

The Role of Schools in Health (focussing on diet and oral health)

Oldham Governors' Conference
12th November 2016

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Overview

- National context regarding oral health, diet and obesity
- Current situation in Oldham
- Recommendations and guidance for healthier eating and drinking habits
- The impacts of poor eating and drinking habits
- The role of School Governors in promoting a ‘whole school approach’
- Healthy eating and drinking in Ofsted’s inspection process
- Support and resources available



The relationship of oral health and obesity

- **Common health conditions** affecting children.
- Both are of great public health importance thus ‘tackling obesity, particularly in children’ and ‘ensuring that every child has the best start in life’ are priorities for public health in England.
- **Consumption of free sugars is a risk factor for dental caries and obesity.**
- There is a **strong relationship between deprivation and both obesity and dental caries** in children.
- **The two conditions may co-exist** within the same individuals or groups of people.
- There are also other **non-shared risk factors** for these conditions:
 - for obesity these include genetics, social, individual and family behaviours
 - for dental caries these include exposure to fluoride, oral bacteria, salivary production and composition and tooth structure.
- Healthier environments and behaviour change are required.

Oldham's children have some of the worst teeth in the country!!

51% of our 5 year old children and

30% of our 3 year old children have got decayed teeth



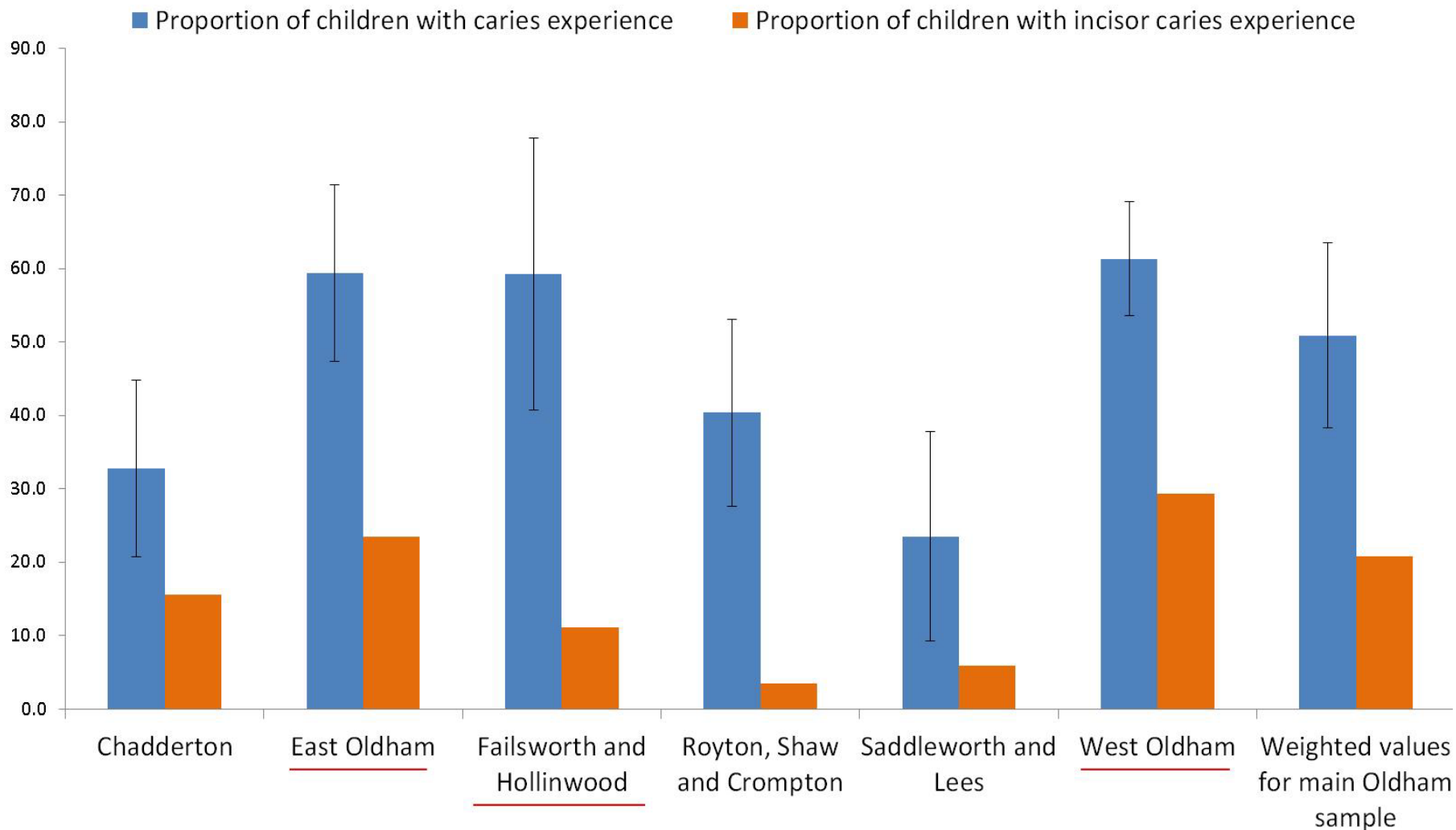
Tooth decay is totally preventable

Oral health at 5 years of age is a good indicator of oral health in later life

Area	Average dmft (severity of decay)				% dmft>1 (Prevalence of decay)			
	2005/ 06*	2007/ 08	2011/ 12	2014/ 15	2005/ 06*	2007/ 08	2011/ 12	2014/ 15
Oldham	2.60	2.14	2.10	2.50	53%	49%	48%	51%
North West	2.00	1.52	1.29	1.30	47%	38%	35%	33%
England	1.47	1.11	0.94	0.80	38%	31%	28%	25%

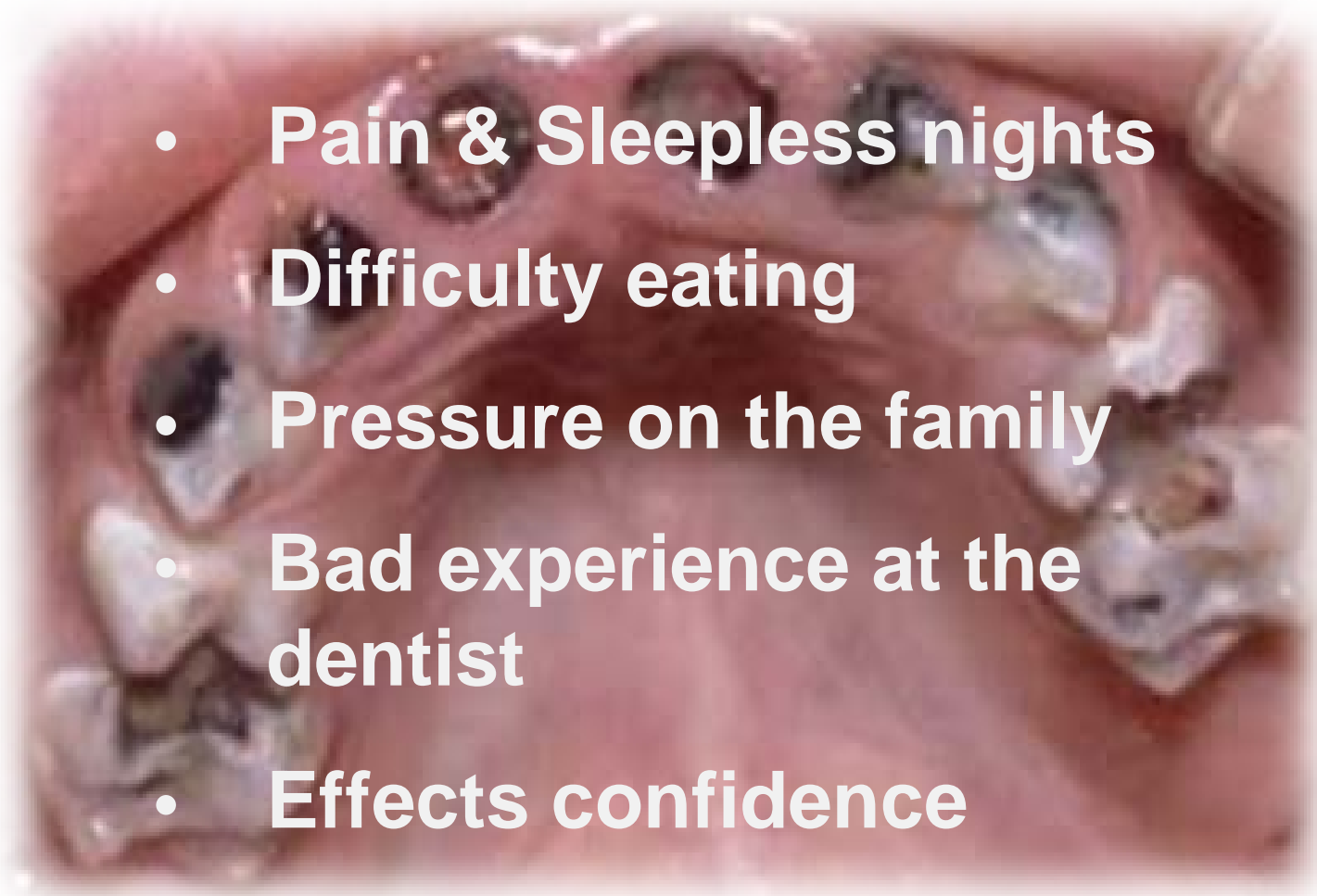
**It is not possible to make direct comparisons with the 1992 to 2006 series of surveys due to differences in the methodology. However, a change in trends within each of the survey series is observable (PHE 2012).*

Proportions of 5-yr-old children with experience of dental decay and decay affecting incisors in Oldham by District Partnership, 2015 (95% CIs)



Having bad teeth also leads to:

- **Pain & Sleepless nights**
- **Difficulty eating**
- **Pressure on the family**
- **Bad experience at the dentist**
- **Effects confidence**





Due to poor oral health; children in the North West have...



15,561

had a total of
**15,561 sleepless
nights**



25,159

missed
**25,159 days
from school**



10,050

been in pain
for a total of
10,050 days



EXTRACTIONS

In the North there are
**four times more
procedures for extractions**
than tonsillectomies and
2.5 more than placement of
grommets.



GROMMETS



TONSILLECTOMIES

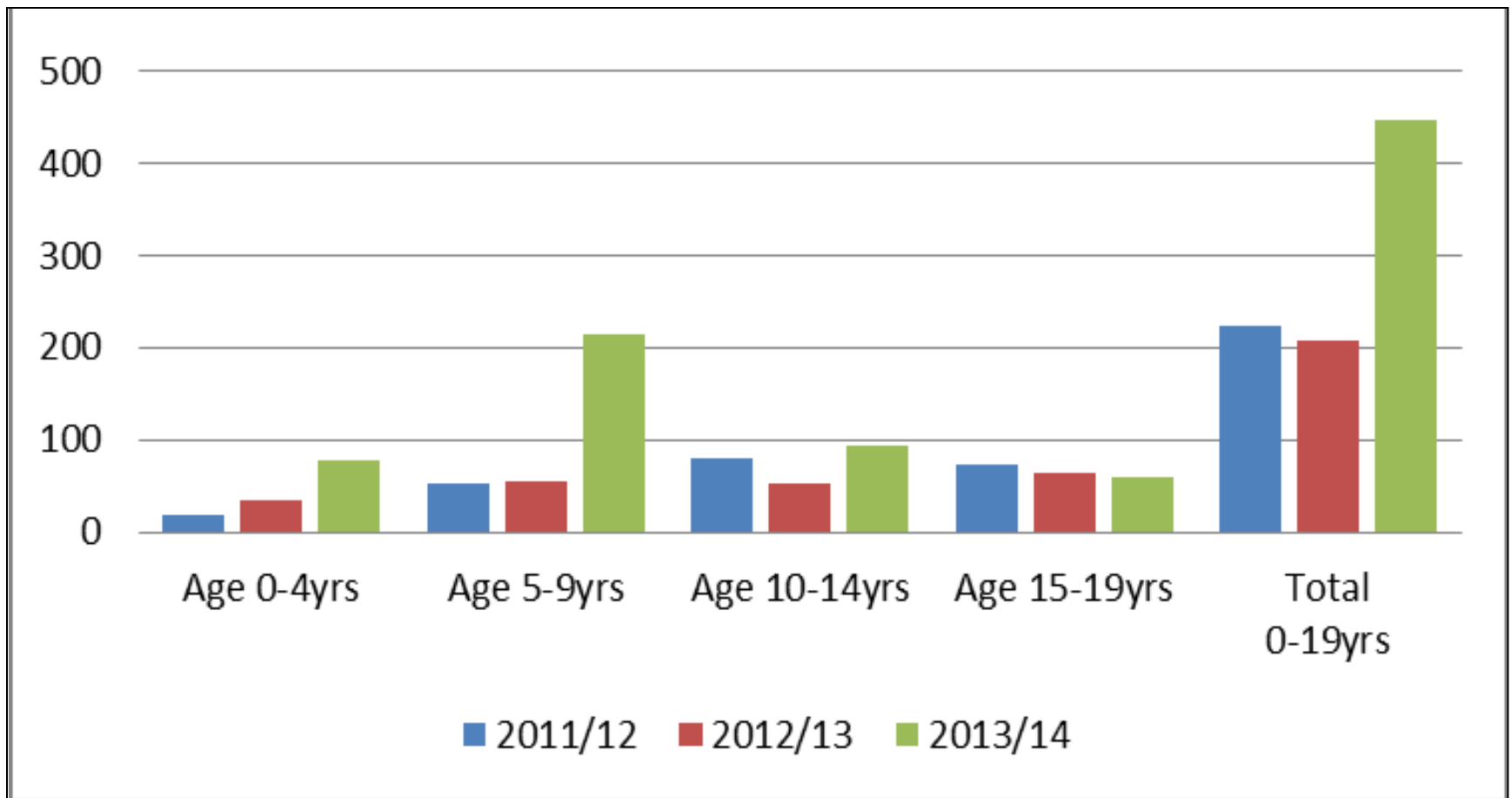


15,000 Children under 16 had dental
extractions under general anaesthetic due
to decayed teeth



Dental extractions are the most
common reason for children in the North
to be admitted to hospital - more than
broken bones, tonsillitis or ear infections!

Children and adolescents admitted to hospital for extractions 2011/12 to 2013/14

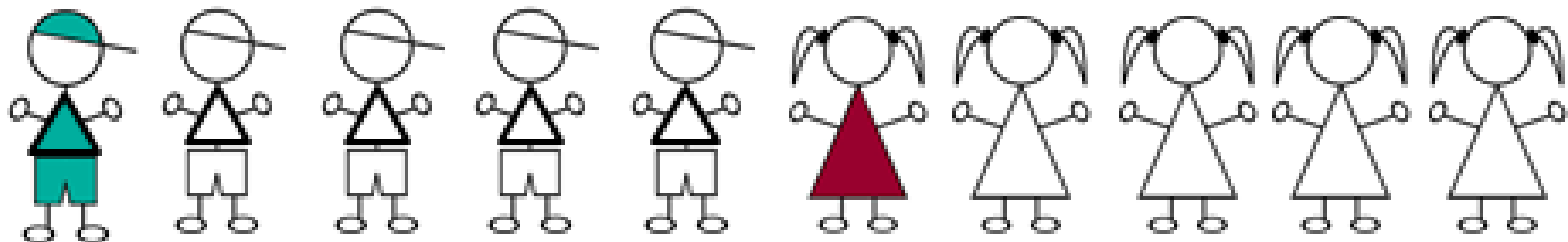




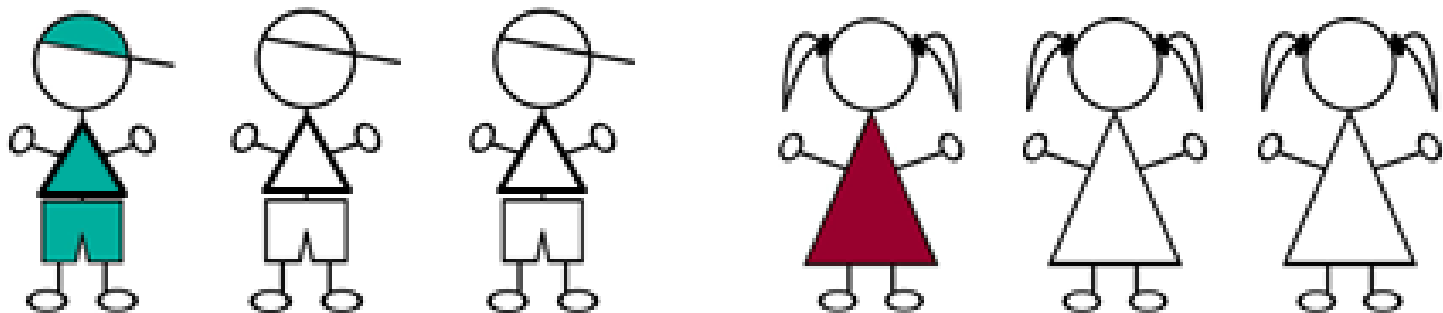
Prevalence of excess weight among children

National Child Measurement Programme 2014/15

One in five children in Reception is overweight or obese (boys 22.6%, girls 21.2%)



One in three children in Year 6 is overweight or obese (boys 34.9%, girls 31.5%)



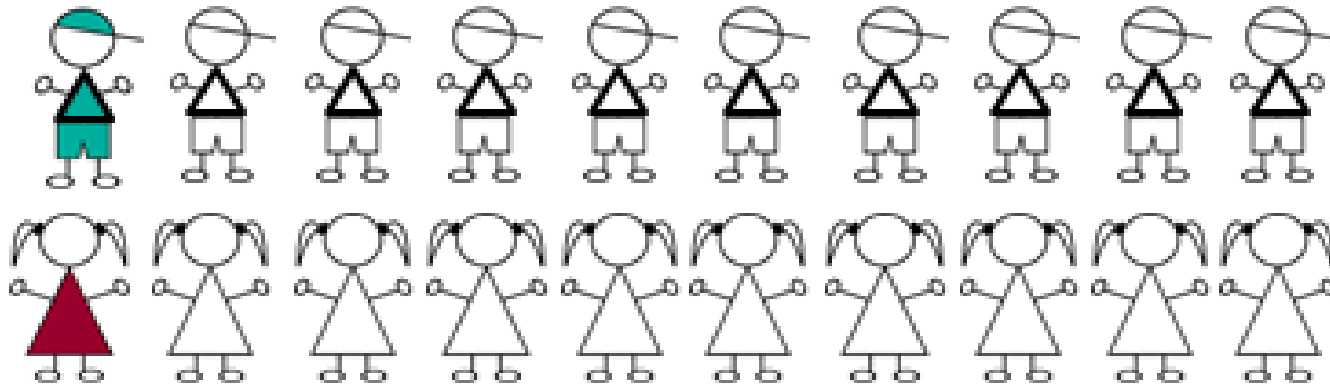
Child overweight (including obesity)/ excess weight: BMI ≥ 85th centile of the UK90 growth reference



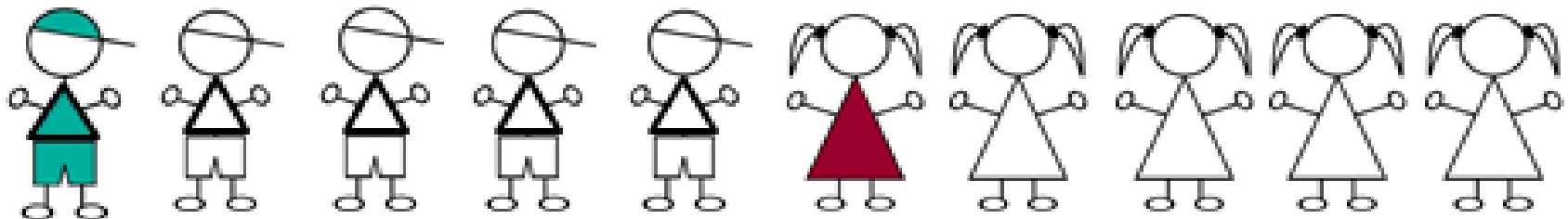
Prevalence of obesity among children

National Child Measurement Programme 2014/15

Around one in ten children in Reception is obese (boys 9.5%, girls 8.7%)



Around one in five children in Year 6 is obese (boys 20.7%, girls 17.4%)



Child obesity: BMI ≥ 95th centile of the UK90 growth reference



Overweight and obesity among adults

Health Survey for England 2012 to 2014 (three-year average)

Almost 7 out of 10 men are overweight or obese (66.4%)



Almost 6 out of 10 women are overweight or obese (57.5%)

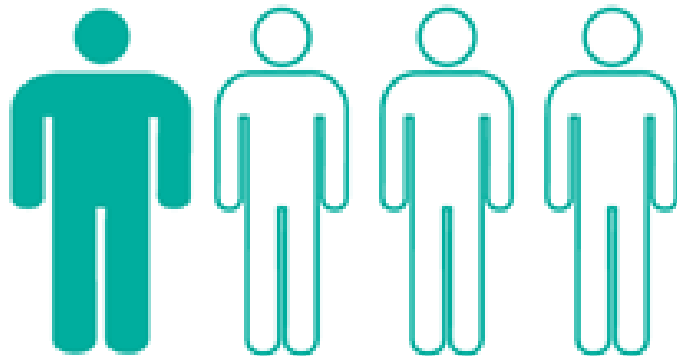


Adult (aged 16+) overweight and obesity: BMI \geq 25kg/m²

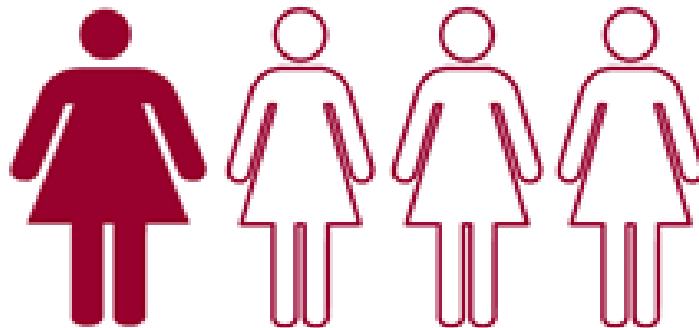


Obesity among adults

Health Survey for England 2012 to 2014 (three-year average)



One out of four **men** is obese
(24.9%)



One out of four **women** is obese
(25.2%)

Adult (aged 16+) obesity: BMI $\geq 30\text{kg/m}^2$



Childhood obesity in Oldham

NCMP obesity results for reception year and year 6 in Oldham (3 year average) 2012/3, 2013/14 and 2014/15

Obesity	Reception year %	Year 6 %
England average	9.1	19.1
Oldham average	10.4	20.4

Underweight and other diet-related issues

- Undernutrition affects growth and cognitive function, and immune function.
- Deficiencies such as rickets are still experienced by UK children
- In 2014/15, in Oldham, 1.35% in Reception and 2.76% in Year 6 were underweight



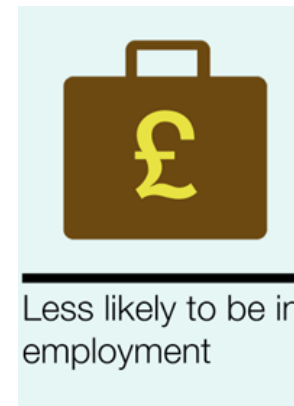
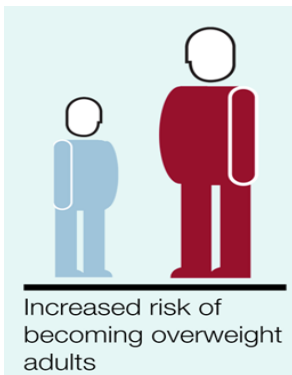
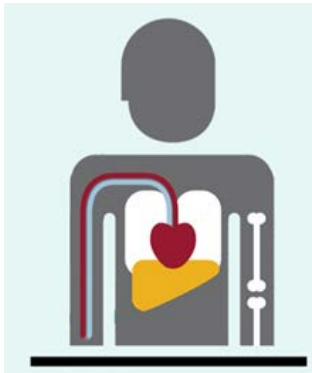


Life course approach



Emotional and
behavioural

- Stigmatisation
- bullying
- low self-esteem





Key Points

- Statutory School Food Standards apply to:
 - **LA maintained schools**
 - **academies that opened prior to 2010** and
 - **academies and free schools in a funding agreement from June 2014.**
- Academies set up between Sept 2008 and Sept 2010 can voluntarily sign up to the School Food Standards
- Standards were **revised 1st January 2015** and will be revised again
- School Food Standards include requirements:
 - **for school lunches**
 - **for food and drink up to 6pm including breakfast clubs, tuck shops, mid-morning break, vending and after school clubs**
- From Sept 2014 **every child in Reception, Year 1 and 2 in state-funded schools is entitled to a free lunch.**



The Role of School Governors regarding provision of school food

- **A school lunch must be provided if requested**
- **Free school meals** must be provided to eligible children.
- The lunch **must meet the SFS.**
- **Hot lunches** should be provided wherever possible.
- **Free-of-charge drinking water must be provided** at all times on school premises.
- **Facilities must be provided free for pupils not taking school meals.**
- **Lower fat or lactose reduce milk must be available at least once a day.**
- **Free milk** must be provided to infants and benefits-based free school meals pupils.
- **Whole milk can provided until the end of the school year when pupils reach 5 years**, after that it must be lower fat or lactose reduced.
- **4-6 year olds** in state-funded infant, primary and special schools **are eligible to receive a free piece of fruit or veg every day** (outside of school lunch)



Exemptions to School Food Regulations

Food provided:

- at parties or celebrations to mark religious or cultural occasions
- at fund-raising events
- as rewards for achievement, good behaviour or effort
- for use in teaching food preparation and cookery skills
- on an occasional basis by parents of pupils
- Confectionery, snacks , cakes or biscuits served as part of an evening meal at a boarding school before 6pm



The Role of School Governors

Boards are strongly encouraged to work with the school leadership team to develop a **whole school food policy**, setting out the school's approach to its provision of food, food education (including practical cooking), the role of the catering team as part of the wider school team, and the school's strategy to encourage the take-up of school lunches.

The whole school policy can include all food and drink.



Healthy eating and drinking in the Ofsted framework

- ‘Inspectors will make a judgement on the personal development, behaviour and welfare of children and learners by evaluating the extent to which provision is successfully promoting and support children’s and learners’
- Knowledge of how to keep themselves healthy, both emotionally and physically, including through physical activity and healthy eating.



Childhood Obesity – A Plan for Action, August 2016

Key Points

- One hour of **physical activity** every day;
- improved **co-ordination and access to quality sport and physical activity** for primary school
- **Recognition of primary schools' actions** to help children to eat better and move more, which will be taken into account by Ofsted;
- **Updating of School Food Standards** and encouraging all schools (including academies and free schools) to commit to these
- **Funding for healthy breakfast clubs**
- An **Ofsted thematic review** in 2017 on obesity, healthy eating and physical activity in schools to enable the sharing of good practice.

Criteria for previous Toothfriendly partnership award

Ideas of what schools could work towards:

- Promote healthy eating as part of the curriculum at least once a year
- Work in partnership to promote family fluoride toothpaste and correct tooth brushing advice
- Children are not allowed to bring food or drinks containing sugar into school for break times
- Food or drink containing sugar will not be sold in school
- School has a reward system that is sugar free
- Birthdays are celebrated in school without food and drink containing sugar
- Have written policy that includes the above issues and is included in the school profile
- School provides free access to fresh drinking water or encourages water bottle on desk scheme
- The school actively promotes healthier lunchboxes with parents and pupils and has a strategy in place if unsuitable items are sent into school

Which level of award?

Silver achieve points 1-5 to achieve this award

Gold achieve points 1-8 to achieve this award

Platinum achieve points 1-9 to achieve this award



Discussion

- **Does your school follow a food and drink policy framework?**
- **If, so what does it cover?**
 - Breakfast clubs
 - Packed lunches
 - Rewards
 - Celebrations
 - Events
 - Drinks, including water
- **Are there changes that you would like to see** made to eating and drinking in school or in local areas
- **Do you require support or guidance** to make changes?

Share key points from discussion



References

- Healthy schools, healthy children, 2006, Ofsted
- The common inspection framework: education, skills and early years, August 2015, Ofsted
- The relationship between dental caries and obesity in children: an evidence review, October 2015, Public Health England
- Government Dietary Recommendations, 2016, Public Health England
- The Eatwell Guide, 2016, Public Health England
- School food in England, Departmental advice for governing boards, July 2016, Dept. of Ed.
- Childhood Obesity, A Plan for Action, August 2016, Public Health England
- Healthy weight, healthy futures, Local government action to tackle childhood obesity, Case studies, February 2016, Local Government Association
- Department of Health (2014) Delivering Better Oral Health: An evidence-based toolkit for prevention
- PHE Dental Public Health Epidemiology Programme (2016). Oral Health Survey of five-year-old children 2016-17. National protocol.



Contact details

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Thank you for listening