

## Scottish Borders Health and Social Care Partnership



### Equality, Human Rights and Fairer Scotland Duty Impact Assessment – Stage 1 Proportionality and Relevance

Completion of the template below will give senior officers the confidence that the Equality Duty, the Scottish Specific Public Sector Equality Duties, Human Rights and the Fairer Scotland Duty have been considered at the beginning of and throughout the proposal development and that action plans are in place, where applicable, which identify relevant stakeholders and the undertaking robust consultation to deliver a collaborative approach to co-producing the E&HRIA.

**What Integration Joint Board (IJB) report or Partnership decision does this proportionality and relevance assessment relate to:**

Oral Health and Dental Services Strategic Plan

**Relevant protected characteristics materially impacted, or potentially impacted, by proposals (employees, clients, customers, people using services) indicate all that apply**

Age	Disability Learning Disability, Learning Difficulty, Mental Health, Physical Neurodiversity	Gender	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief (including non-belief)	Sexual Orientation
✓	✓	✓	✓		✓	✓	✓	✓

**Equality and Human Rights Measurement Framework – Reference those identified in Stage 1 (remove those that do not apply)**

<b>Education</b>	<b>Work</b>	<b>Living Standards</b>	<b>Health</b>	<b>Justice and Personal Security</b>	<b>Participation</b>
Higher education Lifelong learning	Employment Earnings Occupational segregation Forced Labour and trafficking*	Poverty Housing Social Care Rurality	Social Care Health outcomes Access to health care Mental health Reproductive and sexual health* Palliative and end of life care*	Conditions of detention Hate crime, homicides and sexual/domestic abuse Criminal civil justice Restorative justice Reintegration, resettlement and rehabilitation*	Political and civic participation and representation Access to services Privacy and surveillance Social and community cohesion* Family Life*

\*Supplementary indicators

<b>Main Impacts</b>	<b>Are these impacts positive or negative or a combination of both</b>	<b>Are the impacts significant or insignificant?</b>
Access to dental care.	Positive	Significant
Improved dental access particularly for vulnerable populations.	Positive	Significant
Improved oral health for all with focus on reducing oral health inequalities.	Positive	Significant
Oral Health impacts on overall wellbeing.	Positive	Significant

<b>Is the proposal considered strategic under the Fairer Scotland Duty?</b>	Yes
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<b>E&amp;HRIA to be undertaken and submitted with the report – Yes</b> <b>If no – please attach this form to the report being presented for sign off</b>	<b>Proportionality &amp; Relevance Assessment undertaken by:</b> <b>Morag Muir</b> <b>Date: 13/09/2023</b>
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# Equality Human Rights and Fairer Scotland Duty Impact Assessment

## Stage 2 Empowering People - Capturing their Views



### Oral Health and Dental Services Strategic Plan

This plan aims to set the high level strategic direction for improving oral health and the ongoing development of dental services for the Borders population. A key aim of the plan is to reduce inequalities and maximise oral health for the whole population. The plan sets out high level strategic aims for the next 12 years and will be implemented through underpinning 3 yearly action plans.

### Equality Human Rights and Fairer Scotland Impact Assessment Team

Role	Name	Job title	Date of E&HRIA Training
E&HR Service Specialist	Wendy Henderson		
HSCP Senior Mgt Team Member	<i>Chris Myers</i>		
Responsible Officer	Morag Muir	Consultant in Dental Public Health	
Main Stakeholder (NHS Borders)	Dental Services and Oral Health Strategy Group		

Mains Stakeholder (SBC)	Dental Services and Oral Health Strategy Group		
Third/Independent Sector Rep			
Service User			

### Evidence Gathering (will also influence and support consultation/engagement/community empowerment events)

Evidence Type	Source	What does the evidence tell you about the protected characteristics affected?
What equalities information is routinely collected from people currently using the service or affected by the policy?	None collated locally	
Data on populations in need	<p>Oral Health Needs Assessment  <a href="https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-NHSB-Oral-Health-Needs-Assessment-FORMATTED-v2-1-1-.pdf">https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-NHSB-Oral-Health-Needs-Assessment-FORMATTED-v2-1-1-.pdf</a></p> <p>National Dental Inspection Programme (P1 &amp; P7) (SIMD)  <a href="https://ndip.scottishdental.org/ndip-reports/">https://ndip.scottishdental.org/ndip-reports/</a></p> <p>Registration &amp; Participation (SIMD)(age)  <a href="https://publichealthscotland.scot/publications/dental-statistics-registration-and-participation/dental-statistics-nhs-registration-and-participation-24-january-2023/">https://publichealthscotland.scot/publications/dental-statistics-registration-and-participation/dental-statistics-nhs-registration-and-participation-24-january-2023/</a></p>	<p>Access issues affect whole population</p> <p>Ageing population with teeth = high dental needs / complexity</p> <p>Priority Group/Special Care patients – more capacity for these patients required</p> <p>Children from more deprived areas more likely to have experienced decay</p> <p>People from more deprived areas less likely to be registered with a dentist and less likely to attend if they are registered</p> <p>Low registration rates for young children</p>
Data on relevant protected characteristic	<p>Oral Health Needs Assessment  <a href="https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-">https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-</a></p>	<p>Limited local data on protected characteristics</p> <p>National data show poorer oral health among various</p>

	<p><a href="#">NHSB-Oral-Health-Needs-Assessment-FORMATTED-v2-1-1-.pdf</a></p> <p>Limited data available on oral health other than increased risk (academic papers)</p>	<p>groups – care experienced children, dependent older people, additional care needs,</p> <p>National “dental priority groups” identified as adults with additional care needs, homeless, people in prison/justice system, dependent older people.</p>
Data on service uptake/access	<p>Registration &amp; Participation (annual snapshot)</p> <p><a href="https://publichealthscotland.scot/publications/dental-statistics-registration-and-participation/dental-statistics-nhs-registration-and-participation-24-january-2023/">https://publichealthscotland.scot/publications/dental-statistics-registration-and-participation/dental-statistics-nhs-registration-and-participation-24-january-2023/</a></p>	<p>Both registration and participation showing downward trend</p> <p>Age (0-2) low registration levels, older 75+ lower participation</p> <p>More deprived less likely to be registered or to participate if registered</p>
Data on socio economic disadvantage	<p>Mostly at national level</p> <p>2022 National Dental Inspection Programme report includes local data by SIMD</p> <p><a href="https://ndip.scottishdental.org/ndip-reports/">https://ndip.scottishdental.org/ndip-reports/</a></p> <p>Scottish Adult Oral Health Survey</p> <p><a href="https://publichealthscotland.scot/our-areas-of-work/primary-and-secondary-care/dental-care/adult-dental-health/the-scottish-adult-oral-health-survey/">https://publichealthscotland.scot/our-areas-of-work/primary-and-secondary-care/dental-care/adult-dental-health/the-scottish-adult-oral-health-survey/</a></p> <p>Scottish Health Survey (self-reported information)</p>	<p>Higher likelihood of decay experience in children from more deprived areas</p> <p>National data show similar social gradient for adults</p> <p>More deprived likely to have fewer natural teeth</p>
Research/literature evidence	<p>El-Yousfi, S., Jones, K., White, S. <i>et al.</i> A rapid review of barriers to oral healthcare for people with protected characteristics. <i>Br Dent J</i> <b>228</b>, 853–858 (2020)</p> <p>Summary: <a href="#">A rapid review of barriers to oral healthcare for people with protected characteristics.</a></p> <p>Data linkage studies (NDIP):</p> <p>McMahon, A. D. <i>et al.</i> (2018) <a href="#">Inequalities in the dental health needs and access to dental services among looked after children in Scotland: a population data linkage study.</a> <i>Archives of Disease in</i></p>	<p>Care experienced children more likely to have untreated decay and more likely to have require dental treatment under general anaesthetic</p>

	<p><a href="#">Childhood</a>, 103(1), pp. 39-43.</p> <p>Sherriff et al (2023) Child oral health and preventive dental service access among children with intellectual disabilities, autism and other educational additional support needs: A population based record linkage cohort study, <i>Community Dentistry and Oral Epidemiology</i> 51(3) pp. 494-502</p> <p><a href="#">Kinnear et al (2019) Prevalence of factors associated with edentulousness (no natural teeth) in adults with intellectual disabilities</a></p> <p><a href="#">The Oral Health and Psycho-social Needs of Scottish Prisoners and Young Offenders</a></p> <p><a href="#">Homeless in Scotland: An Oral Health and Psycho-social Needs Assessment</a></p>	<p>Higher dental needs among children with additional needs</p> <p>Adults with learning disability more likely to have no natural teeth than general population</p> <p>High dental needs among people in prison system</p> <p>High dental needs among people experiencing homelessness</p>
Existing experiences of service information	<p>Feedback as part of Oral Health Needs Assessment <a href="https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-NHSB-Oral-Health-Needs-Assessment-FORMATTED-v2-1-1-.pdf">https://www.nhsborders.scot.nhs.uk/media/897990/2021_09_01-NHSB-Oral-Health-Needs-Assessment-FORMATTED-v2-1-1-.pdf</a></p> <p>Complaints information – practices submit numbers only PDS/HDS - pt experience team manage</p>	<p>Patient feedback during OHNA was very positive about services received</p> <p>Several members of public fed back re having difficulty accessing NHS care/having to travel for care at time of needs assessment</p> <p>Limited information available, dental management not aware of any complaints relating to unequal/unfair treatment of particular groups</p>
Evidence of unmet need	<p>Local data: Unregistered emergency patient numbers Dental Enquiry Line call numbers</p>	<p>Significant demand for dental registration and urgent dental care from unregistered patients</p> <p>Access difficulties for unregistered patients High volume unregistered emergency patients</p>

	Feedback from Primary Care colleagues	High volume calls to Dental Enquiry Line Increase in dental problems presenting to non-dental settings
Good practice guidelines	Oral Health Improvement Programme Guides <a href="https://www.childsmile.nhs.scot/">https://www.childsmile.nhs.scot/</a> <a href="https://learn.nes.nhs.scot/6128/reducing-inequalities">https://learn.nes.nhs.scot/6128/reducing-inequalities</a> Scottish Dental Clinical Effectiveness Programme <a href="https://www.sdcep.org.uk/">https://www.sdcep.org.uk/</a>	
Other – please specify	General Dental Service Regulations <a href="https://www.legislation.gov.uk/ssi/2010/208/contents/made">https://www.legislation.gov.uk/ssi/2010/208/contents/made</a>  Statement of Dental Remuneration <a href="https://www.scottishdental.org/professionals/statement-of-dental-remuneration/">https://www.scottishdental.org/professionals/statement-of-dental-remuneration/</a>  Help with healthcare costs/exemptions  SPICE report on dental services <a href="https://spice-spotlight.scot/2023/08/23/nhs-dental-services-in-scotland-braced-for-change/">https://spice-spotlight.scot/2023/08/23/nhs-dental-services-in-scotland-braced-for-change/</a>	Independent contractor dentists' responsibilities  Enhanced payment for low SIMD patients  Free treatment for under 16 years old, pregnant women, those in receipt of certain benefits. Criteria to be met for exemptions/help  Further information on dental services, how delivered
Risks Identified		Access to dental care (affects whole population) Oral health inequalities Impacts across the system (Primary, Secondary and Social Care) Financial Recruitment and retention Sustainability and resilience (staffing and financial) Legislation and level of influence Wider environment/determinants eg. Food options



		available, lifestyle factors, oral hygiene practices and ability to maintain
Additional evidence required	N/A	

## Consultation/Engagement/Community Empowerment Events

This strategic plan will be relevant to everyone in the Borders and is designed to tackle inequalities as one of its core aims.

The EHRIA process has identified multiple groups who may be affected by the plan. We are currently undertaking a process of engagement and are proactively contacting and actively engaging with the groups outlined in the embedded document to encourage them to input to this process.



Groups and contacts for engagement1 (1).

Engagement responses will be analysed and reported to ensure views expressed by specific population groups are identified and acted on.

We have taken this pragmatic approach to be inclusive and enable us to engage as widely as possible with all of the groups identified within the context of the timeframe and resources available to us. We feel this is appropriate for this high level strategic plan and any actions arising from the high level aims which may impact on particular groups will be subject to their own EHRIA with appropriate levels of engagement.

Groups listed will be approached by identified members of the team and encouraged to provide feedback via a survey available online (Microsoft Forms) or hard copy version. At the time of approaching each group further information will be offered with the option of a more formal meeting or discussion available as preferred.

### Event 1

Date	Venue	Number of People in attendance by category*	Protected Characteristics Represented

\*Attendance by category – including but not limited to: People using the service, people not using the service - currently, unpaid carers, paid carers, key stakeholders (organisation and job title)

Views Expressed	Officer Response

## Event 2

Date	Venue	Number of People in attendance by category*	Protected Characteristics Represented

Views Expressed	Officer Response

# Equality, Human Rights and Fairer Scotland Duty Impact Assessment

## Stage 3

### Analysis of findings and recommendations

#### Oral Health and Dental Services Strategic Plan

Please detail a summary of the purpose of the proposal being developed or reviewed including the aims, objectives and intended outcomes

Oral health is an essential component of general health and wellbeing, enabling people to eat, speak and socialise without discomfort or embarrassment. Consequences of poor oral health can have wide reaching implications and can put pressure on other services. Dental services are vital in delivering treatment for dental conditions through regular routine dental care and to alleviate symptoms of pain and infection when they arise. The most important factors which determine oral health lie within day-day life. Oral health improvement and prevention of dental disease must therefore be prioritised and will require effort across the whole system to ensure the population of the Borders are supported to have the best possible oral health.

This strategic plan follows on from a comprehensive needs assessment which included engagement with patients, members of the public, professionals across all branches of dental services and wider partners to identify the oral health needs of the population of the Borders. It has been developed to take forward the recommendations from the needs assessment.

Our vision is that everyone in the Borders will enjoy excellent oral health as part of their general health and wellbeing.

The plan aims to improve oral health across the population with a focus on reducing inequalities. There will be an emphasis on prevention, collaborative working and supporting access to dental care.

To achieve this the strategic plan will deliver against 4 themes:

- Maximising oral health
- Access to dental care
- Developing pathways



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- Partnership working

It will be implemented over a period of 12 years, underpinned by four action plans which will be developed at 3 yearly intervals with regular monitoring and engagement.

### Section 1: Equality Act 2010 – Relevant Protected Characteristics as identified in Stage 1 or during Stage 2

Protected Characteristic	Equality Duty	What impact and or difference will the proposal have	Measures to evaluate/mitigating actions
Age	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	<p>Oral Health Improvement programmes promote good oral health across the lifecourse, with a particular focus on children and dependent older people through the Childsmile and Caring for Smiles programmes. The plan will support ongoing delivery, development and enhanced reach of these programmes.</p> <p>The plan aims to improve access to dental care for the whole population, but will have a particular focus on those who may face difficulties attending or having their oral health needs met by virtue of their age.</p>	<p>Childsmile OHI programme promotes oral health and supports access to dental care for children – evaluation measures reported regularly to national programme and monitored locally</p> <p>Caring for Smiles OHI programme supports improved oral care for dependent older people – evaluation measures reported quarterly to national programme and monitored locally</p> <p>Reorientation of Public Dental Service to focus on priority groups which will include people who require additional input as a result of age related factors – monitoring: age profile of referrals to PDS and patients</p>



			<p>receiving care</p> <p>A Child Registration Taskforce is being established to monitor and improve levels of dental registration for children in NHSB</p>
	Fostering good relations by reducing prejudice and promoting understanding	The plan supports and encourages communication and improved engagement with members of the public and those who support them	<p>Well established relationships with services and organisations supporting children, young people and older people will continue to be nurtured and opportunities sought to widen these networks to maximise support for oral health</p> <p>Feedback will be gathered from patients at all stages of the lifecourse and any difficulties relating to age will be reviewed and measures put in place to overcome these</p>
Disability	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	<p>The plan will support ongoing delivery, development and enhanced reach of the Open Wide Oral Health Improvement Programme for adults with additional care needs.</p> <p>Partnership working with those who support people with disabilities will help raise awareness of oral health and ensure their oral care is supported</p>	<p>Delivery of Open Wide will continue in collaboration with a range of organisations, services and individuals who support adults with additional care needs. The programme continues to develop and expand and this will be monitored on an ongoing basis</p>



		The plan promotes development of a more specialised Public Dental Service to deliver care to those with additional dental care needs who are unable to receive treatment in General Dental Services.	The Public Dental Service is reorienting to focus on priority groups which will include people who need more specialised dental care as a result of disabilities – monitoring: recording characteristics and needs of patients referred to and receiving care from the PDS
	Fostering good relations by reducing prejudice and promoting understanding	The plan promotes partnership working and development of pathways which will help support people with disabilities to have their oral health needs met	Collaborative working with organisations and services supporting people with disabilities such as the Community Learning Disability Team  Awareness raising of learning disabilities and other conditions/disabilities will be delivered to dental teams
Gender	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	None identified at this time	None identified at this time
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this time	None identified at this time
Gender Reassignment	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this stage	None identified at this time
	Advancing equality of opportunity	None identified at this stage	None identified at this time
	Fostering good relations by reducing prejudice and promoting understanding	The plan provides opportunities to open conversations and ensure oral health needs are being met	Feedback from patients / those engaging with OHI activities
Marriage and	Eliminating discrimination,	None identified at this stage	None identified at this time



Civil Partnership	harassment, victimisation, or any other prohibited conduct		
	Advancing equality of opportunity	None identified at this stage	None identified at this time
	Fostering good relations by reducing prejudice and promoting understanding	None identified at this stage	None identified at this time
Pregnancy and Maternity	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	None identified at this time	None identified at this time
	Fostering good relations by reducing prejudice and promoting understanding	The plan aims to ensure support is available for families with young children from early in life to promote positive oral health from the beginning	Childsmile works closely with Health Visitors and families of young children as well as expectant mothers to support oral health and access to dental care – monitoring: referrals to Childsmile and contacts with families
Race	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	Enhance communication and provision of information to patients and the public	Access to translation services and ability to request information in other languages
	Fostering good relations by reducing prejudice and promoting understanding	Expanding reach of activities to support oral health to overcome any barriers to engagement as a result of race	Ensure oral health improvement activity reaches those belonging to minority ethnic groups and that they do not face additional barriers to accessing dental care
Religion & Belief including non-belief	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	None identified at this time	None identified at this time



	Fostering good relations by reducing prejudice and promoting understanding	None identified at this time	None identified at this time
Sexual Orientation	Eliminating discrimination, harassment, victimisation, or any other prohibited conduct	None identified at this time	None identified at this time
	Advancing equality of opportunity	None identified at this time	None identified at this time
	Fostering good relations by reducing prejudice and promoting understanding	The plan provides opportunities to open conversations and ensure oral health needs are being met	Feedback from patients / those engaging with OHI activities

**Section 2: Equality and Human Rights Measurement Framework Human– Reference those identified in Stage 1 (remove those that do not apply)**

Domain	Indicator	Enhancing or Infringing	Impact and or difference will the proposal have	Measures to evaluate/mitigating actions
Education	Higher education and lifelong learning	Enhancing	<p>Improved oral health will reduce loss of learning due to absence from school due to poor oral health or to attend dental appointments. Poor oral health has been associated with reduced attainment. By improving oral health the strategic plan will support children’s learning.</p> <p>Learning opportunities are available for health and care staff whose role involves caring responsibilities to provide knowledge and skills to provide high quality oral care as part of fundamental personal care of the individuals they care for</p>	<p>Measure children accessing emergency dental services through Dental Enquiry Line</p> <p>Monitor training in oral care delivered to services/organisations/individuals who support personal care</p>
Work	Employment	Enhancing	Improved oral health will reduce absence from	Measure adults accessing





	Earnings Occupational segregation Forced Labour and trafficking*		work due to poor oral health or to attend dental appointments and potential loss of earnings associated with this.	emergency dental services through Dental Enquiry Line
Living Standards	Poverty Housing Social Care	Enhancing	Childsmile Oral Health Support Workers work with families including offering home visits and can offer signposting to other services in relation to any wider needs identified  Oral care to be actively considered in planning a care package and support required for oral care included in care plan	Childsmile – signposting to and collaboration with other agencies/services/organisations  Monitor inclusion of oral care in social care assessments and care plans
Health	Social Care Health outcomes Access to health care Mental health Reproductive and sexual health* Palliative and end of life care*	Enhancing	Improvements in oral health will have wide reaching impacts for general health and wellbeing  Maintaining and improving access to dental care is a key component of this plan Dental Enquiry Line and Emergency Dental Service will be maintained to ensure those who are not registered with a dentist continue to have prompt access to emergency dental care should an urgent problem develop  The plan promotes a focus on those at greatest risk of poor oral health, including mental health conditions, end of life care, and a range of physical/cognitive/medical conditions to ensure day to day oral care is maintained and oral health needs met	Monitoring delivery of oral health improvement programmes  Monitor levels of dental registration/engagement with dental services and use of Dental Enquiry Line/Emergency Dental Services  Monitor through reach of OHI programmes and priority group patients supported by the Public Dental Service
Justice and Personal Security	Conditions of detention Hate crime, homicides and	Enhancing	The plan supports ongoing oral health improvement activity with people engaged with	Ongoing collaboration with community justice to offer oral



	sexual/domestic abuse Criminal civil justice Restorative justice Reintegration, resettlement and rehabilitation*		the justice system	health advice and support to those engaged with these services
Participation	Political and civic participation and representation Access to services Privacy and surveillance Social and community cohesion* Family Life*	Enhancing	Improving access to dental care is a priority for this plan	Monitoring: Dental registration rates and engagement with dental services, including use of Emergency Dental Service

### Section 3: Fairer Scotland Duty

Identify changes to the strategic programme/proposal/decision to be made to reduce negative impacts on equality of outcome and or improving health inequalities	One of main purposes of the strategic plan is to promote equity and ensure those in greatest need have support to maintain and improve their oral health. No changes to the high level 12 year strategic plan have been identified, however feedback from the EHRIA has helped to shape the more detailed action plan which underpins this. The underpinning action plans will be revisited every 3 years, at which time further engagement will be undertaken.
Identify the opportunities the strategic programme/proposal/decision provides to reduce or further reduce inequalities of outcome and or improving health inequalities	The strategic plan aims to: Support continuing development and reach of the OHI team in delivery of the national oral health improvement programmes for priority groups as well as promoting good oral health across the whole population Improve availability of, and access to, dental care for all with a particular focus on supporting those who require additional dental input or support to access care in a timely manner and in the most appropriate setting Support development of the Public Dental Service to move to a more specialised service supporting patients who require additional dental input Promote and further develop inter professional/interagency working and extend reach, understanding



	<p>and awareness to better meet the oral health needs of the whole population with a particular focus on those at greatest need</p> <p>Empower individuals to maximise their own oral health, improving their general health and wellbeing and reducing complications or medical issues arising as a result of poor oral health</p>
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**Section 4: Are there any negative impacts with no identified mitigating actions? If yes, please detail these below:**

None identified

**Section 5: Equality, Human Rights & Fairer Scotland Duty Impact Assessment Recommendations**

What recommendations were identified during the impact assessment process:

Recommendation	Recommendation owned by:	Date recommendation will be implemented by	Review Date
More dentists are needed in the Borders	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Emphasise the importance of child oral health and support parents in their role taking care of their child's oral health	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Promote consistency of personnel providing dental care to an individual	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Improve clarity around the move to patient centred recall intervals	Dental Services and Oral Health Strategy Group	August 2024	September 2024 (DS&OHSG quarterly meeting)
Reduce barriers to dental registration	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Ensure support is available for	Dental Services and Oral Health	Ongoing throughout duration of	Quarterly throughout Action Plan 1



people with a learning disability to access care, including reminders, liaison with caregiver, modified appointment times	Strategy Group	plan	implementation
Build the workforce and explore opportunities for training new dental professionals	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Continue joint working with Community LD team to support meeting oral health needs of people receiving their support	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Address difficulties accessing regular dental care, especially in more rural areas	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Need for recruitment and retention of NHS dentists	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Carers should be supported to enable them to attend dental appointments	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Service changes should be clearly communicated to the public	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation
Support with day-to-day mouthcare is needed for people who may find this challenging	Dental Services and Oral Health Strategy Group	Ongoing throughout duration of plan	Quarterly throughout Action Plan 1 implementation

## Section 6: Monitoring Impact – Internal Verification of Outcomes

How will you monitor the impact this proposal affects different groups, including people with protected characteristics?

Measures developed for each action will be reported quarterly to the Dental Services and Oral Health Strategy Steering Group  
 Data will be analysed on an ongoing basis to explore any impacts on people with protected characteristics  
 We will continue to engage closely with multi-professional colleagues and constantly seek to expand these networks, gathering feedback from those



working in the community across all facets of the population and using this to help meet the oral health needs of all and tackle any inequalities identified.

Every 3 years throughout the 12 year duration of the plan in depth analysis of progress will be undertaken to inform development of the next 3 year action plan. This process will include further engagement and consideration of equalities and human rights.

### **Section 7: Procured, Tendered or Commissioned Services (SSPSED)**

Is any part of this policy/service to be carried out wholly or partly by contactors and if so, how will equality, human rights including children's rights and the Fairer Scotland duties be addressed?

Most dental care is provided by independent contractor General Dental Services. As registrants with the General Dental Council members of the dental team are bound by professional standards to "put patients' interests first", underpinned by a number of requirements including a duty to "treat patients fairly, as individuals and without discrimination" Regular communication with independent contractors is well established and these duties will be reinforced and support provided where any challenges are identified

The most important factors in maintaining and protecting oral health happen in day-to-day life, outwith the clinical dental setting. Collaboration and partnership working across the whole system will be necessary to realise our goals of supporting better oral health for the whole population and is one of the goals of this plan.

### **Section 8: Communication Plan (SSPSED)**

Please provide a summary of the communication plan which details how the information about this policy/service to young people, those with a visual or hearing sensory impairment, difficulty with reading or numbers, learning difficulties or English as a second language will be communicated.

Our strategic plan is presented in Microsoft Sway to maximise accessibility and is also available in pdf format as hard and soft copies. Translated and easy read versions will be provided to those who request them. Our team are happy to be contacted and to discuss the plan further as necessary.

Specific actions leading from the plan will be subject to their own communication plans as appropriate and will ensure that appropriate methods are



used depending on populations affected.

**Signed Off By:**

**Name Joint Executive Team**

**Date**

