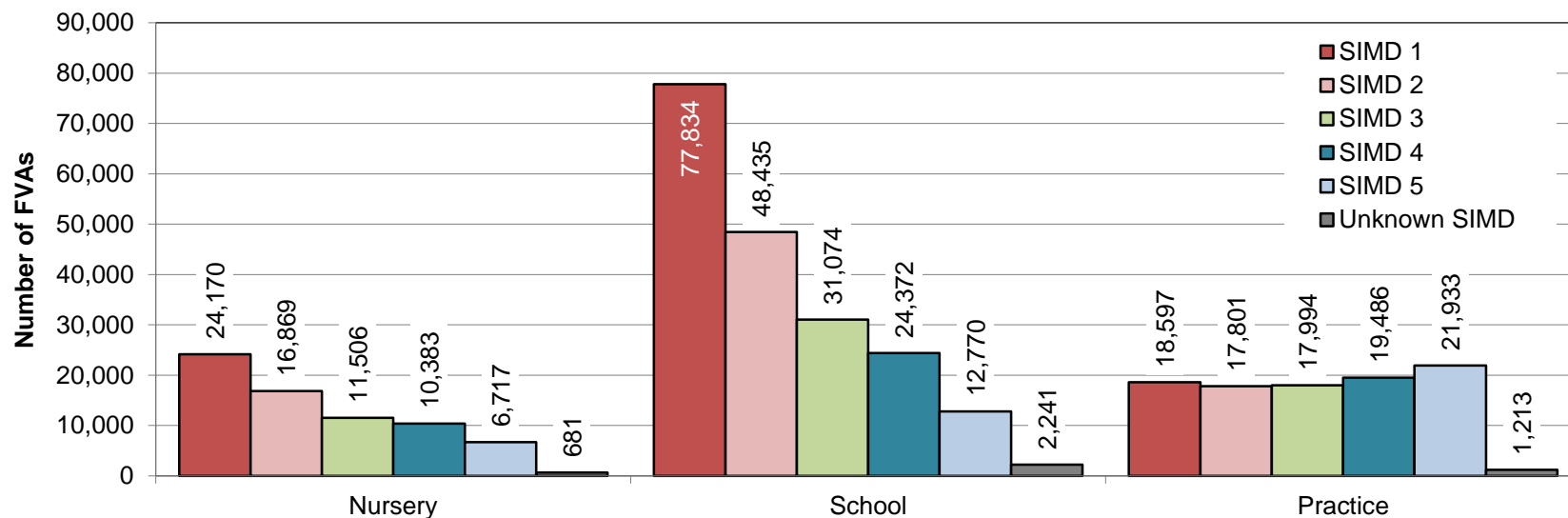


Figure 22: SIMD (national) distribution of FVAs in nursery, school and practice settings – Scotland, 2015/2016 academic year

SIMD (national) - Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 22 shows distribution of FVAs by setting (nursery, school or dental practice) and national SIMD applied in 2015/16 academic year.
 Across the settings, 120,601 FVAs were applied to SIMD 1 children; 83,105 FVAs to SIMD 2 children; 60,574 to SIMD 3; 54,241 to SIMD 4; and 41,420 FVAs were applied to SIMD 5 children. In total, 364,076 FVAs were applied in Nursery, School and Practice settings combined (including FVAs to children with unknown SIMD).
- 2) SIMD 2016 (national) was used.

Childsmile workforce

Please refer to Appendix 1 for definitions of terms used throughout this report.

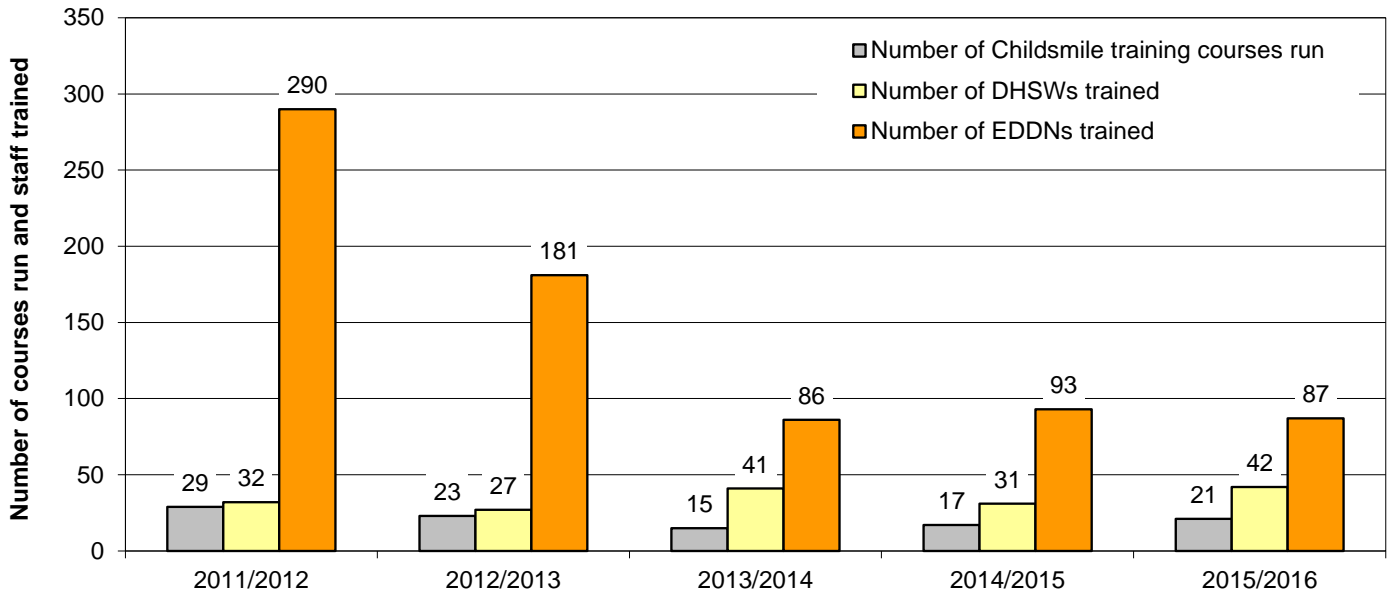


Figure 23: NES Childsmile training courses and staff trained – Scotland, 2011/12-2015/16 financial year

DHSW – Dental Health Support Worker, EDDN – Extended Duty Dental Nurse, NES – NHS Education for Scotland.

NOTE: Figure 23 presents data on the number of Childsmile training courses run and staff trained. The data are provided by NES.

Out of the total of 87 EDDNs trained within 2015/2016 financial year, 64 were from independent contractor GDS practices and 23 were from PDS practices.

Appendix 1: Definitions

The tables below give definitions for terms used throughout the Childsmile National Headline Data Report.

Childsmile Core

Term	Definition
Childsmile Core	Childsmile Core is a Scotland-wide initiative to help improve the health of children's teeth, through the distribution of free dental packs (containing a toothbrush, tube of 1000ppm fluoride toothpaste and an information leaflet) and supervised toothbrushing programmes in all nurseries, and Primary 1 and Primary 2 classes in priority schools. Over and above this, NHS Boards may deliver toothbrushing to older children in primary schools or include non-priority schools into their toothbrushing programmes.
Establishments participating in the toothbrushing programme (pre-school establishments or primary schools)	Establishments participating in the toothbrushing programme (Childsmile Core) are those establishments (pre-school establishments or primary schools) that had at least one toothbrushing monitoring contact recorded on the Childsmile@HIC system within the reporting period.
SIMD	<p>Scottish Index of Multiple Deprivation – The measure of deprivation used throughout this report is the 2016 population-weighted Scottish Index of Multiple Deprivation (SIMD). The Index considers 38 indicators to provide a relative measure of deprivation. The index is presented by SIMD quintile (a quintile describes a fifth of the population) with SIMD 1 being the most deprived quintile and SIMD 5 being the least deprived quintile.</p> <p>Health Board (local) SIMD is used for Childsmile Core as Health Boards utilise the local SIMD index for targeting within this part of the programme.</p>
Total number of pre-school educational establishments	The total numbers of pre-school educational establishments as at July 2016 were provided by the Childsmile teams in NHS Boards.
Total number of local authority primary schools	Total numbers of local authority primary schools as at September 2015 are from <i>Openings and Closings Exercise</i> , June 2015, by the Scottish Government (available online at: http://www.scotland.gov.uk/Topics/Statistics/Browse/School-Education/Datasets/contactdetails)

Childsmile Nursery & School

Term	Definition
Childsmile Nursery & Childsmile School	Childsmile Nursery and Childsmile School provide clinical prevention programmes offering twice-yearly fluoride varnishing, through community and primary care dental services, for children attending priority nurseries and primary schools.
Children with consents	Children with consents are all children whose parents/guardians have completed, signed and returned a positive consent form (i.e. children with validated consents, with invalid consents and with consents awaiting validation by a dentist).
Children with validated consents	Children with validated consents are children who have been consented by their parents/guardians and whose consents were validated for fluoride varnish application by a dentist (dentists may not validate consents of children who were hospitalised due to asthma or allergies – this is at the dentists discretion).
Participating establishments (nurseries and schools)	Participating establishments (nurseries and schools) are those establishments with at least one Childsmile Nursery or School fluoride varnish application session during the reporting period.
SIMD	<p>Scottish Index of Multiple Deprivation – The measure of deprivation used throughout this report is the 2016 population-weighted Scottish Index of Multiple Deprivation (SIMD). The Index considers 38 indicators to provide a relative measure of deprivation. The index is presented by SIMD quintile (a quintile describes a fifth of the population) with SIMD 1 being the most deprived quintile and SIMD 5 being the least deprived quintile.</p> <p>Health Board (local) SIMD is used for Childsmile Nursery and School as Health Boards utilise the local SIMD index for targeting within this part of the programme.</p>
Targeted children in participating nurseries/schools	<p>The number of targeted children in participating nurseries and schools is derived from the Childsmile@HIC system class lists.</p> <p>The number of targeted children in schools relates to the children in the primary year(s) group(s) reached by the Childsmile teams in participating schools, e.g. Childsmile teams may have reached up to Primary 5 classes and children in primaries 1, 2, 3, 4 and 5 will be included in the figures.</p>
Total number of children (of nursery age and P1-P4 age) in population	<p>The population baselines for 2011/12 and 2012/13 in this report are based on Small Area Population Estimates at 30 June 2011 (based on the 2001 Census). The baselines for 2013/14 and 2014/15 in this report are based on Small Area Population Estimates at 30 June 2013 (based on the 2011 Census), and for 2015/16 based on Small Area Population Estimates at 30 June 2015 (2011 Census), which were provided by the National Records of Scotland (NRS; http://www.nrscotland.gov.uk) for each datazone by single year of age.</p> <p>In this report the total nursery age (3- and 4-year-olds) and cumulative P1-P2 and P1-P4 age populations are used.</p>
Unknown SIMD	If a postcode is missing from a child's record or is incorrect, the record cannot be assigned to a SIMD quintile, Children with incorrect/missing postcodes are reported under the "Unknown SIMD" sections of the relevant graphs.

Childsmile Referral at the 6-8 week review

Term	Definition
Children referral at the 6-8 weeks review by a Health Visitor	<p>The 'Childsmile Referral' field was added to the 6-8 week review form on 5 July 2010. The 6-8 week review form is generally completed at around 6-8 weeks after the birth of the child by a Health Visitor. (More information is available here: http://www.isdscotland.org/Health-Topics/Child-Health/Child-Health-Programme/Child-Health-Systems-Programme-Pre-School.asp#6-8Week)</p> <p>The field has the following values: Yes (Y), No (N), Refused (R), Incomplete (I) and Unknown (U). At the review the health visitor records a Y or N in the Childsmile referral box to indicate whether the child should be referred to the programme. If the box is left blank the child health administrator will enter an 'I' when the form is keyed and they will follow up with the health visitor to obtain the actual result. 'U' is the default value for the field. 'R' was added as a valid Childsmile referral value from 4 April 2011.</p> <p>Starting from January 2016 only two values are recorded in the 'Future Action: Childsmile' field: Request assistance from Childsmile (R) and Refused (W). In all other cases the field is left blank.</p>
SIMD	<p>Scottish Index of Multiple Deprivation – The measure of deprivation used throughout this report is the 2016 population-weighted Scottish Index of Multiple Deprivation (SIMD). The Index considers 38 indicators to provide a relative measure of deprivation. The index is presented by SIMD quintile (a quintile describes a fifth of the population) with SIMD 1 being the most deprived quintile and SIMD 5 being the least deprived quintile.</p> <p>National SIMD is used for reporting the 6-8 week review data.</p>

Childsmile Practice

Term	Definition
Childsmile Practice	The Childsmile Practice programme is a universally accessible child-centred NHS dental service. As part of the Childsmile Practice pathway the programme is introduced to the family by the health visitor who will refer them straight to a dental practice or to a dental health support worker (DHSW). DHSWs will give additional oral health support to children and families most in need and make a first appointment for the child with a local Childsmile dental service, where a programme of Childsmile care, tailored to meet the needs of the individual child, will be provided by the dental team.
Children receiving dietary advice	Children receiving dietary advice are those children who received at least one dietary advice from a dentist or dental care professional within the reporting period. Numbers are reported separately for 0-2 years old children and 3-5 years old children (inclusive).
Children receiving toothbrushing instruction	Children receiving toothbrushing instruction are those children who received toothbrushing instruction from a dentist or dental care professional at least once within the reporting period. Numbers are reported separately for 0-2 years old children and 3-5 years old children (inclusive).
Children referred to DHSW (as recorded on HIC by DHSWs)	Children referred to DHSW by a health visitor, clinic (e.g. recruitment at a weaning fayre or mother & toddler group) or via other route (e.g. self-referral or a promotional event), as recorded by Childsmile staff on the HIC system.
Children registered with an NHS dentist	Data on total numbers of children registered with an NHS dentist are supplied by the Information Services Division (ISD): http://www.isdscotland.org/Health-Topics/Dental-Care/General-Dental-Service/registration-and-participation.asp Note that for this report the data on dental registrations (by SIMD by single year of age) as at March 2016 were provided by ISD on request.
Children registered / will register with own dentist	Children registered/will register with own dentist are children contacted by a DHSW whose parents/guardians advised that the child was registered / would register with own dentist (i.e. self-reported data). These children did not have a dental appointment arranged by a DHSW.
Children successfully contacted by DHSW	Children successfully contacted by DHSW are all children/families contacted by DHSW via a home visit, clinic, a telephone call or by other means (e.g. a promotional event), and for whom an "Appointment Kept" or "Declined on the day – Refused Childsmile" result was recorded.
Children with a Childsmile dental appointment arranged	Children with a Childsmile dental appointment arranged are those children whose families were contacted by a DHSW and who were assisted in booking an appointment at a dental practice delivering Childsmile.
Children with <i>at least one</i> fluoride varnish application (FVA)	Children with at least one FVA are those 2-5 years old children (inclusive) who received a FVA from a dentist or dental care professional, within the reporting period.
Children with <i>two or more</i> FVAs	Children with two or more FVAs (made by a dentist or dental care professional) are those 2-5 years old children (inclusive) who had received at least one FVA within the reporting period and who had also received another FVA in the 12 months prior to that application.

Childsmile Practice (continued)

Term	Definition
Dietary advice	Dietary advice is giving families information on nutrition and drinks (to prevent decay) to foster good oral health behaviour. All contacts within the dental practice offer the opportunity for the whole dental team to inform families of the key oral health messages.
Fluoride varnish application (FVA)	Practices are expected to provide fluoride varnish application to the teeth of all children twice yearly, from the age of 2 (provided an appropriate medical history is available and deemed satisfactory). This is recommended by the Scottish Dental Clinical Effectiveness Programme (SDCEP) Prevention and Management of Dental Caries in Children guidance.
GDS (General Dental Services) dental practices delivering Childsmile interventions	<p>Dental practices delivering Childsmile interventions are those independent contractor GDS practices that have delivered any of the Childsmile interventions (toothbrushing instruction, dietary advice or fluoride varnish application) within the reporting period.</p> <p>ISD are unable to report robust PDS data therefore the total number of PDS practices delivering Childsmile interventions cannot be reported.</p>
Independent contractor GDS (independent contractor General Dental Services)	<p>Independent contractor General Dental Services are independent practices contracted to work on behalf of local NHS Boards.</p> <p>Independent contractor GDS were called non-salaried GDS in previous reports.</p>
PDS (Public Dental Service)	<p>From 1 January 2014, dentists employed by their local NHS Board provide dental care and treatment under what is known as the Public Dental Service (PDS). PDS includes all Scottish salaried dentists (formerly Community Dental Services and Salaried General Dental Services).</p> <p>PDS is a complementary service to general dental practice. In practice this means serving all priority groups, including children or adults who cannot obtain treatment from a general dental practice, people with special needs, patients requiring specialised services including surgical dentistry, paedodontics, and services for anxiety including sedation and general anaesthetics. They also assist with patients who are restricted to their homes or hospitalised.</p>
SIMD	<p>Scottish Index of Multiple Deprivation – The measure of deprivation used throughout this report is the population-weighted Scottish Index of Multiple Deprivation (SIMD). The Index considers 38 indicators to provide a relative measure of deprivation. The index is presented by SIMD quintile (a quintile describes a fifth of the population) with SIMD 1 being the most deprived quintile and SIMD 5 being the least deprived quintile.</p> <p>SIMD 2009 Version 2 was used for 2011/12, SIMD 2012 was used for 2012/13–2014/15 and SIMD 2016 was used for reporting 2015/16 data.</p> <p>National SIMD is used for Childsmile Practice as payments are processed for General Dental Practitioners using the national SIMD index.</p>
Toothbrushing instruction	Toothbrushing instruction is giving families information on when to brush, types of brush and toothpaste to use, amount of toothpaste to use, methods and demonstrations of brushing, and parents brushing their child’s teeth to demonstrate skill acquisition. All contacts within the dental practice offer the opportunity for the whole dental team to inform families of the key oral health messages.
Total number of independent contractor GDS practices	The total numbers of independent contractor general dental practices as at 31st March 2016 were supplied by ISD Scotland, MIDAS (extracted in July 2016).

Childsmile Practice (continued)

Term	Definition
Unknown NHS Board	If a postcode is missing from a child's record or is incorrect, the record cannot be assigned to a health board. All children with incorrect/missing postcodes are reported under "Unknown NHS Board" section of the relevant graphs.
Unknown SIMD	If a postcode is missing from a child's record or is incorrect, the record cannot be assigned to a SIMD quintile, Children with incorrect/missing postcodes are reported under the "Unknown SIMD" sections of the relevant graphs.

Childsmile Workforce

Term	Definition
DHSW	Dental Health Support Workers are employed by NHS Boards and are responsible for liaising with families, health visitor teams, nurseries, schools and dental practices with regards to Childsmile.
EDDN	Extended Duty Dental Nurses may be employed by NHS Boards or independent contractors (family dentists) and provide preventive advice and regular Fluoride Varnish applications.

This report was prepared by the Central Evaluation and Research Team (University of Glasgow).

Data supplied by:

Health Informatics Centre, Dental Health Services & Research Unit (University of Dundee);
Information Services Division, NHS National Services Scotland, Edinburgh;
National Health Service Education for Scotland;
Childsmile coordinators / Childsmile teams in NHS Boards.

November 2016



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