

HEALTH INEQUALITIES PROGRAMME 2003-06
Health Action Zone funded initiative

1. Which area of the health inequalities programme is your initiative contributing to? (tick ✓ the appropriate box)	
Pregnancy & early childhood Opportunity for Children & young people Improving primary care and other public services	Tackling the major killers Strengthening disadvantaged and vulnerable communities Tackling the wider determinants
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2. Please state the purpose of the initiative.	
To reduce inequalities in oral health in children in nursery schools and primary schools	
3. Please indicate (a) the target population and (b) the geographical areas the project will target and (c) estimate population coverage	
(a) 136 primary schools across Sheffield (b) City wide with the exception of areas with water supply from Severn Trent Water Authority (which is Fluoridated) (c) 42 primary schools in scheme = 2329 children drinking fluoride milk	
4. What will be the key impact of your initiative over the next three years directly or indirectly* on (a) health and (b) core mainstream services, that will achieve your projects purpose?	
	<i>Measure of success (see section 4b)</i>
(a) health impact To narrow the gap between children with highest and lowest incidences of dental caries. (b) service impact To raise awareness and to improve the oral health of children within Sheffield primary schools	<ul style="list-style-type: none"> • Monitoring information on uptake of school milk , supplied by SCC • Bi -annual school dental surveys of five year olds
4 (b) Please indicate above in the measure of success column how you will show this impact	

* This acknowledges that initiatives will not necessarily have a direct impact but will make an indirect contribution to wider programmes. Each initiative is encouraged to think through its own contribution and how they will demonstrate this.

5. What processes have you put in place to gather this information and to review progress in your initiative?

- Monitoring the number of children drinking fluoride milk
- Assessing the support from parents and teachers by taking part in school intake meetings, assemblies and health days.
- Regular review at project team meetings

6. What will be the key actions that the initiative will undertake to achieve the desired impact and purpose?

- Expanding the programme by targeting schools in areas where dental caries rate are high.
- Building support for schools and other interested parties for the future by distributing information regarding the fluoride milk scheme. Eg termly newsletter

7. Please identify milestones over the page to show progress of the project for 2003-04 to enable six monthly reporting.

8. What assumptions and/or risks have you identified relating to your approach?

- SCC has not felt able to claim the milk subsidy for children under five, which has increased the amount payable by the project for the fluoride milk.
- This problem has not been resolved nationally and the recent consultation on welfare foods could add to the problem if the milk or fruit option is adopted in schools. However the response does highlight the importance of milk to the dental health of young children

9. Please indicate briefly how you will ensure the work of the project will continue once funding expires.

We intend to mainstream the fluoride milk project into existing oral health promotion activities. The 9.5pence cost per carton of milk for under 5's and 0.5p cost on per carton for over fives will have to be funded by the NHS through the LDP. Parents pay 9.0 pence for milk for over fives.

10. Please indicate the management steering arrangements for your project including the chairperson's name and where your initiative links into Sheffield First For Health or another part of the family of Sheffield First.

John Green Director of Dental Public Health – Chair
Peter Bateman Director of Dental Services
Rosemarie Khan OBE Oral Health Promotion Manager
Sallie Swann Client and contract catering support services
Steve Webster Environmental Health
Joanne Tyree Fluoride Milk Project Leader
Val Morley School Nurse

11. Please complete the attached spreadsheet indicating the budget profile for the project.

Please sign on behalf of the project

Signed on behalf of Sheffield First For Health

Name

Please email by Thursday April 17th 2003 to haz@sheffield.nhs.uk

	Milestones en route to delivering key project actions	Progress to date	Learning points to share
April – September 2003	<ul style="list-style-type: none"> • To recruit three more schools with highest dental caries (dmft index) score into the scheme. • To revisit schools with high disease rates who have previously declined to participate 	<ul style="list-style-type: none"> • Information sent out to schools and awaiting appointment to visit the headteacher to discuss implementation of scheme into school. • Fluoride milk now supplied by ACC with better quality pack which will overcome some previous objections. 	
October 2003 - March 2004	<ul style="list-style-type: none"> • Continue to support and maintain commitment to schools taking part in the fluoride milk scheme and to other health professionals and interested parties. 		

