

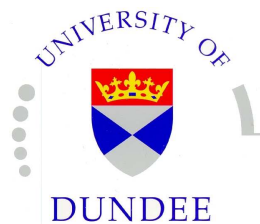


Childsmile

National Headline Data

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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 HIC Childsmile system, 1,958 pre-school establishments and 936 primary schools were participating in the Childsmile Core toothbrushing programme in Scotland during the 2012/13 academic year (Figs 1 & 2, p.3; NOTE: data exclude NHS GGC, data for NHS Lo are incomplete).

Childsmile Nursery & School

Participating establishments

- 888 pre-school establishments and 716 primary schools were participating in the Childsmile Nursery and School programme in Scotland during the 2012/13 academic year (Fig 4 & Tab 1, p.5).

Consent rates

- During the 2012/13 academic year the average consent rate for Scotland among nursery children was 89%, and 85% among school children (as a percent of targeted children). This is slightly higher than in 2011/12 (Figs 5 & 6, p.6-7).
- In the 2012/13 academic year consent rates varied between boards, for nurseries the range was from 78% to 94%, and for schools 77% to 95%, of targeted children (Figs 7 & 8, p.8).

Fluoride varnish application rates

- 78% of targeted nursery children and 81% of targeted school children received *at least one* fluoride varnish application in the 2012/13 academic year, which is higher than in 2011/12 (Figs 5 & 6, p.6-7).
- Variation in fluoride varnish application rates was evident across boards. The percentage of targeted children receiving *at least one* fluoride varnish application ranged from 70% to 82% in nurseries and from 72% to 90% in schools (2012/13 academic year) (Figs 7 & 8, p.8).
- 46% of targeted nursery children received *two or more* fluoride varnish applications in the 2012/13 academic year, 17% higher than in 2011/12 (Fig 5, p.6). 65% of targeted school children received *two or more* fluoride varnish applications in the 2012/13 academic year, 18% up from 2011/12 (Fig 6, p.7).
- The percentage of children receiving *two or more* fluoride varnish applications ranged from 39% to 51% for nurseries, and from 56% to 72% for primary schools across NHS Boards (as a percent of targeted children, 2012/13 academic year) (Figs 7 & 8, p.8).

SIMD quintile distribution of children receiving a fluoride varnish application:

- 38% of nursery children and 49 % of school children who received *at least one* fluoride varnish application within 2012/13 academic year were in SIMD 1 quintile (health board (local) SIMD 2012) (Figs 9 & 10, p.10-11).
- Similarly, 38% of nursery children and 49% of school children who received *two or more* fluoride varnish applications were in SIMD 1 quintile (health board (local) SIMD 2012) (Figs 9 & 10, p.10-11).

Proportion of SIMD1 population receiving a fluoride varnish application:

- 48% of the population of nursery aged children residing in SIMD 1 quintile received *at least one* fluoride varnish application in the 2012/13 academic year. 28% received *two or more* fluoride varnish applications (health board (local) SIMD 2012) (Figs 11 & 12, p.12-13).

- 63% of the population of P1-P4 aged children residing in SIMD 1 quintile received *at least one* fluoride varnish application in the 2012/13 academic year. 51% received *two or more* fluoride varnish applications (health board (local) SIMD 2012) (Fig 13 & 14, p.14-15).

Childsmile referral from 6-8 week review

- In the 2012/2013 financial year 21% (11,227) of children who received a Health Visitor's review at 6-8 weeks of age were referred to Childsmile (NHS Board range: 3%-41%), 51% (27,277) of children were not referred ('No' selected; NHS Board range: 9%-97%) and 2% (941) of families refused Childsmile (NHS Board range: 0%-3%). Moreover, 22% of all review forms were incomplete and the outcome of 3% of the reviews was unknown (Fig 16 and Tab 3, p.17).

Childsmile Practice

Child referral and Dental Health Support Worker contact

- 14,331 children in Scotland were recorded on the HIC Childsmile system as referred to a Dental Health Support Worker in the 2012/13 academic year – a 3% decline in comparison with the 2011/12 academic year (Fig 17, p.18).
- 13,909 children were successfully contacted by a Dental Health Support Worker in the 2012/13 academic year – a decline of 1% in comparison with the 2011/2012 academic year (Fig 17, p.18).
- In the 2012/13 academic year the majority of children were referred to Dental Health Support Workers by a Health Visitor – 12,430 children. 710 children were referred to Childsmile via Clinic, 1,127 via 'Other' source, and for 64 children the type of referral was not specified (Fig 18, p.19).
- There were 13,553 children with at least one kept Dental Health Support Worker's appointment, 369 families who refused Childsmile, 547 families that could not be contacted and for 2,303 families the end result was a 'Failed to Attend / Not at home' (Fig 19, p.19).
- Within the 2012/13 academic year 12,639 children had one kept appointment with a Dental Health Support Worker, 734 children had two kept appointments and 180 children had three or more kept Dental Health Support Worker's appointments (Fig 20, p.20).

Practice engagement

- 80% (799) of non-salaried general dental service practices were delivering Childsmile interventions in the 2012/13 financial year, a slight increase compared with 77% (704) as at 31 March 2012 (Fig 21, p.21).
- During the 2012/13 financial year 127 community and salaried dental service practices were delivering Childsmile interventions, which is an increase from 93 practices as at 31 March 2012 (Fig 22, p.22).

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 2012/13 financial year increased in comparison with the 2011/12 financial year. The proportion of 0-2-year-olds receiving toothbrushing instruction increased by 14%, whereas for 3-5-year-olds the increase was 8%. In regard to children receiving dietary advice, the increase for 0-2-year-olds was 13% and for 3-5-year-olds 8% (Figs 23 & 24, p.23).
- During the 2012/13 financial year, 55% of 0-2 year old children registered with an NHS dentist (NHS Board range: 34%-91%), and 33% of 3-5 year old children registered with an NHS dentist in Scotland received *toothbrushing instruction* (NHS Board range: 22%-67%) (Figs 25 & 26, p.24-25).
- 55% of 0-2 year old children registered with an NHS dentist (NHS Board range: 34%-93%), and 33% of 3-5 year old children registered with an NHS dentist in Scotland received *dietary advice* (NHS Board range: 22%-67%) (Figs 27 & 28, p.26).

- The proportions of 2-5-year-old children registered with an NHS dentist receiving fluoride varnish application in the 2012/13 financial year increased in comparison with the 2011/12 financial year. The proportion of children who received *at least one* fluoride varnish application increased by 12%, and for those who received *two or more* fluoride varnish applications the increase was 8% (Fig 30, p.28).
- In the 2012/13 financial year, 30% of 2-5 year old children registered with an NHS dentist (NHS Board range: 21%-64%) received *at least one* fluoride varnish application and 11% 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: 7%-17% (Fig 31, p.29).
- Proportions of 2-5 year old children registered with an NHS dentist who received *at least one* fluoride varnish application were evenly spread across the SIMD quintiles and were within the range from 27% to 32%. Proportions of 2-5 year old children registered with an NHS dentist who received *two or more* fluoride varnish applications ranged from 9% to 13% between the SIMD quintiles (Fig 32, p.30).

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

- In the 2012/13 academic year, 59,093 fluoride varnish applications were applied in nursery settings, 136,552 in school settings and 74,304 in dental practice settings (Tab 5, p.31-32).

Childsmile Workforce

- In the 2012/13 financial year, 23 Childsmile training courses were run, 27 Dental Health Support Workers and 181 Extended Duty Dental Nurses were trained (Fig 33, p.33). For comparison, within the previous financial year 29 courses were run with 32 Dental Health Support Workers and 290 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

CDS	Community Dental Services
CERT	Central Evaluation and Research Team
CHI	Community Health Index
CHP	Community Health Partnership
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
PSD	Practitioner Services Division
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 & School and DHSW Practice 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 Primary Care Dental Services (PCDS) are given by financial year (1 April to 31 March).

A section presenting 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 / Public Health Nurse, has been added into this report. Childsmile referrals from the 6-8 week review are provided by a full/half financial year.

Childsmile Core, Nursery & School and Childsmile Practice Dental Health Support Worker (DHSW) sections of the report are based on data available at 28th August 2013, and Childsmile Practice Primary Care Dental Services (PCDS) section – on data available at 24th July 2013. Figures may be subject to further updating¹.

The report covers the following periods:

- Childsmile Core: 2012/2013 academic year (data from the Health Informatics Centre (HIC)).
- Childsmile Nursery & School: 2006/07 to 2012/13 academic year (data from HIC).
- Referrals to Childsmile from the 6-8 Week Assessment: 2010/11 to 2012/13 financial year (data from CHSP-PS via the Information Services Division (ISD) Scotland)
- Childsmile Practice – DHSW data: 2011/12 to 2012/13 academic year (data from HIC). DHSW Practice data are reported by academic year as these data are currently collected by the HIC Childsmile system, which operates by academic year;
- Childsmile Practice – PCDS data: 2006/07 to 2012/13 financial year (data from the Central Evaluation and Research Team (CERT) and ISD);
- Childsmile Workforce – training figures: 2008/09 to 2012/13 financial year (data from NHS Education for Scotland (NES)).

Data availability

The information on establishments participating in Childsmile Core programme, entered into the HIC Childsmile system for the 2012/2013 academic year, is presented in this report. Previously available toothbrushing data from the Action Plan Monitoring System for NHS Boards (ISD(S)37 return) were presented in the March 2011 report and the data for the 2011/2012 academic year were presented in the September 2012 report. [Previous reports are available here: <http://www.child-smile.org.uk/documents/5225.aspx>]

DHSW Practice data are reported for 2011/12 and 2012/13 academic years (HIC only data). For the previous years' data see the September 2012 report.

It is important to bear in mind that the Childsmile programme components (Childsmile Core, Nursery, School and Practice) are at different stages of implementation in different NHS Boards.

Incorporation of Childsmile Practice into Statement of Dental Remuneration

Childsmile Practice interventions were incorporated into the Statement of Dental Remuneration (SDR) by the Scottish Government on 1 October 2011. As a result of this change, the contents of the Childsmile Practice section of this report have been redesigned to take associated changes in data availability into account.

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

Community Dental Services data

Community Dental Services (CDS) data submitted to the Practitioner Services Division (PSD) is currently unavailable for inclusion into this report. Only CDS data submitted to CERT and salaried General Dental Services (GDS) data submitted to PSD is included.

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.

When reporting the 2012/2013 data SIMD 2012 was used, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

“Health board (local) SIMD” is used for Nursery and School and “National 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 is in line with ISD reporting of dental statistics. Please note the child may reside in the NHS Board but have been seen by a dental practice anywhere in Scotland.

Population baselines

The source of the population baselines has been changed for 2012/2013 academic year.

The population baselines for 2012/2013 in this report are based on Small Area Population Estimates at 30 June 2011, which were provided by the National Records of Scotland (NRS; <http://www.nrscotland.gov.uk>) for each data zone by single year of age. These population estimates are based on the 2001 Census and were the most recent estimations available at the time of production of this report.

The population baselines for previous years (2006/2007 – 2011/2012) have remained the same as they were before: the total number of children in the population by year group was calculated using CHI (Community Health Index) records of children born within each Health Board area within a defined period. Children were assigned to a year group using their date of birth.

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 HIC Childsmile system, 1,958 pre-school establishments and 936 primary schools were participating in the Childsmile Core toothbrushing programme in Scotland during the 2012/13 academic year (data exclude NHS GGC, data for NHS Lo are incomplete).

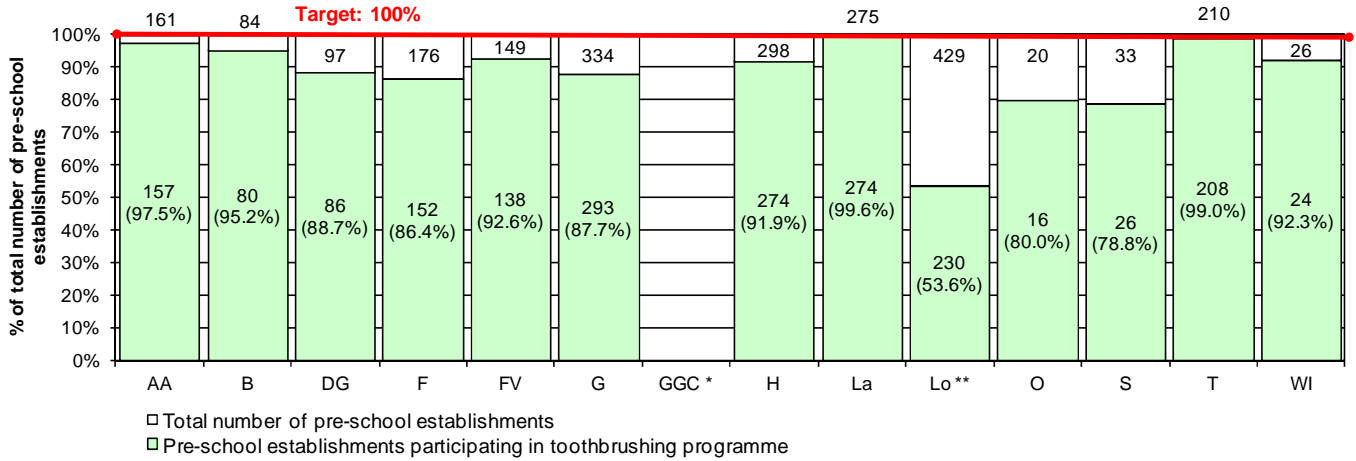


Figure 1: Pre-school establishments participating in Childsmile Core programme (as a % of total number of pre-school establishments) by NHS Board – Scotland, 2012/2013 academic year

NOTES:

- Here, pre-school establishments participating in the toothbrushing programme (Childsmile Core) are those pre-school establishments that had at least one **toothbrushing monitoring contact recorded on the HIC Childsmile system** within the period January to June 2013.
- The total lists of pre-school establishments as at July 2013 were provided by the Childsmile teams in NHS Boards.
- NHS GGC (*) did not use the Childsmile HIC system to record toothbrushing monitoring contacts with establishments.
- Data for NHS Lothian (**) are partial, as not all monitoring contacts with the establishments participating in the toothbrushing programme were entered onto the HIC Childsmile system. This also might be the case with some other NHS Boards (to a lesser extent).

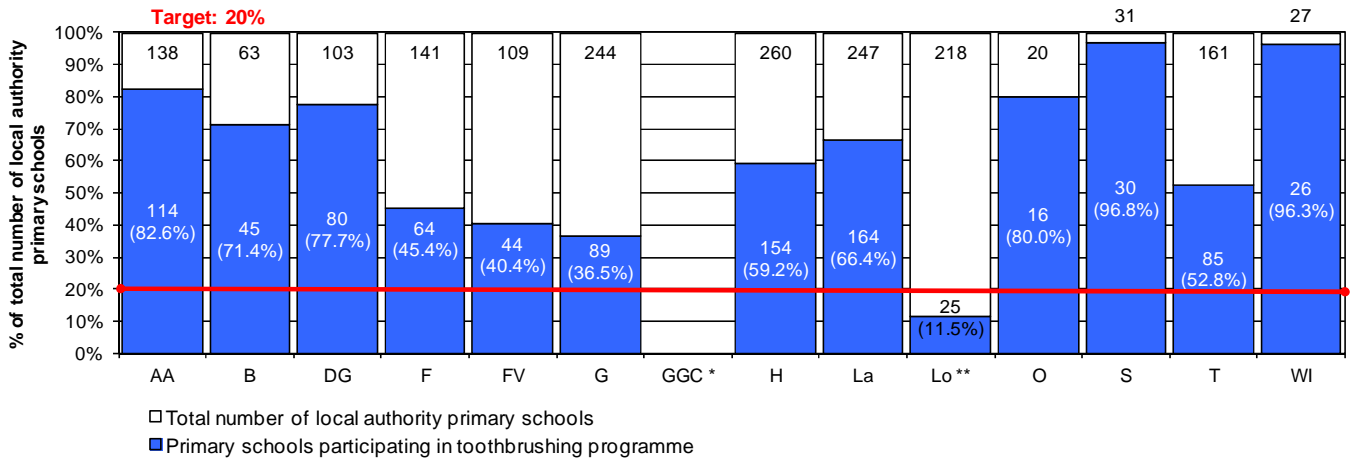


Figure 2: Primary schools participating in Childsmile Core programme (as a % of total number of local authority primary schools) by NHS Board – Scotland, 2011/2012 academic year

NOTES:

- Here, primary schools participating in the toothbrushing programme (Childsmile Core) are those schools that had at least one **toothbrushing monitoring contact recorded on the HIC Childsmile system** within the period July 2012 to June 2013.
- Total numbers of local authority primary schools as at September 2012 were supplied by the Scottish Government.
- The target** is to offer toothbrushing programme to **at least 20% of P1 and P2 classes of schools situated in areas with the highest level of need** of NHS Boards.
- NHS GGC (*) did not use the Childsmile HIC system to record toothbrushing monitoring contacts with establishments.
- Data for NHS Lothian (**) are partial, as not all monitoring contacts with the establishments participating in the toothbrushing programme were entered onto the HIC Childsmile system. This also might be the case with some other NHS Boards (to a lesser extent)

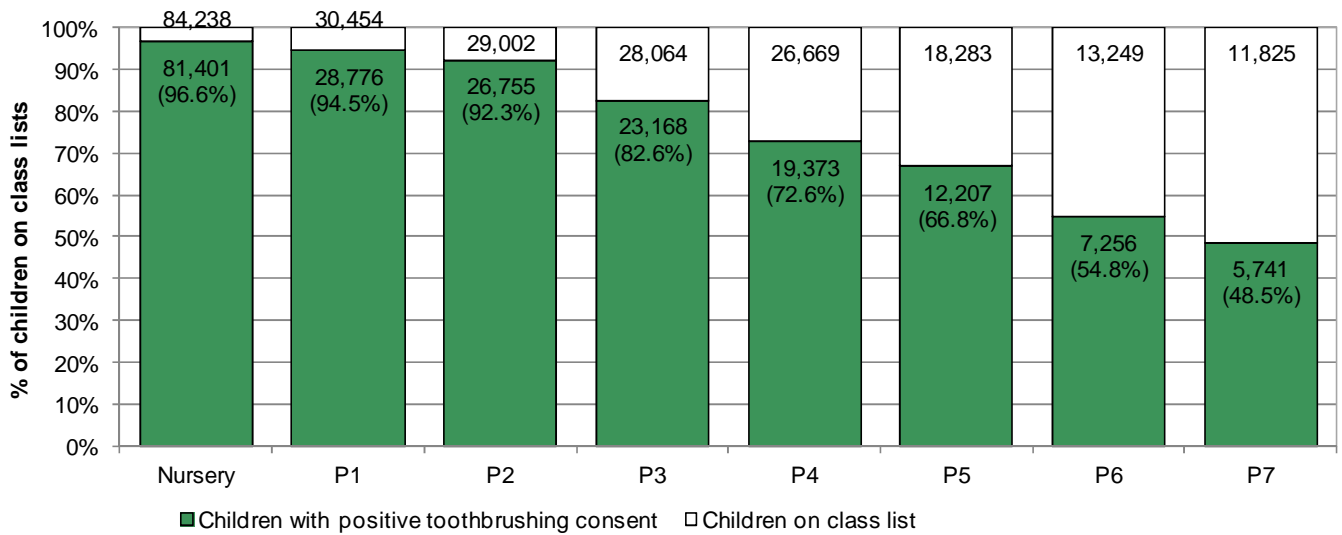


Figure 3: Children with positive toothbrushing consents at the end of 2012/2013 academic year, by year group – Scotland

P – primary school year group.

NOTE: Here, children with positive toothbrushing consent are all children who were consented to toothbrushing at any point in time prior to the end of the academic year 2012/2013, and who were recorded as consented on the HIC Childsmile 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 may appear to affect 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 nursery age, 3 years and upwards, in targeted nurseries. In this report, records of children who were under three years old at the end of February of each reporting year were removed from the dataset analysed for the Nursery & School section. This ensures that population rates of varnishing match with the nursery age children baseline.

Participating establishments

In the 2012/2013 academic year, 888 pre-school establishments and 716 primary schools were participating in the fluoride varnish programme.

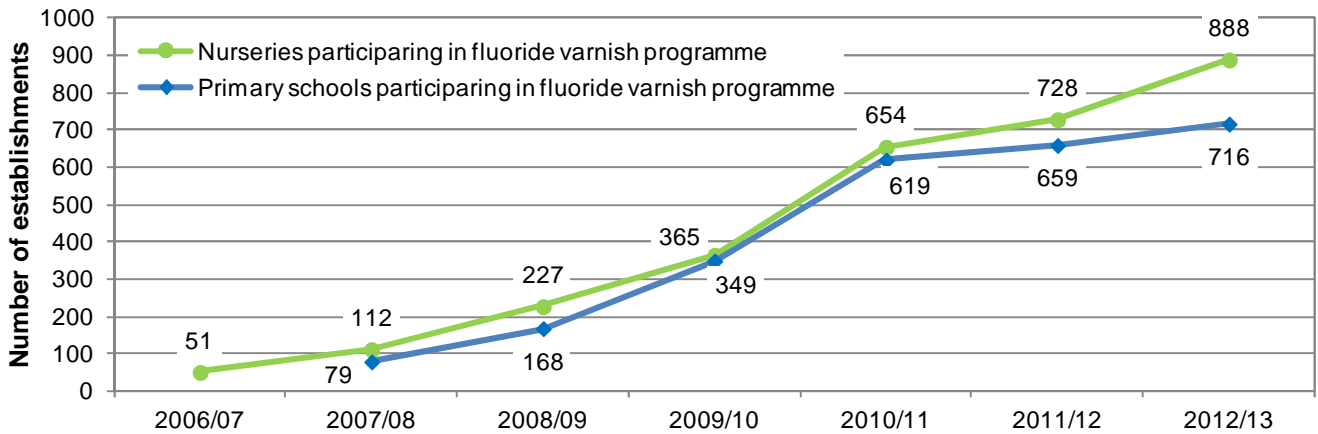


Figure 4: Nurseries and primary schools participating in fluoride varnish programme in Scotland, 2006/07-2012/13 academic year

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

Table 1: Numbers of pre-school establishments and primary schools participating in fluoride varnish programme, 2006/07-2012/13 academic year

NHS Board	Number of participating nurseries							Number of participating primary schools						
	06/07	07/08	08/09	09/10	10/11	11/12	12/13	06/07	07/08	08/09	09/10	10/11	11/12	12/13
AA	3	8	27	28	32	33	33	0	3	12	32	34	35	35
B	1	15	16	16	18	19	18	0	7	13	13	14	17	17
DG	0	0	0	0	10	10	10	0	0	0	0	10	10	10
F	29	35	35	34	37	41	38	0	32	33	34	43	39	39
FV	0	12	21	23	23	22	30	0	0	15	15	19	19	30
G	0	0	1	81	81	85	117	0	0	0	31	77	76	77
GGC	0	0	0	0	86	85	87	0	0	0	63	144	141	139
H	0	0	18	46	71	87	91	0	0	11	29	59	67	71
La	0	0	0	13	141	159	272	0	0	0	11	70	70	107
Lo	0	17	75	72	70	68	76	0	2	39	60	58	66	70
O	0	0	0	2	17	21	20	0	0	0	0	15	20	20
S	1	0	5	17	24	24	26	0	0	9	23	25	28	29
T	17	25	29	32	34	44	45	0	35	36	38	40	40	44
WI	0	0	0	1	10	30	25	0	0	0	0	11	31	28
Sco	51	112	227	365	654	728	888	0	79	168	349	619	659	716

Consent and fluoride varnish application rates

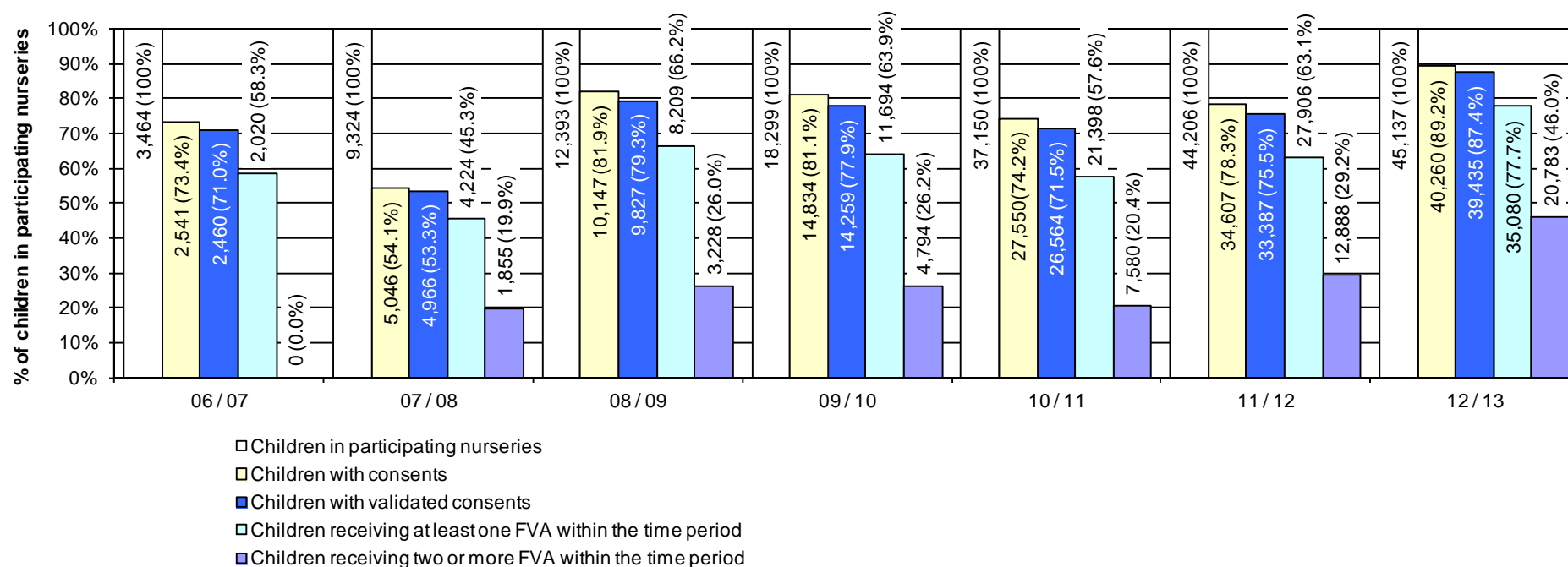


Figure 5: Nursery Consent and FVA rates (as a % of the total number of children in participating nurseries) – Scotland, 2006/07-2012/13 academic year

FVA – fluoride varnish application.

NOTES: Figure 5 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 in participating nurseries.

For example, for 2012/2013 academic year the number of children in participating nurseries equals 45,137 (100%), of those 40,260 (89.2%) children were consented for FVA, 39,435 (87.4%) had validated consents, 35,080 (77.7%) received at least one FVA and 20,783 (46.0%) children received two or more FVAs.

The total number of children in participating nurseries is derived from HIC Childsmile 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.

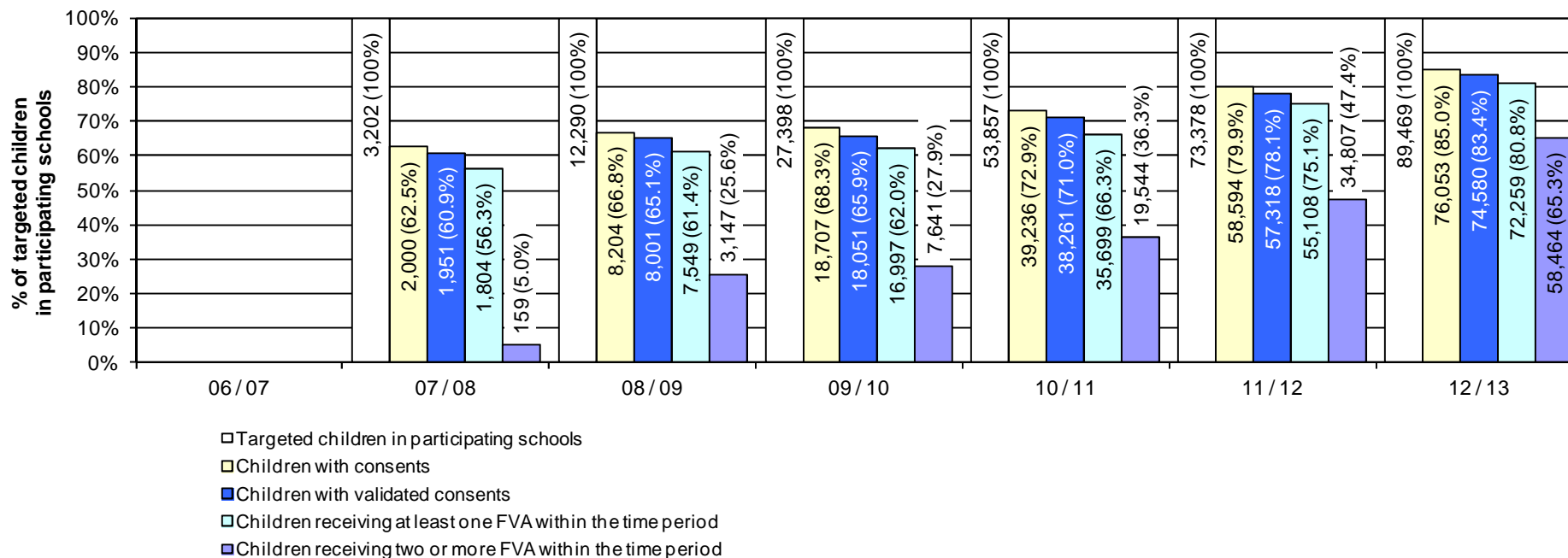


Figure 6: School Consent and FVA rates (as a % of the total number of targeted children in participating schools) – Scotland, 2007/08-2012/13 academic year

FVA – fluoride varnish application.

NOTES: Figure 6 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 P4 classes and children in P1, P2, P3 and P4 will be included.

For example, for 2012/2013 academic year the number of targeted children in participating primary schools equals 89,469 (100%), of those 76,053 (85.0%) children were consented for FVA, 74,580 (83.4%) had validated consents, 72,259 (80.8%) received at least one FVA and 58,464 (65.3%) children received two or more FVAs.

Childsmile School programme started in 2007/2008 academic year. The number of targeted children in participating schools is derived from HIC Childsmile 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.

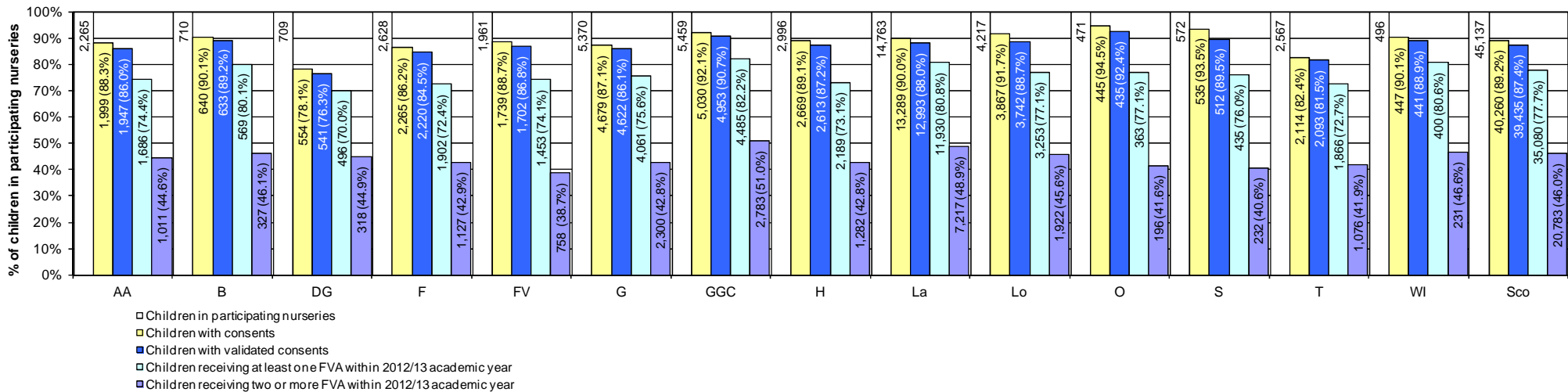


Figure 7: Consent and FVA rates – Childsmile Nursery (as a % of the number of children in participating nurseries) - by NHS Board, 2012/2013 academic year

FVA – fluoride varnish application.

Please see note for Figure 5.

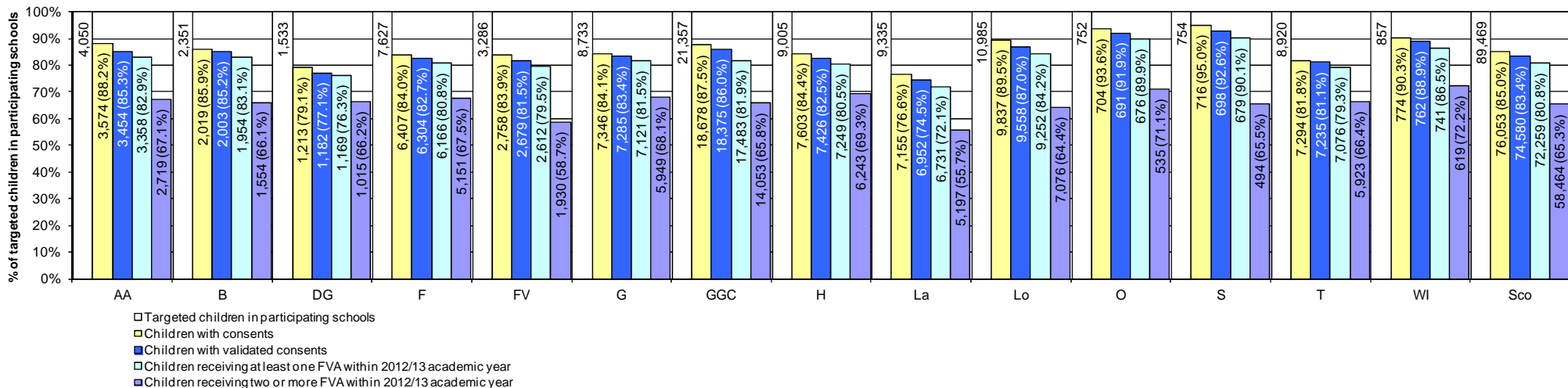


Figure 8: Consent and FVA rates – Childsmile School (as a % of the total number of targeted children in participating schools) - by NHS Board, 2012/2013 academic year

FVA – fluoride varnish application.

Please see note for Figure 6.

Table 2: P1-P4 and P1-P2 targeting, consent and FVA rates – Childsmile School, by NHS Board, 2012/2013 academic year

NHS board	P1-P4 aged population in NHS board (baseline)	Number of targeted P1-P4 children in participating schools		Number of P1-P4 children with consents		P1-P4 children with validated consents		Number of P1-P4 children receiving at least one FVA			Number of 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
AA	15,351	4,026	26.2%	3,558	88.4%	3,438	85.4%	3,343	83.0%	94.0%	2,707	67.2%	76.1%
B	4,879	1,620	33.2%	1,434	88.5%	1,420	87.7%	1,396	86.2%	97.4%	1,087	67.1%	75.8%
DG	5,902	1,491	25.3%	1,213	81.4%	1,182	79.3%	1,169	78.4%	96.4%	1,015	68.1%	83.7%
F	15,800	4,967	31.4%	4,337	87.3%	4,266	85.9%	4,168	83.9%	96.1%	3,492	70.3%	80.5%
FV	13,124	3,242	24.7%	2,758	85.1%	2,679	82.6%	2,612	80.6%	94.7%	1,930	59.5%	70.0%
G	23,107	7,901	34.2%	6,762	85.6%	6,712	85.0%	6,557	83.0%	97.0%	5,477	69.3%	81.0%
GGC	47,357	21,106	44.6%	18,674	88.5%	18,371	87.0%	17,482	82.8%	93.6%	14,048	66.6%	75.2%
H	12,570	5,875	46.7%	5,212	88.7%	5,098	86.8%	4,986	84.9%	95.7%	4,391	74.7%	84.2%
La	29,186	9,071	31.1%	7,097	78.2%	6,897	76.0%	6,680	73.6%	94.1%	5,169	57.0%	72.8%
Lo	34,218	8,439	24.7%	7,798	92.4%	7,566	89.7%	7,329	86.8%	94.0%	5,646	66.9%	72.4%
T	16,486	6,142	37.3%	5,212	84.9%	5,163	84.1%	5,045	82.1%	96.8%	4,244	69.1%	81.4%
Total	217,980	73,880	33.9%	64,055	86.7%	62,792	85.0%	60,767	82.3%	94.9%	49,206	66.6%	76.8%
NHS board	P1-P2 aged population in NHS board (baseline)	Number of targeted P1-P2 children in participating schools		Number of P1-P2 children with consents		P1-P2 children with validated consents		Number of P1-P2 children receiving at least one FVA			Number of 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
O	461*	461	approx 100%	435	94.4%	428	92.8%	423	91.8%	97.2%	335	72.7%	77.0%
S	523	518	99.0%	491	94.8%	474	91.5%	461	89.0%	93.9%	335	64.7%	68.2%
WI	564*	564	approx 100%	523	92.7%	511	90.6%	497	88.1%	95.0%	424	75.2%	81.1%
Total	1,548	1,543	99.7%	1,449	93.9%	1,413	91.6%	1,381	89.5%	95.3%	1,094	70.9%	75.5%

- NOTES:
- 1) Table 2 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 2012/2013 in this report are based on **Small Area Population Estimates at 30 June 2011, which were provided by the NRS** for each data zone by single year of age. These population estimates are based on the 2001 Census and were the most recent estimations available at the time of production of this report.
 - 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) For NHS Orkney and NHS Western Isles (*), the P1-P2 population estimations based on NRS numbers were lower than the number of targeted children (from the HIC Childsmile system), thus the population was approximated to the number of targeted children.

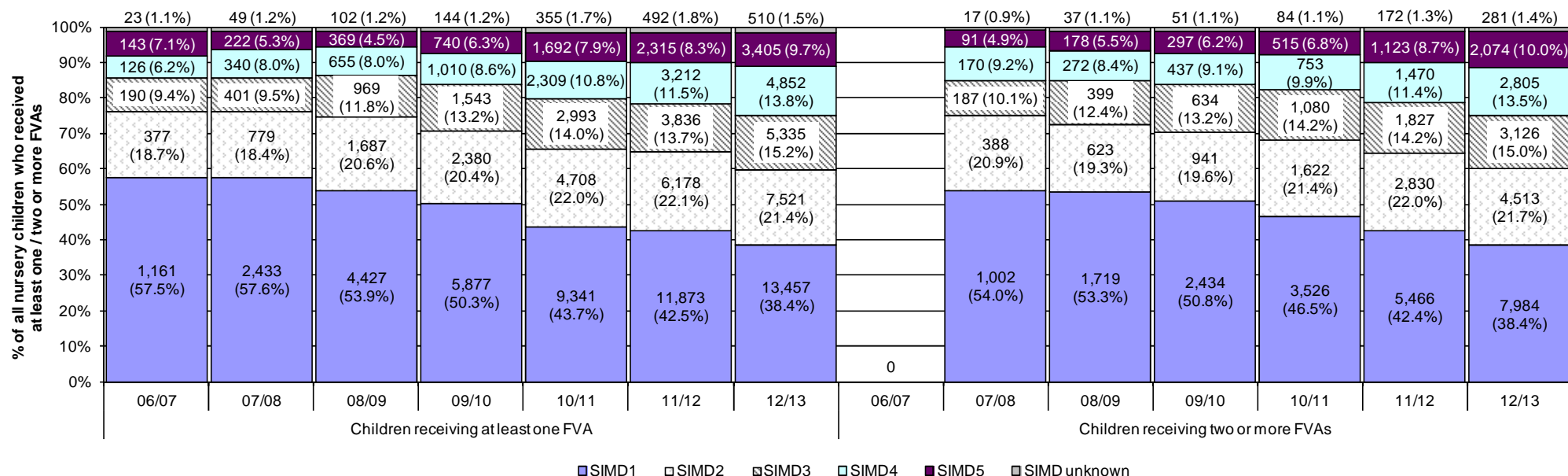


Figure 9: Nursery children receiving at least one and two or more FVAs by SIMD quintile - Scotland, 2006/07-2012/13 academic year

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

NOTES:

- Figure 9 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 2012/2013 academic year, 7,984 children who received two or more FVAs belonged to SIMD1 quintile (38.4% of the total number of children who received two or more FVAs), 4,513 (21.7%) children belonged to SIMD2, 3,126 (15.0%) to SIMD3, 2,805 (13.5%) to SIMD4, 2,074 (10.0%) to SIMD5 quintile, and there were 281 (1.4%) children with unknown SIMD (due to insufficient postcode information). All six categories combined add up to 100%.
- SIMD 2012 was used for the 2012/13 data, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

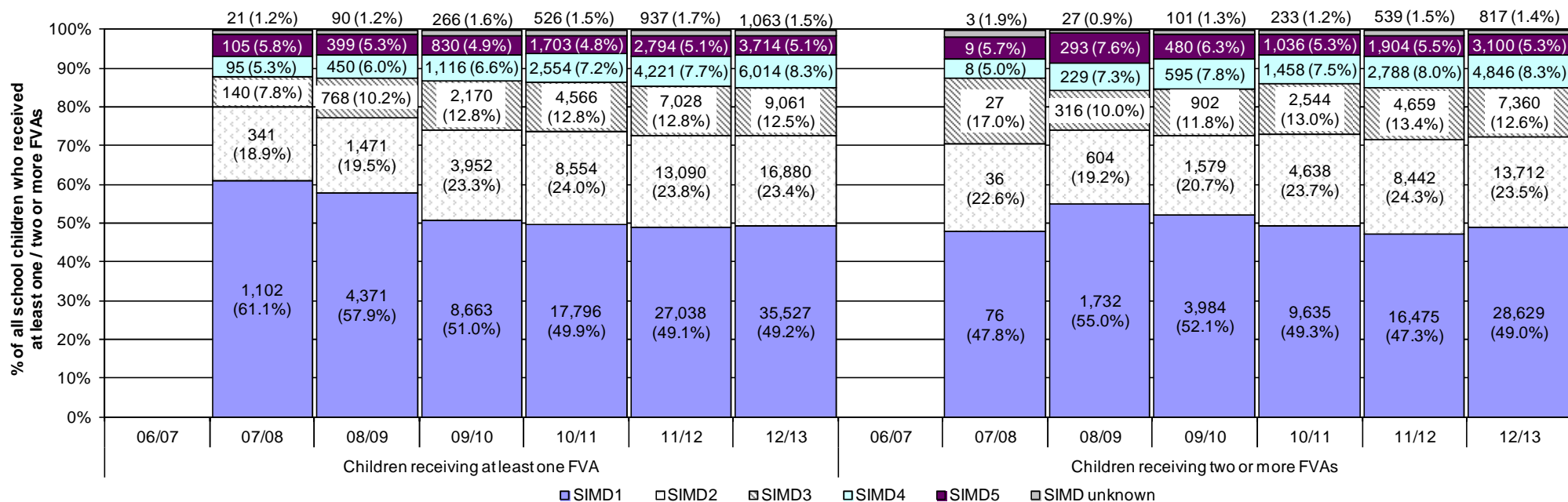


Figure 10: Primary school children receiving at least one and two or more FVAs by SIMD quintile - Scotland, 2006/07-2012/13 academic year

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 9.
- 2) SIMD 2012 was used for the 2012/13 data, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

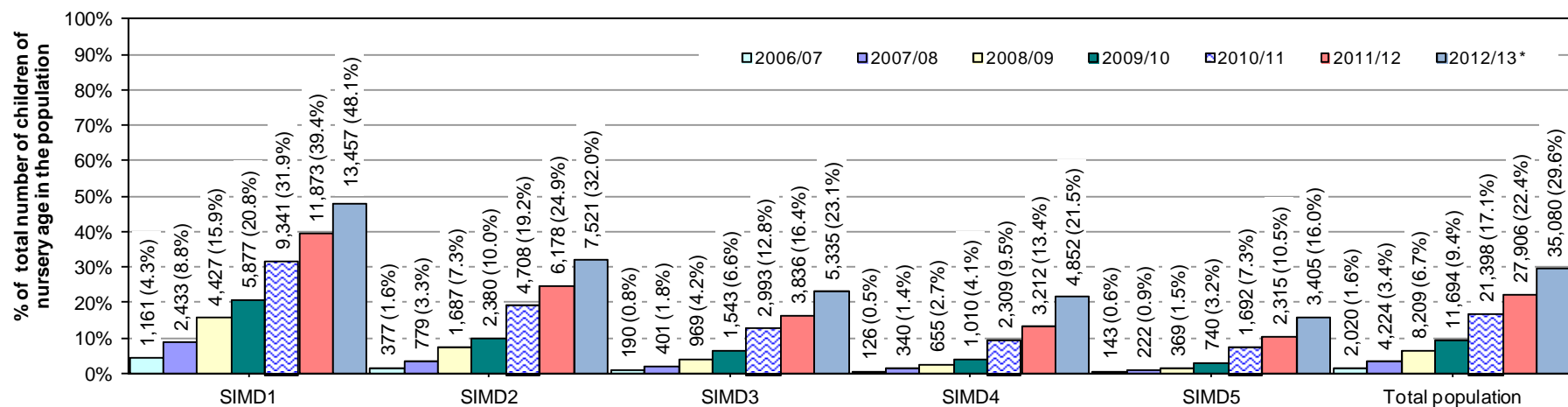


Figure 11: Proportion of population of nursery age children in each SIMD quintile who received at least one FVA – Scotland, 2006/07-2012/13 academic year

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

NOTES:

- 1) Figure 11 presents the proportion of nursery age children in each SIMD quintile who received *at least one* FVA in the period 2006/07-2012/13 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 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 and were the most recent estimations available at the time of production of this report.
 - The population baselines for previous years (2006/2007 – 2011/2012) were calculated using CHI records of children. Children were assigned to a year group using their date of birth.
- 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 2012 was used for the 2012/13 data (*), whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

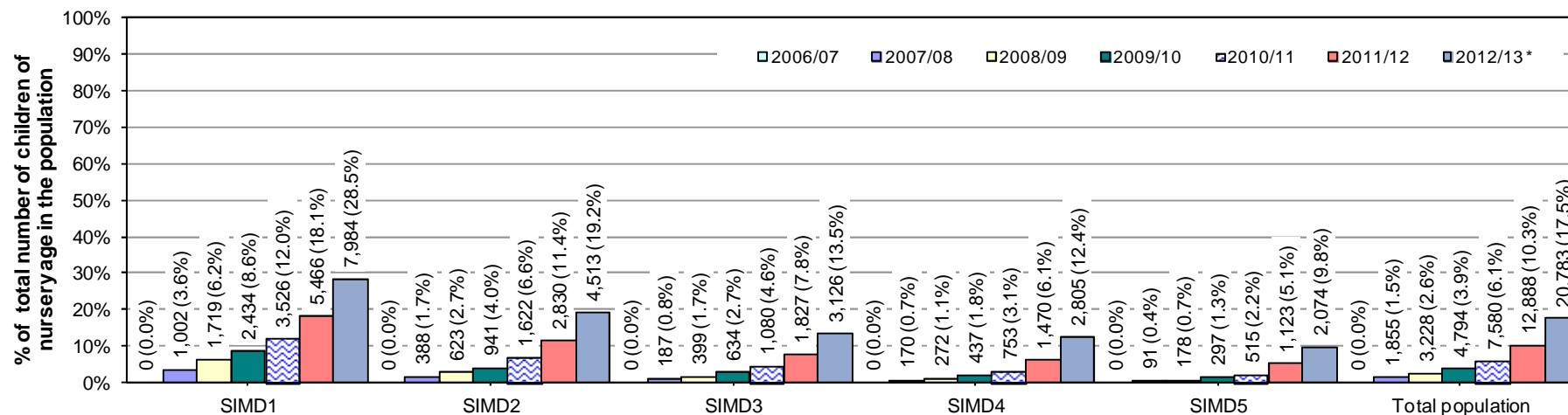


Figure 12: Proportion of population of nursery age children in each SIMD quintile who received two or more FVAs – Scotland, 2006/07-2012/13 academic year

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

NOTES:

- 1) Figure 12 presents the proportion of nursery age children in each SIMD quintile who received *two or more* FVAs in the period 2006/07-2012/13 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 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 and were the most recent estimations available at the time of production of this report.
 - The population baselines for previous years (2006/2007 – 2011/2012) were calculated using CHI records of children. Children were assigned to a year group using their date of birth.
- 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 2012 was used for the 2012/13 data (*), whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

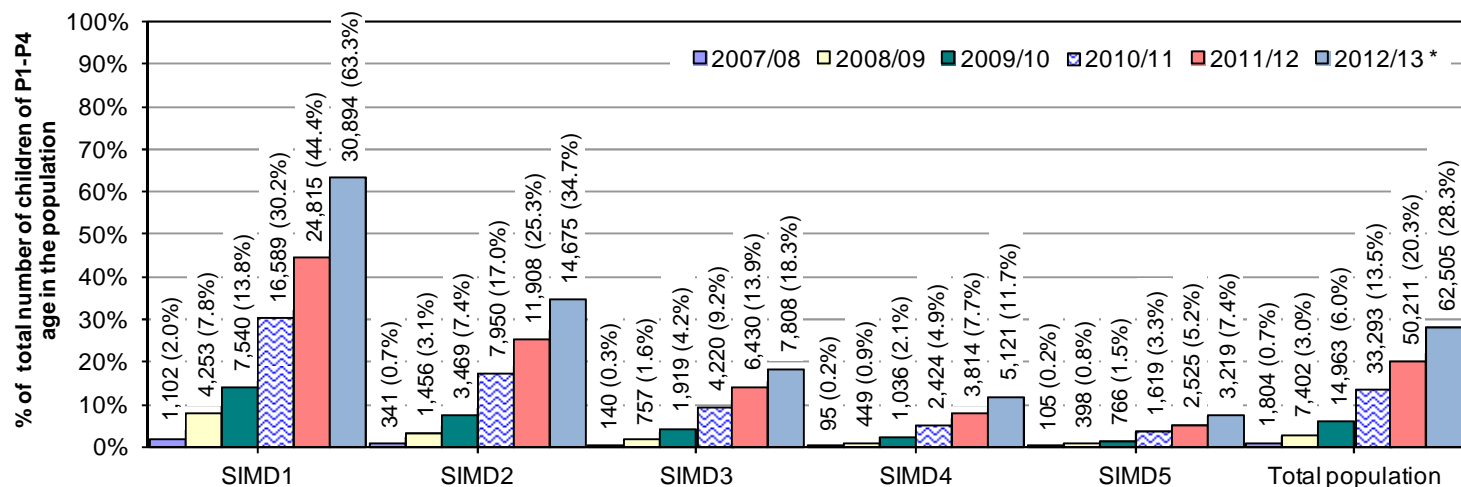


Figure 13: Proportion of population of P1-P4 age children in each SIMD quintile who received at least one FVA – Scotland, 2006/07-2012/13 academic year

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

NOTES:

- 1) Figure 13 presents the proportion of P1-P4 age children in each SIMD quintile who received *at least one* FVA in the period 2006/07-2012/13 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 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 and were the most recent estimations available at the time of production of this report.
 - The population baselines for previous years (2006/2007 – 2011/2012) were calculated using CHI records of children. Children were assigned to a year group using their date of birth.
- 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 2012 was used for the 2012/13 data (*), whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

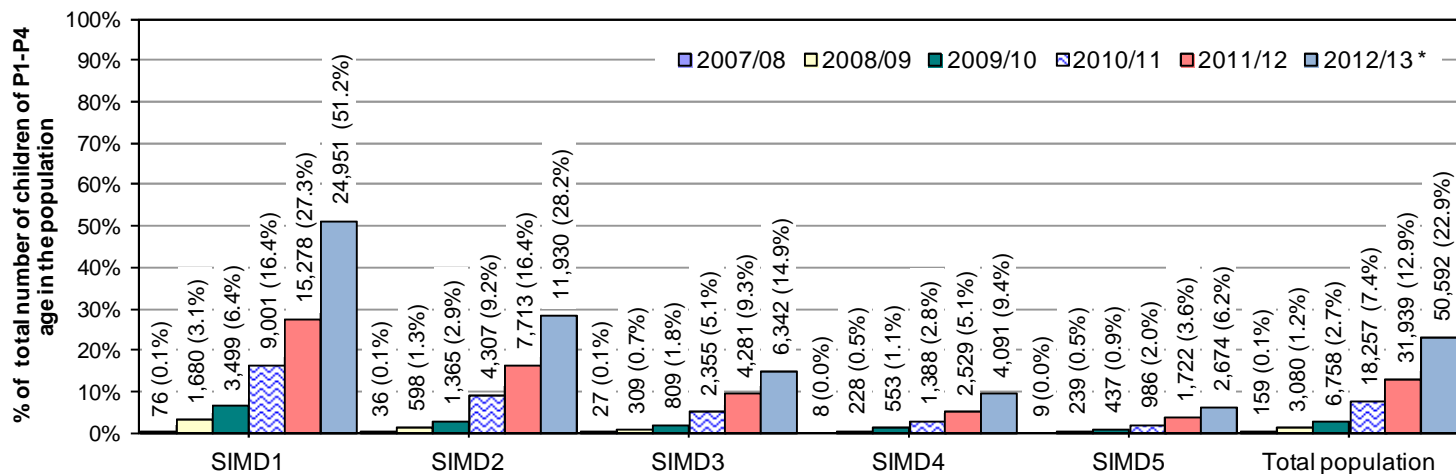


Figure 14: Proportion of population of P1-P4 age children in each SIMD quintile who received two or more FVAs – Scotland, 2006/07-2012/13 academic year

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

NOTES:

- 1) Figure 14 presents the proportion of P1-P4 age children in each SIMD quintile who received *two or more* FVAs in the period 2006/07-2012/13 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 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 and were the most recent estimations available at the time of production of this report.
 - The population baselines for previous years (2006/2007 – 2011/2012) were calculated using CHI records of children. Children were assigned to a year group using their date of birth.
- 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 2012 was used for the 2012/13 data (*), whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).

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 / Public Health Nurse).

This is CERT's first attempt to present Childsmile referrals at the 6-8 week review recorded on the CHSP-PS system.

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

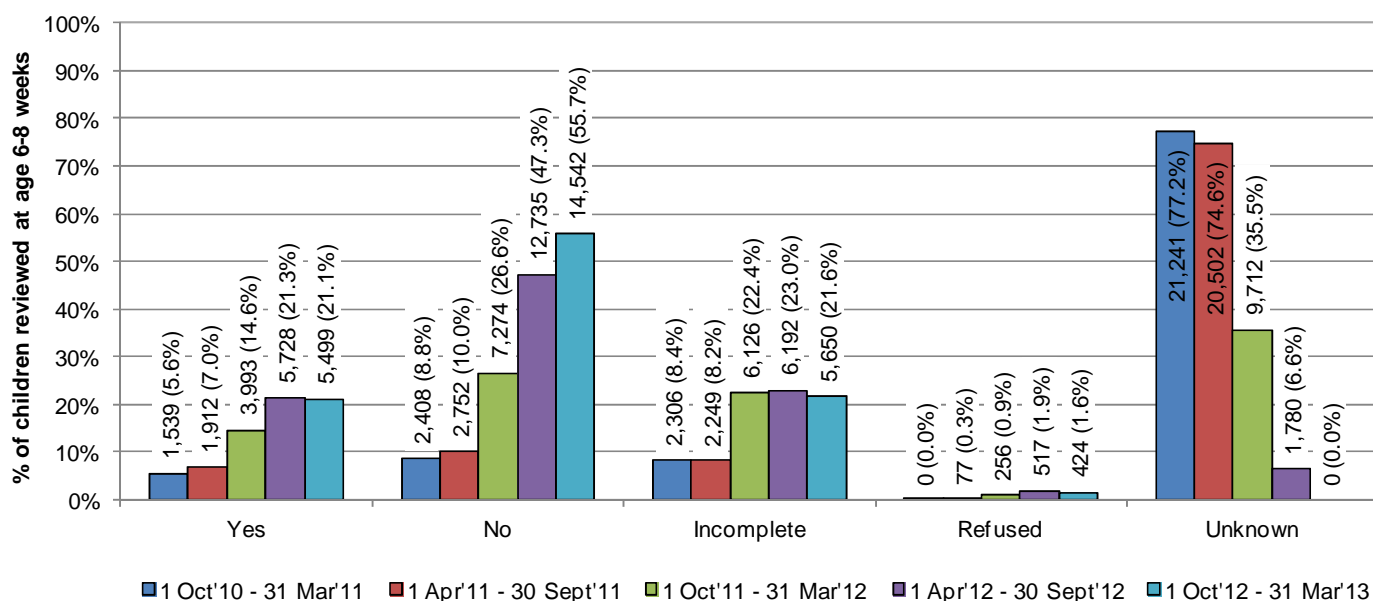


Figure 15: Childsmile referral at 6-8 week review by half of financial year – Scotland, 2010/11-2012/13 financial year

HV – Health Visitor; CHSP-PS – Child Health Surveillance Programme Pre-School system

NOTES:

- 1) The data in Figure 15 are presented by half of a financial year to show the improvement in data quality / usage of the system over time (e.g. see the drop in the 'Unknown' category from 77.2% to 0.0%).
- 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/public health nurse 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/public health nurse 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) All five categories combined ('Yes', 'No', 'Incomplete', 'Refused', 'Unknown') add up to 100%.
- 4) The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS May 2013 download). Data for the 6-month period ending 31 March 2013 are provisional.

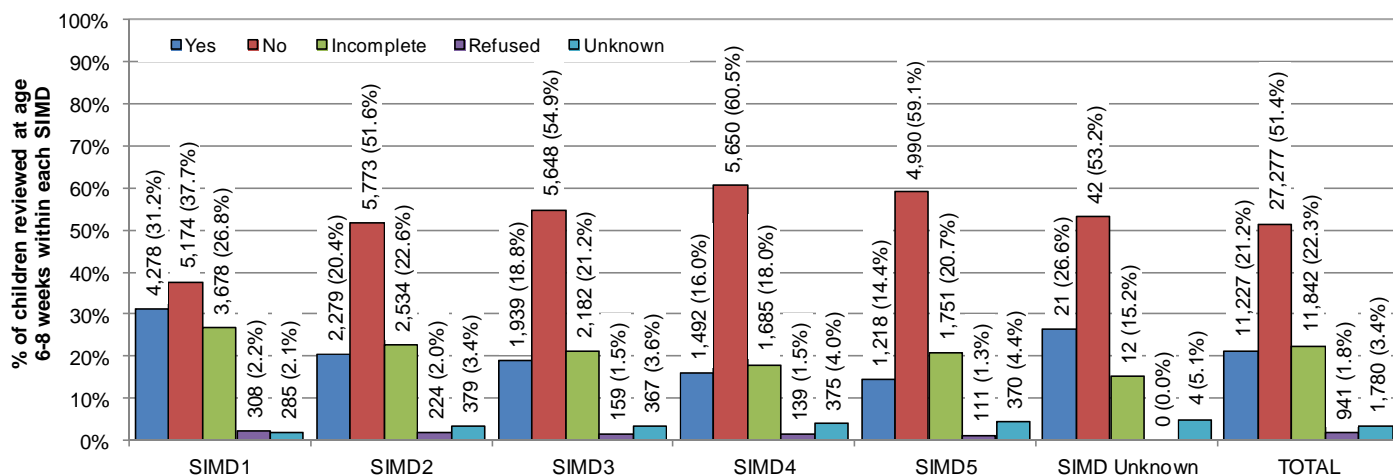


Figure 16: Childsmile referral at 6-8 week review by SIMD of child – Scotland, 2012/2013 financial year

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

NOTES:

- Figure 16 presents the outcomes for the Childsmile referral field on the 6-8 week review form by **SIMD 2012 (national)** of the child's home postcode for the 2012/2013 financial year.
- 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/public health nurse 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/public health nurse 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.
- All five categories combined add up to 100%.
- The Childsmile referral at 6-8 week review data were provided by ISD (CHSP-PS May 2013 download). Data for the 6-month period ending 31 March 2013 are provisional.

Table 3: Childsmile referral at 6-8 week review by NHS Board, 2012/2013 financial year

NHS Board	Number of 6-8 week reviews N	Childsmile Referral									
		Yes		No		Incomplete		Refused		Unknown	
		n	% of N	n	% of N	n	% of N	n	% of N	n	% of N
AA	3,492	980	28.1%	2,289	65.5%	106	3.0%	117	3.4%	0	0.0%
B	997	154	15.4%	834	83.7%	*	*	*	*	*	*
DG	1,340	126	9.4%	1,079	80.5%	122	9.1%	13	1.0%	0	0.0%
F	3,809	284	7.5%	3,126	82.1%	371	9.7%	28	0.7%	0	0.0%
FV	2,908	170	5.8%	1,516	52.1%	235	8.1%	28	1.0%	959	33.0%
G	5,835	326	5.6%	4,127	70.7%	469	8.0%	105	1.8%	808	13.8%
GGC	12,751	4,524	35.5%	1,421	11.1%	6,373	50.0%	429	3.4%	*	*
H	2,503	544	21.7%	1,602	64.0%	287	11.5%	69	2.8%	*	*
La	5,315	2,181	41.0%	483	9.1%	2,640	49.7%	11	0.2%	0	0.0%
Lo	9,537	1,736	18.2%	6,556	68.7%	1,130	11.8%	115	1.2%	0	0.0%
O	122	*	*	≥ 117	≥ 95.9%	0	0.0%	0	0.0%	0	0.0%
T	3,969	163	4.1%	3,715	93.6%	68	1.7%	20	0.5%	*	*
WI	225	7	3.1%	218	96.9%	0	0.0%	0	0.0%	0	0.0%
Sco	53,067	11,227	21.2%	27,277	51.4%	11,842	22.3%	941	1.8%	1,780	3.4%

NOTE: * denotes numbers in the range between 1 and 5 (inclusive).

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 academic year.

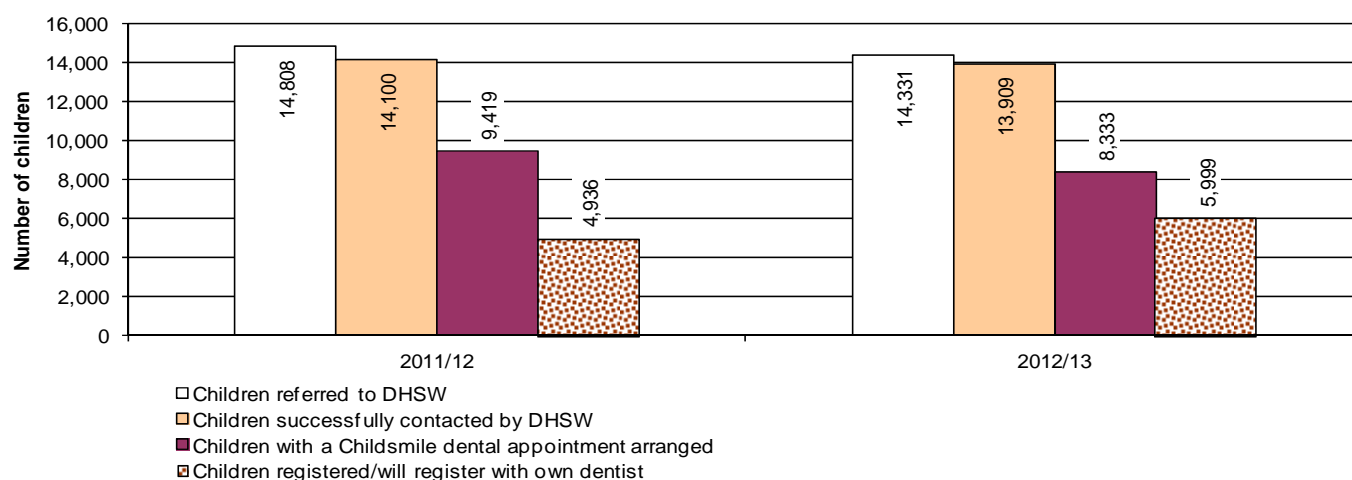


Figure 17: DHSW: Child referrals, contacts, practice appointments made and children registered/will register with own dentist – Scotland, 2011/12-2012/13 academic year

DHSW – Dental Health Support Worker.

NOTES: Figure 17 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 academic year for 2011/12-2012/13 academic years. For the previous years' data see the September 2012 report (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 4: DHSW: Child referrals, contacts, practice appointments made and children registered with own dentist - by NHS Board, 2012/2013 academic 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	973	973	597	380
B	216	240	176	66
DG	156	159	110	57
F	308	307	247	155
FV	182	180	129	54
G	250	233	107	122
GGC	6,775	6,429	3,254	3,221
H	1,147	1,318	1,014	334
La	3,846	3,568	2,415	1,342
Lo	1	2	1	1
O	0	0	0	0
S	36	44	5	40
T	145	159	84	119
WI	0	0	0	0
Unknown NHS Board	296	297	194	108
Scotland	14,331	13,909	8,333	5,999

DHSW – Dental Health Support Worker. Please see note for Figure 17.

The three graphs below (Figs 18-20) depicting various child-level data related to DHSW Practice activity have been added into this report. This data has not previously been reported.

In total, according to the HIC Childsmile system data, in the 2012/2013 academic year 710 children were referred to Childsmile via Clinic, 12,430 from a Health Visitor, 1,127 via 'Other' source, and for 64 children the type of referral was not specified.

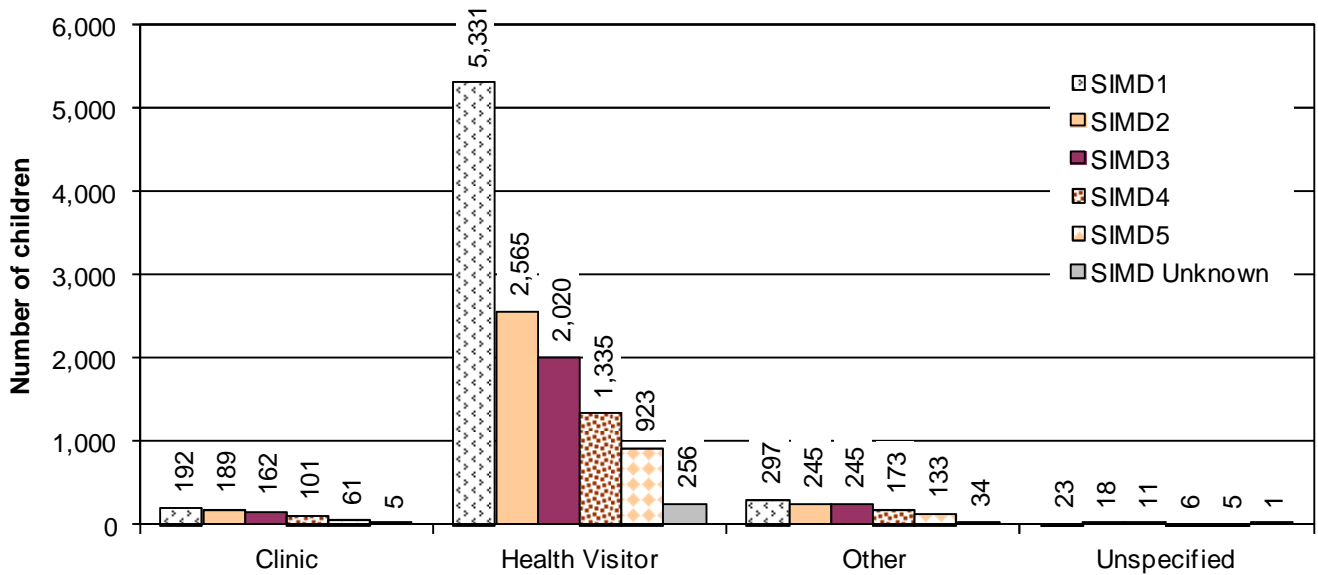


Figure 18: Number of children referred to DHSW by SIMD of child – Scotland, 2012/2013 academic year

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

NOTES: Figure 18 presents the number of children referred to a DHSW (by Health Visitor, via Clinic or 'Other' route) by SIMD of child's home postcode.

SIMD 2012 (national) was used.

In total in the 2012/2013 academic year there were 13,553 children with at least one kept DHSW appointment, 369 families who refused Childsmile, 547 families that could not be contacted and for 2,303 families the end result was an 'FTA / Not at home'.

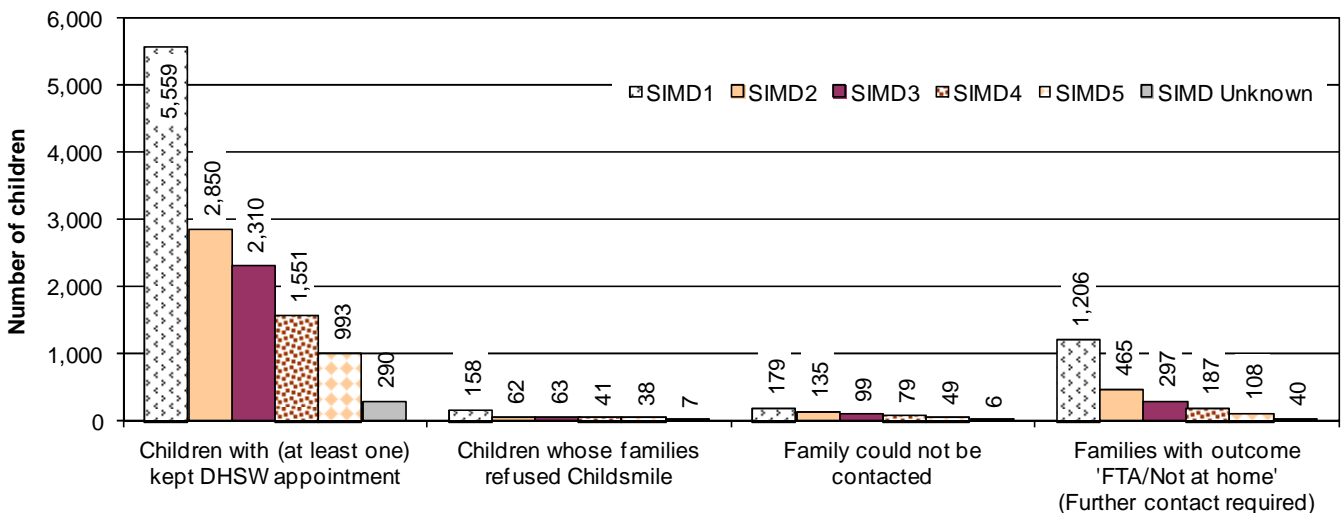


Figure 19: Children successfully contacted and not contacted by DHSW, and families who refused Childsmile, by SIMD of child – Scotland, 2012/2013 academic year

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

NOTES: Figure 19 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.

SIMD 2012 (national) was used.

Within the 2012/2013 academic year 12,639 children had one kept DHSW appointment, 734 children had two kept appointments and 180 children had three or more kept DHSW appointments.

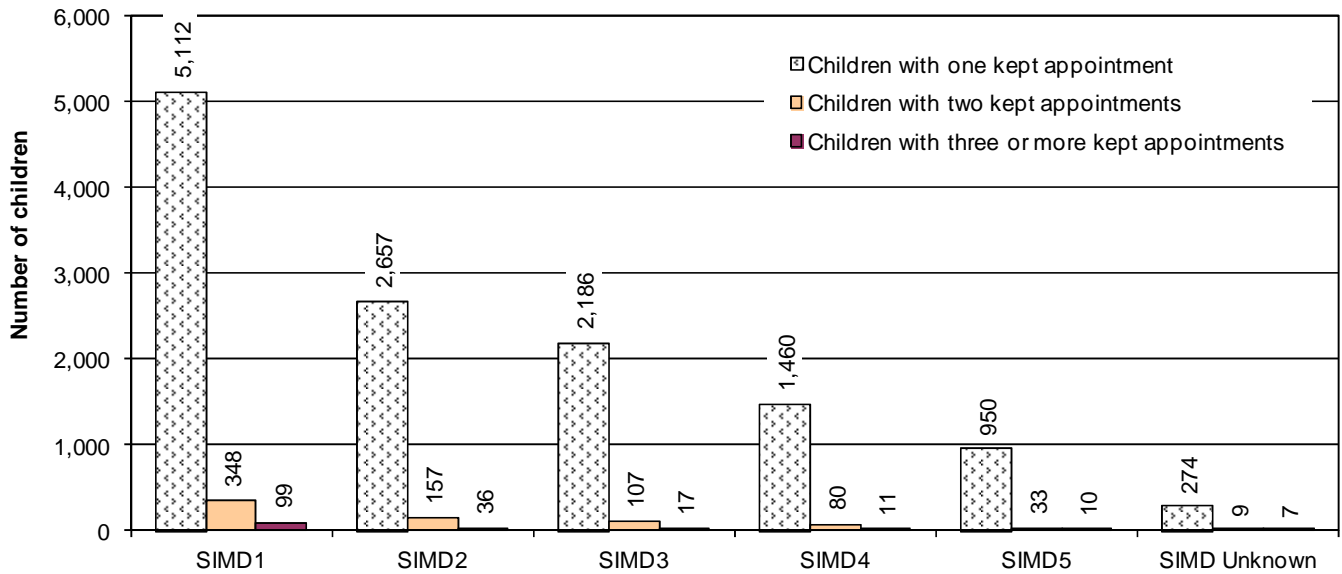


Figure 20: Children with different numbers of kept DHSW appointments by SIMD of child – Scotland, 2012/2013 academic year

SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 20 presents the number of children with one, two or three or more kept DHSW appointments within the 2012/2013 academic year by SIMD of child’s home postcode.
- 2) SIMD 2012 (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 of this report have been 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 only directly comparable with the data published in the September 2012 in Childsmile National Headline Data report, but not 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.

Community Dental Services (CDS) data submitted to the Practitioner Services Division (PSD) is currently unavailable for inclusion into this report. Only CDS data submitted to CERT and salaried General Dental Services (GDS) data submitted to PSD is included.

In total, 799 non-salaried GDS practices were delivering Childsmile interventions during 2012/2013 financial year in Scotland, which is an increase in comparison with 704 non-salaried GDS practices that were delivering Childsmile interventions in 2011/2012.

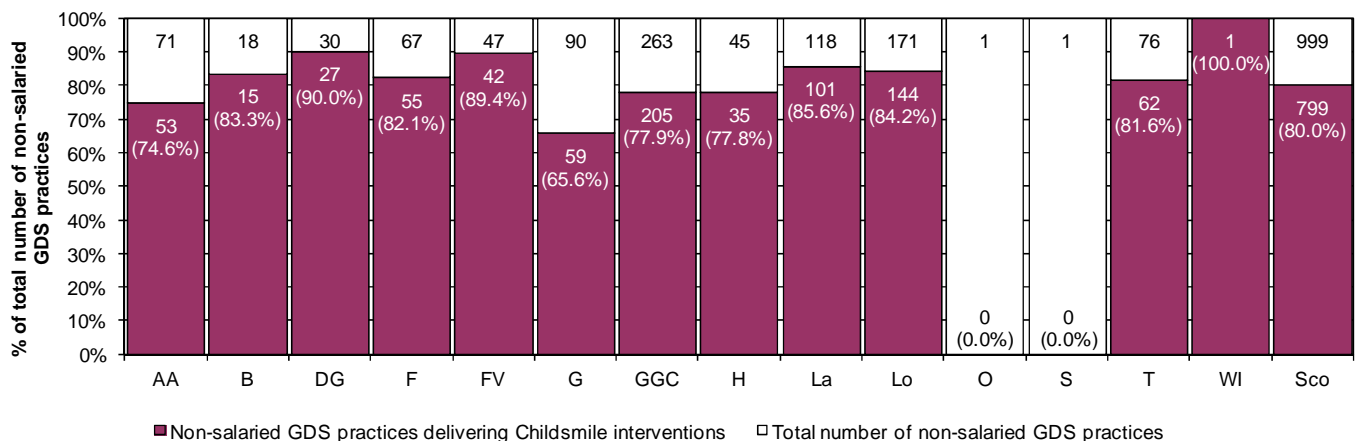


Figure 21: Non-salaried GDS practices delivering Childsmile interventions – Scotland, by NHS Board, 2012/2013 financial year

Non-salaried GDS – non-salaried General Dental Services, ISD – Information Services Division.

NOTES:

- 1) Figure 21 presents the number of non-salaried GDS practices delivering Childsmile interventions in each NHS Board, as a percentage of total number of non-salaried GDS practices (total numbers as at 31 March 2013, calculated from the total list of dental practices supplied by ISD). Numbers on top of the columns represent total numbers of non-salaried GDS practices, and numbers/percentages inside the columns represent numbers/percentages of non-salaried 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 non-salaried GDS practices include practices with only orthodontists.
- 4) Practices were re-allocated to an NHS Board according to its Community Health Partnership (CHP) area, e.g. practices that were originally assigned to North Lanarkshire CHP but at the same time to NHS Greater Glasgow & Clyde area were re-assigned to NHS Lanarkshire.

127 salaried GDS / CDS practices were delivering Childsmile interventions during 2012/2013 financial year in Scotland (up from 93 salaried GDS / CDS practices that were delivering Childsmile interventions in 2011/2012).

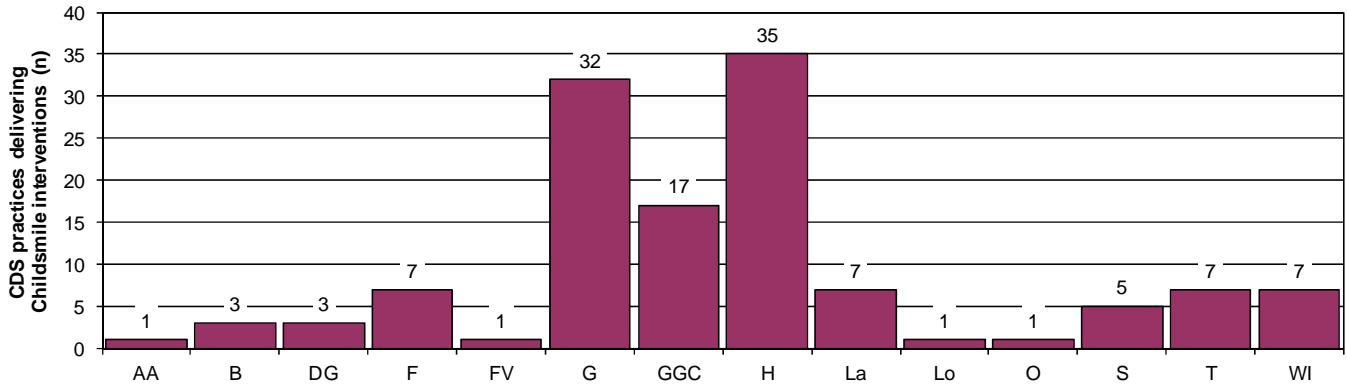


Figure 22: Salaried GDS/CDS practices delivering Childsmile interventions – Scotland, by NHS Board, 2012/2013 financial year

Salaried GDS – salaried General Dental Services, CDS – Community Dental Services.

NOTES:

- 1) Figure 22 presents the number of salaried GDS / CDS practices delivering Childsmile interventions in each NHS Board. The combined numbers of salaried GDS / CDS practices delivering Childsmile are not shown as a percentage of total number of Salaried GDS/CDS practices, as at present ISD does not have access to robust CDS data.
- 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) The information required to calculate the number of salaried GDS / CDS practices delivering Childsmile interventions in each NHS Board was provided by Childsmile teams. Childsmile activity was assigned to individual clinics/locations using list numbers where available.

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 by 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.

In this report 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 (2012/2013 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 only directly comparable with the data published in the September 2012 report, but not with the data presented in earlier reports.

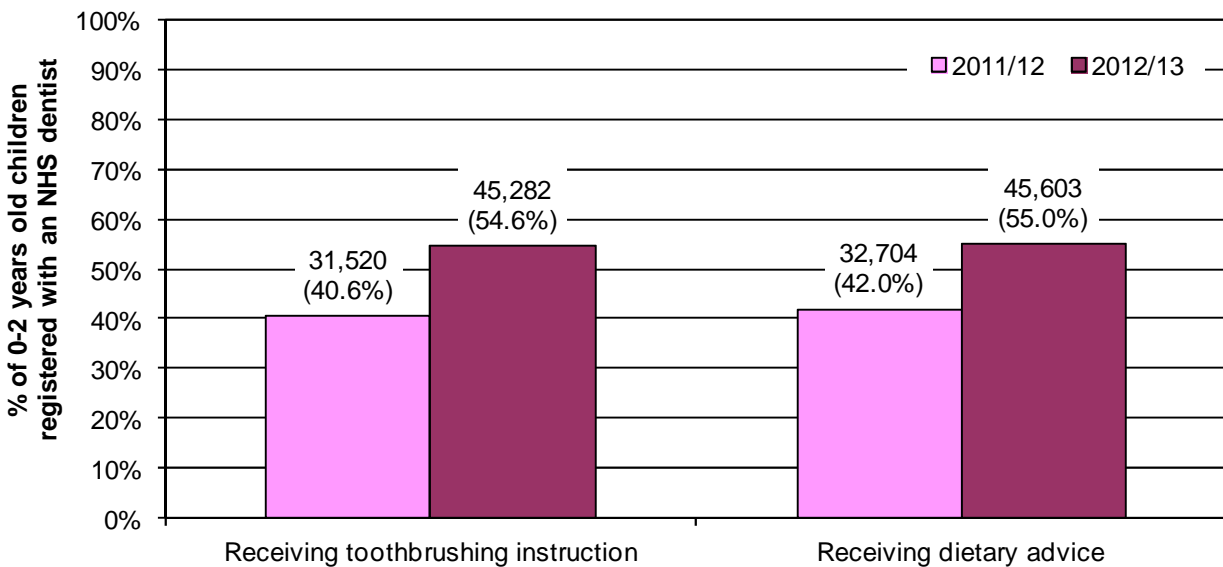


Figure 23: Proportion of 0-2 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, 2011/2012 - 2012/2013 financial years

NOTES: Numbers of children registered with an NHS dentist, as at March 2013, were provided by ISD

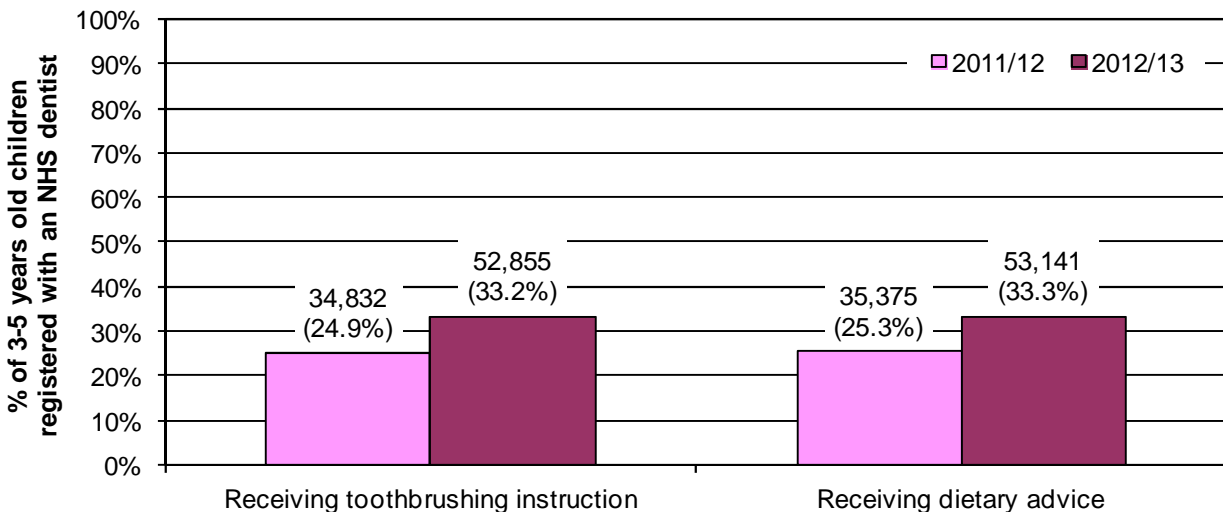


Figure 24: Proportion of 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction and dietary advice – Scotland, 2011/2012 - 2012/2013 financial years.

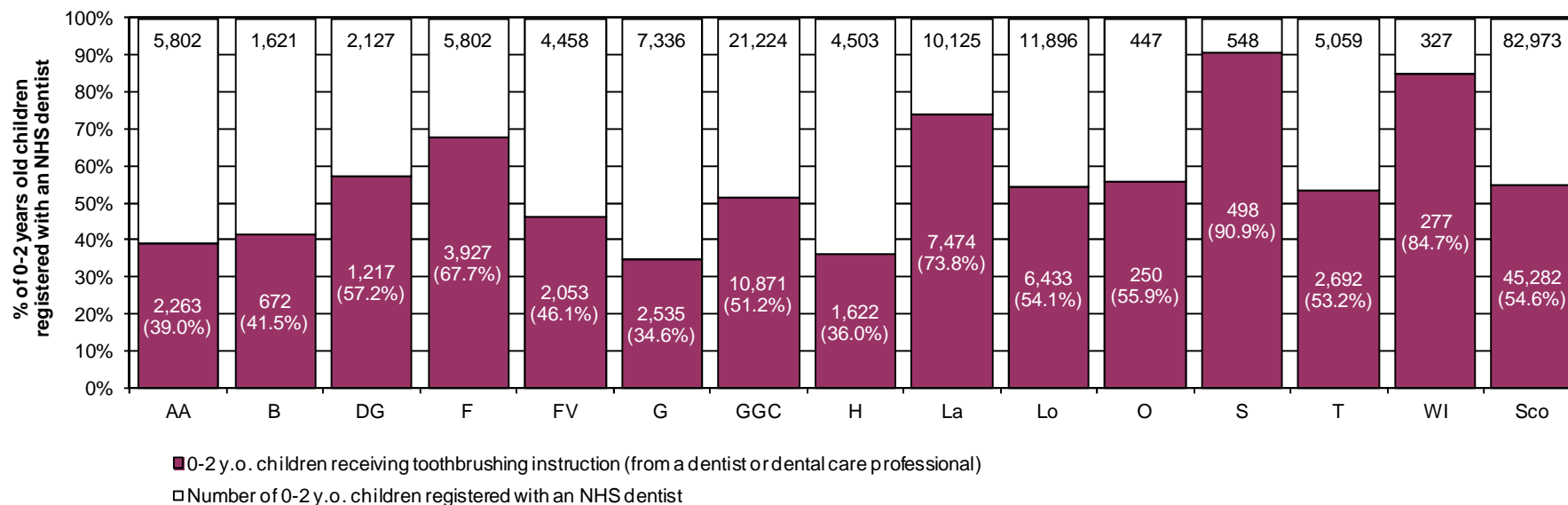


Figure 25: Proportion of 0-2 year old children registered with an NHS dentist receiving toothbrushing instruction – Scotland, by NHS Board, 2012/2013 financial year

NOTES:
 Numbers of children registered with an NHS dentist, as at March 2013, were provided by ISD.
 Numbers at the top of each column represent the total number of 0-2 year old children registered with an NHS dentist. Percentages inside the columns represent the percentages of children receiving toothbrushing instruction (at least once).

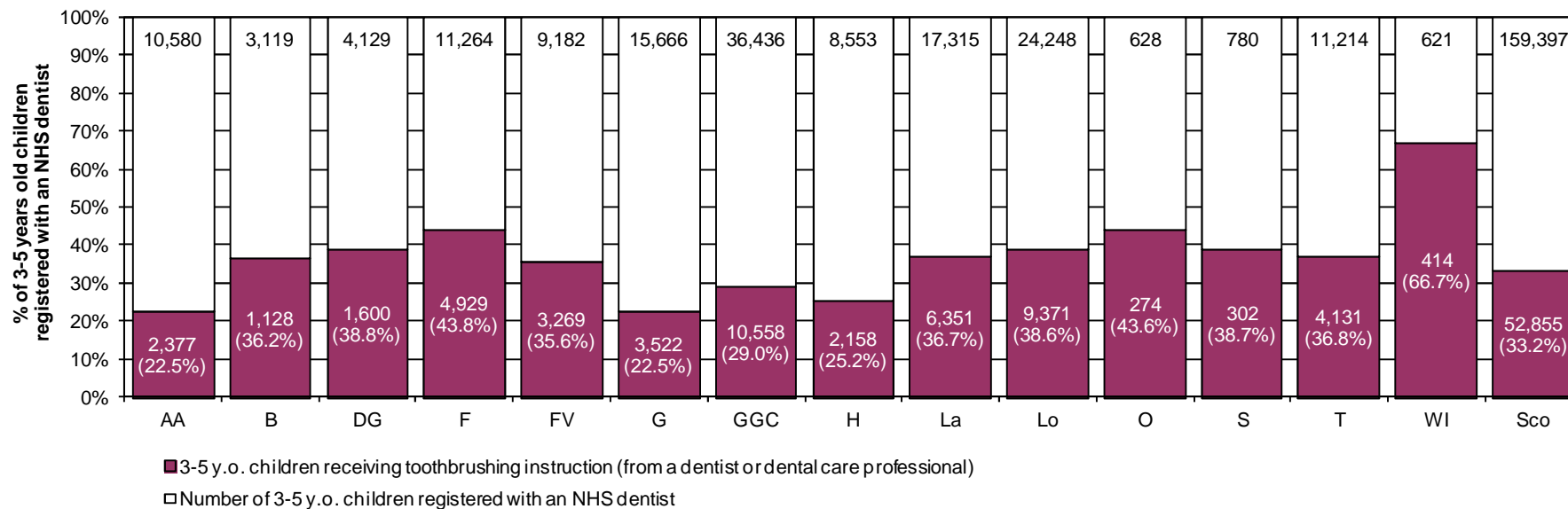


Figure 26: Proportion of 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction – Scotland, by NHS Board, 2012/2013 financial year

NOTES:
 Numbers of children registered with an NHS dentist, as at March 2013, were provided by ISD.
 Numbers at the top of each column represent the total number of 3-5 year old children registered with an NHS dentist. Percentages inside the columns represent the percentages of children receiving toothbrushing instruction (at least once).

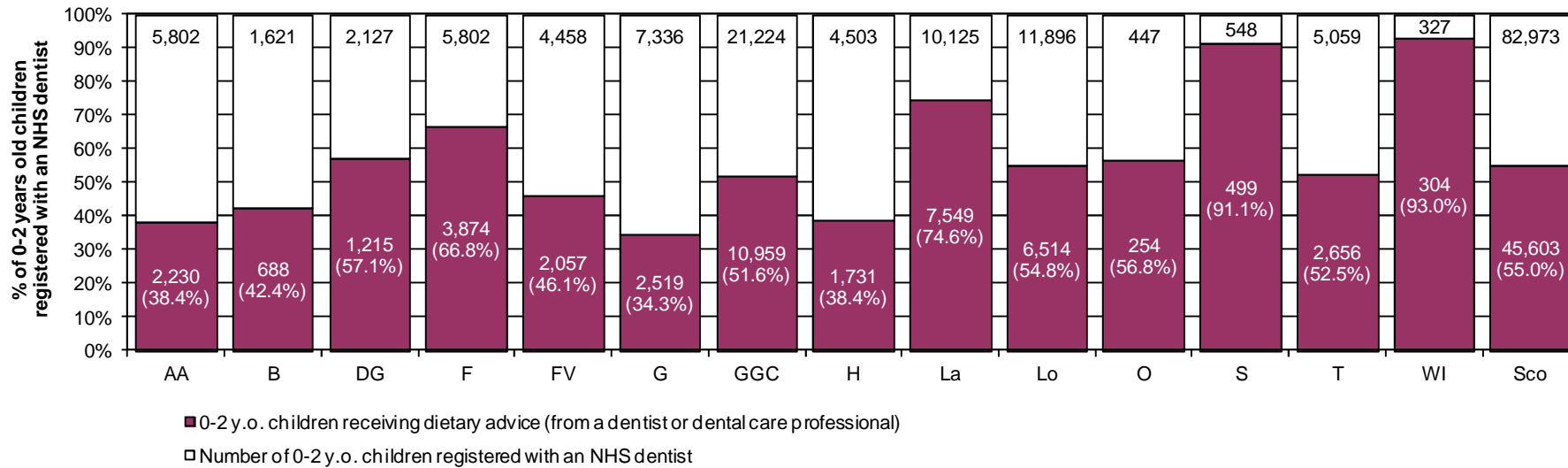


Figure 27: Proportion of 0-2 year old children registered with an NHS dentist receiving dietary advice – Scotland, by NHS Board, 2012/2013 financial year

NOTE: Numbers of children registered with an NHS dentist, as at March 2013, were provided by ISD.

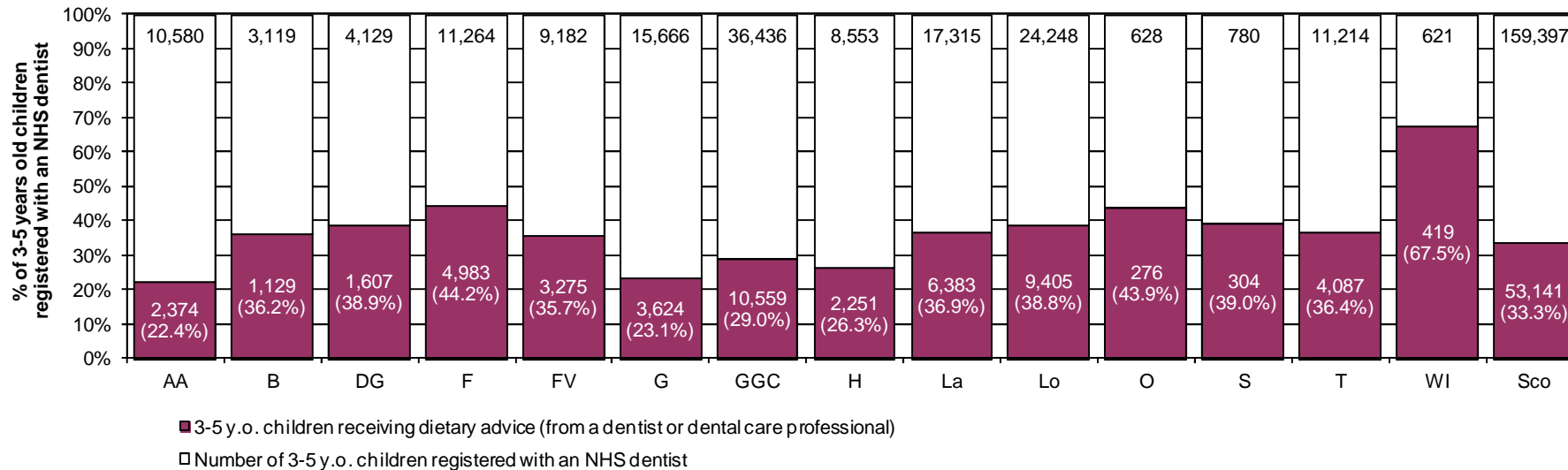


Figure 28: Proportion of 3-5 year old children registered with an NHS dentist receiving dietary advice – Scotland, by NHS Board, 2012/2013 financial year

NOTE: Numbers of children registered with an NHS dentist, as at March 2013, were provided by ISD.

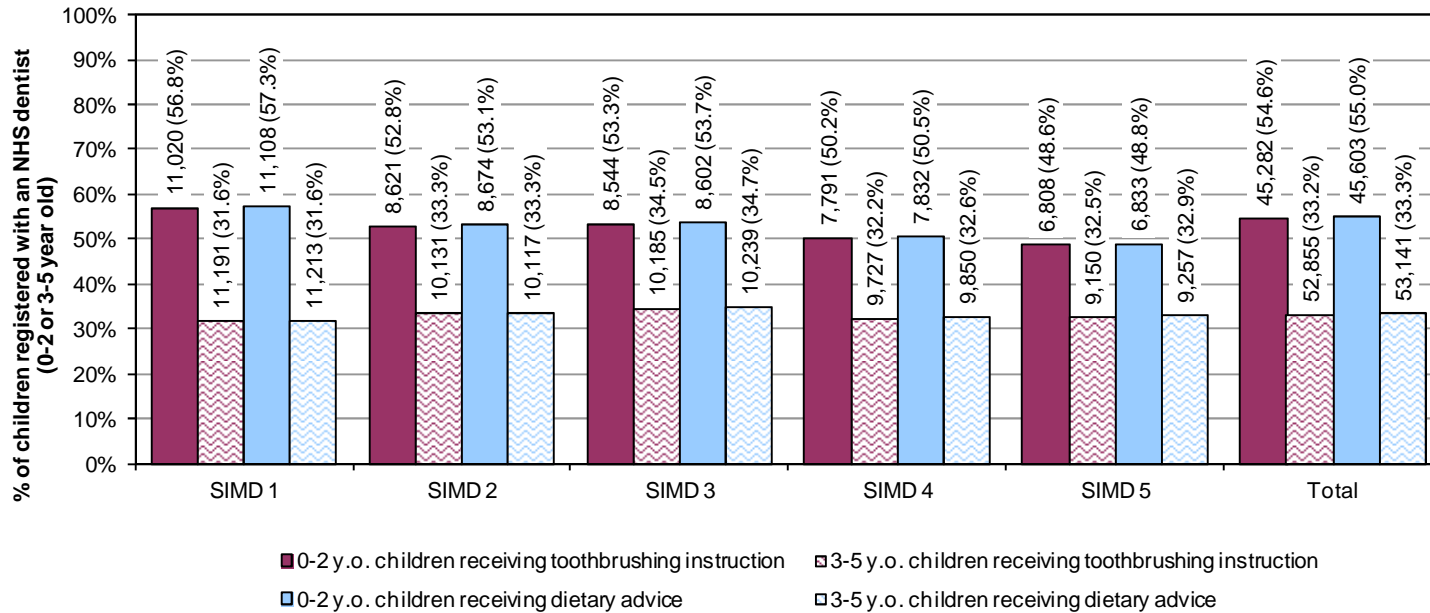


Figure 29: Proportion of 0-2 and 3-5 year old children registered with an NHS dentist receiving toothbrushing instruction / dietary advice – Scotland, by SIMD, 2012/2013 financial year

SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 29 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 2013 were as follows (data supplied by ISD):
 - 0-2 year olds: SIMD 1 – 19,400 children; SIMD 2 – 16,341; SIMD 3 – 16,017; SIMD 4 – 15,516; SIMD 5 – 14,001; in total – 82,973 (including SIMD Unknown).
 - 3-5 year olds: SIMD 1 – 35,442 children; SIMD 2 – 30,381; SIMD 3 – 29,536; SIMD 4 – 30,224 and SIMD 5 – 28,152 children; in total – 159,397 (including SIMD Unknown).

3) SIMD 2012 (national) was used.

For example, in the 2012/2013 financial year 56.8% of 0-2 year old children residing in SIMD 1 and registered with an NHS dentist received toothbrushing instruction at least once (11,020 children), and 57.3% of such children received dietary advice at least once (11,108 children).

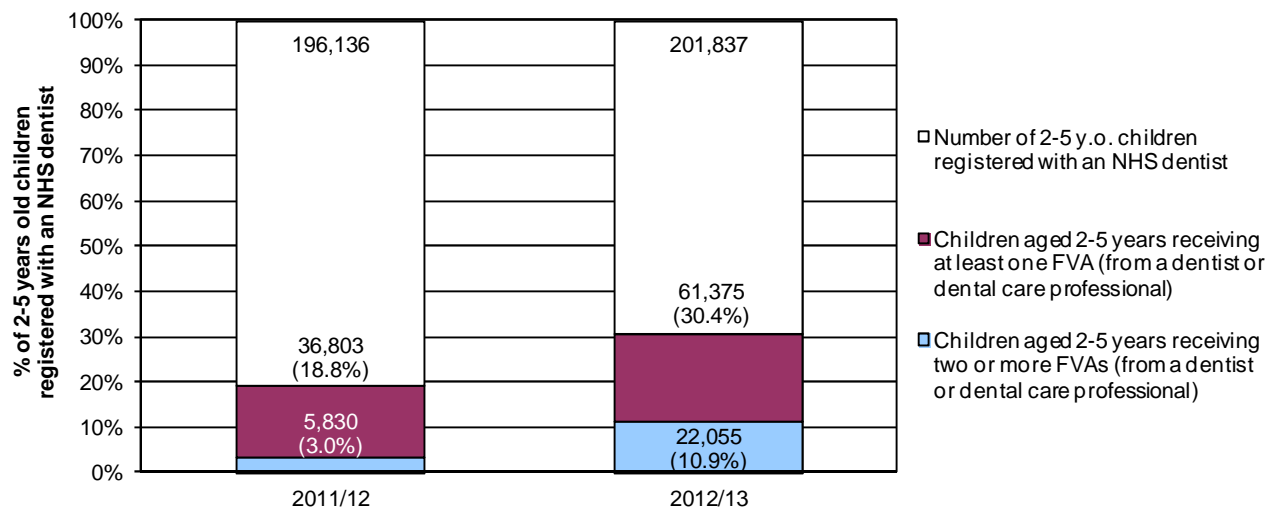


Figure 30: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one FVA or two or more FVAs – Scotland, 2011/12 - 2012/13 financial years

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 2012/2013 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 2012/13 financial year 30.4% (61,375) of children registered with an NHS dentist received at least one FVA, and 10.9% (22,055) children received an FVA within 2012/13 and had also received another FVA in the 12 months prior to that application

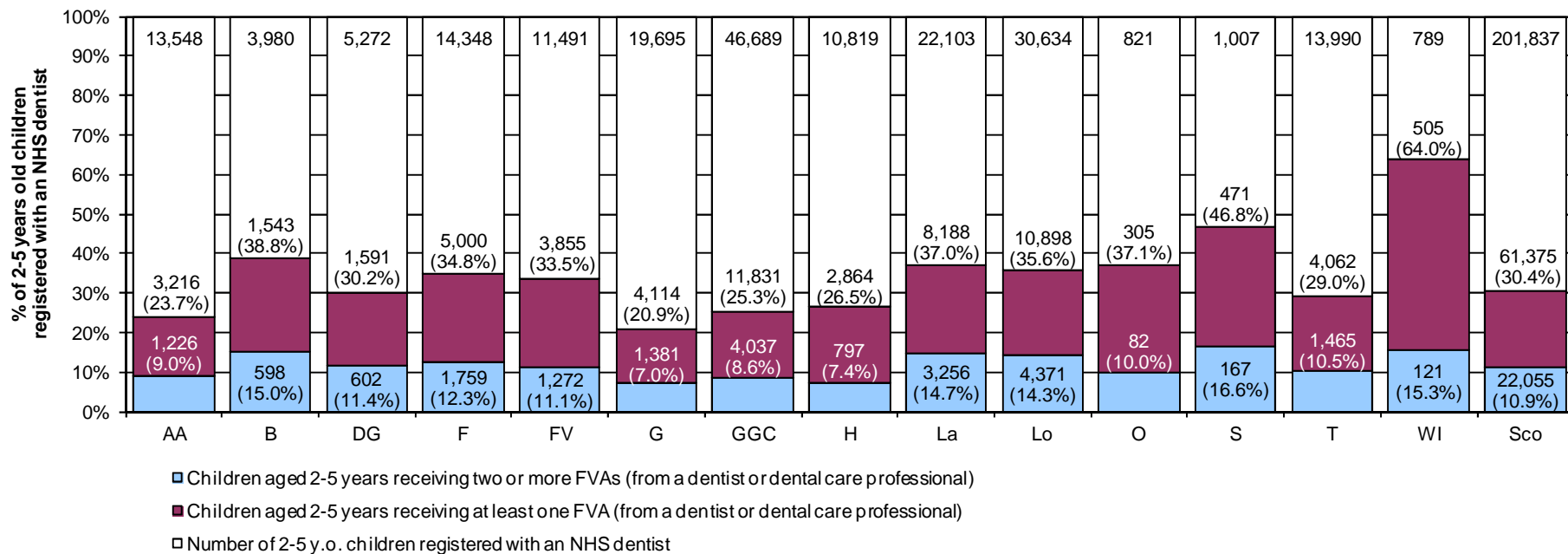


Figure 31: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one FVA or two or more FVAs – Scotland, by NHS Board, 2012/2013 financial year

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 2012/2013 financial year, and numbers/percentages of such children who received an FVA in 2012/2013 and who had also received another FVA in the 12 months prior to that application (labelled “two or more FVAs”).

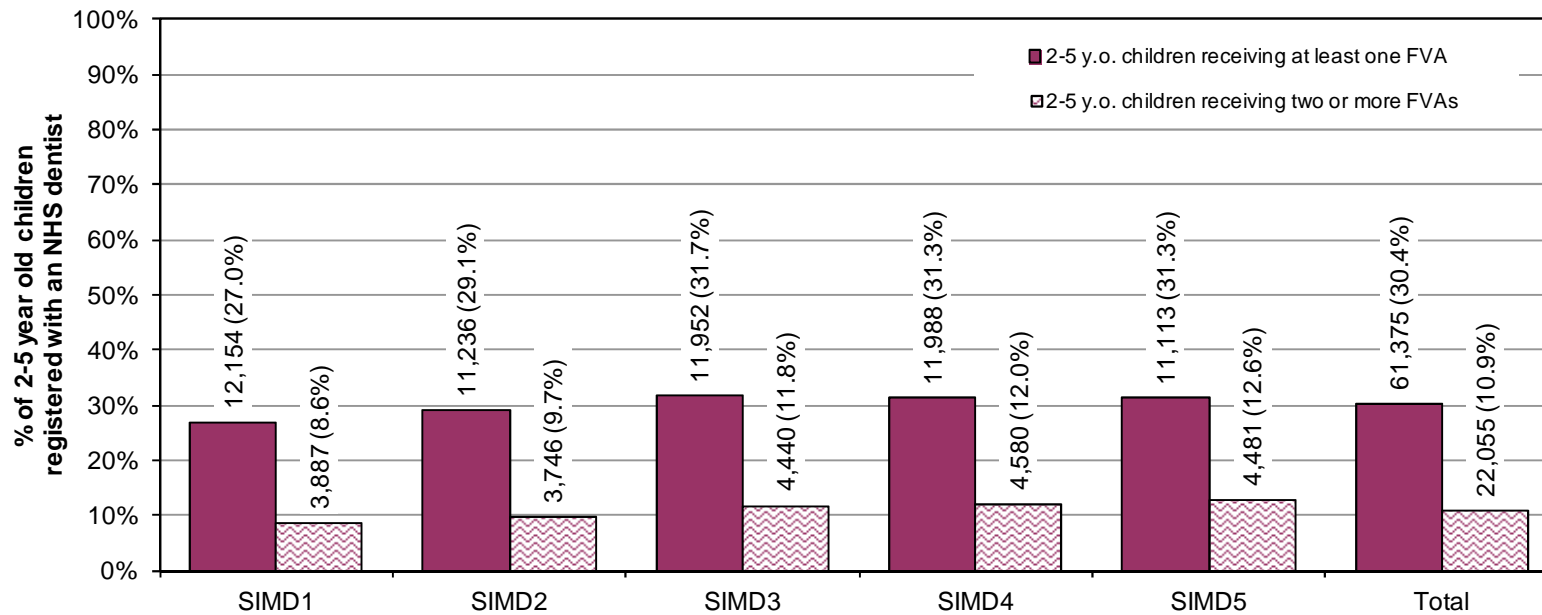


Figure 32: Proportion of 2-5 year old children registered with an NHS dentist receiving at least one / two or more FVAs – Scotland, by SIMD, 2012/2013 financial year

SIMD – Scottish Index of Multiple Deprivation (national).

NOTES:

- 1) Figure 32 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 2013 were as follows (data supplied by ISD): SIMD 1 – 45,074 children; SIMD 2 – 38,589; SIMD 3 – 37,731; SIMD 4 – 38,292; SIMD 5 – 35,500; and in total there were 201,837 (including SIMD Unknown).
- 3) **SIMD 2012 (national) was used.**

For example, in the 2012/2013 financial year, 27.0% of 2-5 year old children residing in SIMD 1 and registered with an NHS dentist received at least one FVA (12,154 children), and 8.6% (3,887 children) received an FVA within the 2012/2013 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

Since the start of the Childsmile programme in 2006/07 and up to the end of June 2013, 647,779 FVAs were applied across all three arms of the programme (Nursery, School and Practice).

Table 5: Number of FVAs in nursery, school and practice settings, by academic year, 2006/07-2012/13

NHS Board	2006/07			2007/08			2008/09			2009/10		
	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice
AA	222	–	3	462	81	35	2,227	630	164	1,841	1,702	708
B	51	–	0	238	186	0	533	694	0	467	1,157	83
DG	0	–	0	0	0	0	0	0	1	0	0	13
F	1,069	–	0	2,203	1,117	1	2,081	4,080	0	2,155	6,977	69
FV	0	–	0	920	0	2	1,169	501	4	1,612	1,406	24
G	0	–	0	0	0	0	0	0	1	3,290	906	3
GGC	0	–	19	0	0	194	0	0	513	0	2,012	1,847
H	0	–	0	0	0	0	150	80	1	1,124	1,554	10
La	0	–	11	0	0	122	0	0	330	463	197	1,633
Lo	0	–	0	542	0	0	3,716	1,446	0	4,046	4,660	27
O	0	–	0	0	0	0	0	0	0	40	0	81
S	0	–	0	0	0	0	54	74	5	349	511	55
T	678	–	0	2,346	610	0	2,074	3,767	2	2,273	4,354	0
WI	0	–	0	0	0	0	0	0	0	4	0	3
Unknown NHS Board	–	–	1	–	–	4	–	–	32	–	–	187
Scotland	2,020	–	34	6,711	1,994	358	12,004	11,272	1,053	17,664	25,436	4,743

FVA – fluoride varnish application.

Table 5 continues on next page.

NOTES: Table 5 presents number of FVAs applied in different settings by academic year. Please note that 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".

The Childsmile Practice FVA numbers do not include FVAs applied in practice settings to children born prior to 1 January 2005 (for details see p. 1). In 2010/2011 academic year in NHS Orkney there were 250 FVAs, and in NHS Shetland there were 175 FVAs applied to P3-P7 children. During July-September 2011, 90 FVAs were applied in NHS Orkney, 113 in NHS Shetland and 19 in NHS Western Isles. There are no data available on varnishes applied to P3-P7 children in practice settings in 2011/2012 and 2012/2013 academic years.

Table 5 (continued): Number of FVAs in nursery, school and practice settings, by academic year, 2006/07-2012/13

NHS Board	2010/11			2011/12			2012/13		
	Nursery	School	Practice	Nursery	School	Practice	Nursery	School	Practice
AA	2,083	3,018	1,586	2,374	4,977	3,237	2,720	6,078	3,935
B	669	1,662	270	833	2,390	1,356	897	3,524	2,030
DG	699	438	627	821	1,746	1,646	814	2,186	2,019
F	2,698	8,411	302	2,757	8,740	3,824	3,098	11,545	5,831
FV	1,996	3,445	211	1,404	1,999	2,776	2,231	4,591	4,528
G	4,775	7,090	411	4,555	10,088	3,179	6,866	15,261	5,210
GGC	2,689	12,510	3,907	6,518	24,896	11,613	7,339	31,830	14,147
H	1,990	4,006	517	3,092	9,581	2,224	3,508	13,508	3,500
La	5,781	4,001	3,219	10,045	5,864	7,495	21,145	12,860	9,942
Lo	4,288	7,155	866	6,148	13,635	9,050	5,672	18,302	13,451
O	301	397	171	736	1,236	184	559	1,213	328
S	534	596	295	550	894	569	668	1,285	559
T	2,090	6,471	141	2,760	8,451	3,057	2,943	13,008	5,030
WI	67	103	104	394	653	257	633	1,361	596
Unknown NHS Board	–	–	938	–	–	2,409	–	–	3,198
Scotland	30,660	59,303	13,565	42,987	95,150	52,876	59,093	136,552	74,304

FVA – fluoride varnish application.

NOTES: Table 5 presents number of FVAs applied in different settings by academic year. Please note that 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".

The Childsmile Practice FVA numbers do not include FVAs applied in practice settings to children born prior to 1 January 2005 (for details see p. 1). In 2010/2011 academic year in NHS Orkney there were 250 FVAs, and in NHS Shetland there were 175 FVAs applied to P3-P7 children. During July-September 2011, 90 FVAs were applied in NHS Orkney, 113 in NHS Shetland and 19 in NHS Western Isles. There are no data available on varnishes applied to P3-P7 children in practice settings in 2011/2012 and 2012/2013 academic years.

Childsmile workforce

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

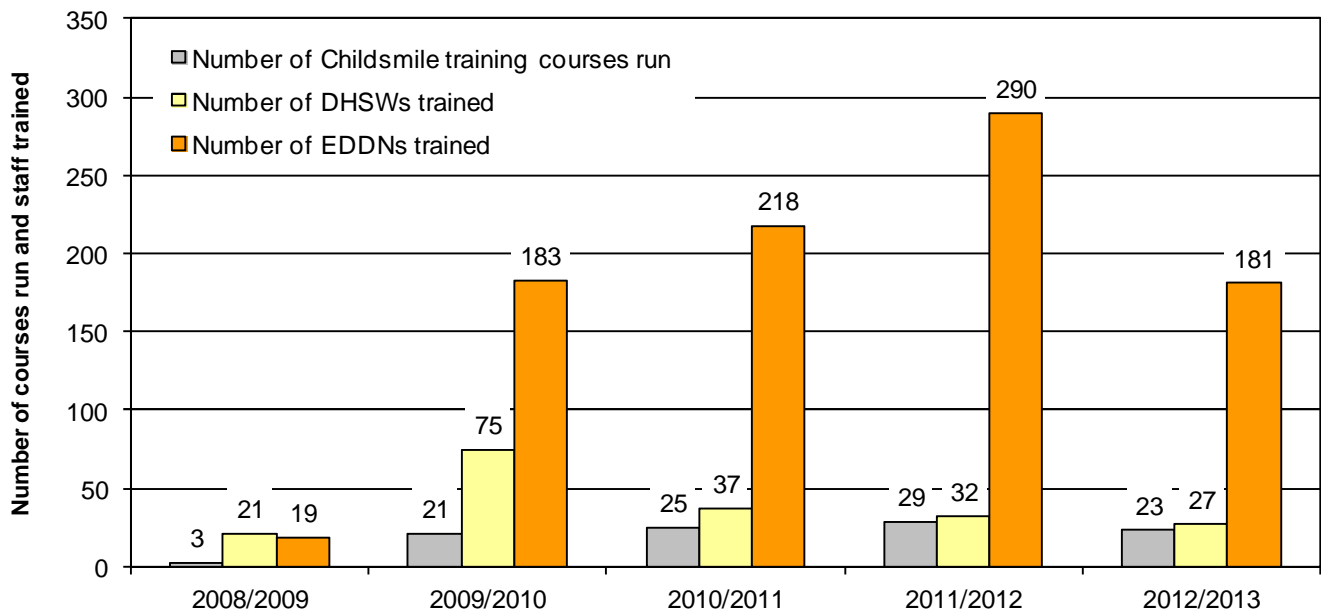


Figure 33: NES Childsmile training courses and staff trained – Scotland, 2008/09-2012/13 financial year

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

NOTES:

- 1) Figure 33 presents data on the number of Childsmile training courses run and staff trained. The data are provided by NES.
- 2) Training numbers for 2008/2009 are for part of the financial year.
- 3) Data for Childsmile training prior to January 2009, when NES took over the training, is incomplete. There are no data on the number of training courses run prior to NES. For staff trained limited data are available for West NHS Boards (AA, GGC and La) by calendar year:
 - 2006 – 93 EDDNs trained;
 - 2007 – 126 EDDNs trained;
 - 2008 – 19 EDDNs trained.

These data may be incomplete.

Out of the total of 181 EDDNs trained within 2012/2013 financial year 137 were from non-salaried GDS practices and 44 were from salaried GDS / CDS 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.
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 HIC Childsmile system within the reporting period
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>For reporting the 2012/13 data SIMD 2012 was used, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).</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 establishments	The total lists of pre-school establishments as at July 2013 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 2012 were calculated from the total list of schools published 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 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>For the 2012/13 data SIMD 2012 was used, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12).</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 HIC Childsmile 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 4 classes and children in primaries 1, 2, 3 and 4 will be included in the figures.</p>
Total number of children (of nursery age and P1-P4 age) in population	<p>The source of the population baselines has been changed for 2012/2013 academic year. The population baselines for 2012/2013 in this report are based on Small Area Population Estimates at 30 June 2011, which were provided by the National Records of Scotland (NRS; http://www.nrscotland.gov.uk) for each data zone by single year of age. These population estimates are based on the 2001 Census and were the most recent estimations available at the time of production of this report.</p> <p>The population baselines for previous years (2006/2007 – 2011/2012) have remained the same as they were before: the total number of children in the population by year group was calculated using CHI (Community Health Index) records of children born within each Health Board area within a defined period. Children were assigned to a year group using their date of birth.</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 "Unknown SIMD" section of the relevant graphs.

Childsmile Referral at the 6-8 week review

Term	Definition
<p>Children referral at the 6-8 weeks review by a Health Visitor / Public Health Nurse</p>	<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 / Public Health Nurse. (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/public health nurse 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/public health nurse 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>
SIMD	<p>Scottish Index of Multiple Deprivation – The measure of deprivation used throughout this report is the 2012 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. Childsmile Practice is introduced to the family by the public health nurse or health visitor who will refer them straight to a dental practice or to a dental health support worker (DHSW). Childsmile interventions are delivered by primary care dental service providers.
CDS (Community Dental Services)	The NHS Community Dental Services provide treatment for people who are unable to access NHS General Dental Services. For example, persons with special needs; persons living in areas with few GDSs providing NHS treatment; persons needing dental services who are resident in long-term care. Community Dental Services and Salaried Dental Services are combined within the report.
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 2013 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
Dental practices delivering Childsmile interventions	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. Dental practices delivering Childsmile interventions are reported separately by the type of practice: non-salaried GDS and salaried GDS / CDS.
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) <i>Prevention and Management of Dental Caries in Children</i> guidance.
Non-salaried GDS (Non-salaried General Dental Services)	Non-salaried General Dental Services are independent practices contracted to work on behalf of local NHS Boards.
Salaried GDS (Salaried General Dental Services)	Salaried general dental practitioners (GDPs) are remunerated on a salaried basis, rather than item of service and are managed as part of the Salaried Dental Services. Salaried GDPs are usually recruited to areas where access to NHSGDS is limited. Community Dental Services and Salaried Dental Services are combined within the report.
SIMD	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. For reporting the 2012/13 data SIMD 2012 was used, whereas SIMD 2009 Version 2 was used for all previous years (2006/07 – 2011/12). National SIMD is used for Childsmile Practice as payments are processed for General Dental Practitioners using the national SIMD index.
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 non-salaried GDS practices	The total numbers of non-salaried general dental practices as at 31 st March 2012 were supplied by ISD Scotland, MIDAS (data extracted 4 July 2012). ISD are unable to report robust CDS data therefore the total number of salaried GDS/CDS practices cannot be reported.
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 "Unknown SIMD" section 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, Public Health nursing 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:

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