



Designed to Smile

**Evaluation of a national child oral health
improvement programme**

Interim Report II

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Executive Summary

This report details the second of three stages of the evaluation of the Designed to Smile national child oral health improvement programme.

Questionnaire surveys were sent to 298 schools taking part in the programme based in South-East and North Wales. The questionnaires asked both headteachers and classroom teachers about their views on the scheme and collected details of how often toothbrushing sessions were carried out and how long each session lasted.

Overall, schools were extremely positive about their experience of taking part in the programme. They commented particularly on the children's enthusiasm to brush their teeth in class alongside their friends. They felt that the scheme fitted well with their wider aims, and were complimentary about the training and support offered by the CDS teams.

Inevitably, the results also highlight some risks to the programme. These relate primarily to compliance with the toothbrushing protocol and future participation in the programme.

The overall findings are split into a number of sub-sections.

Awareness of the scheme: Despite the scope of the programme and the investment to date, 73% of school headteachers reported that they had not heard of the scheme before being approached by the CDS teams. It reflects well on the CDS staff that participation rates are nevertheless very high amongst targeted schools.

Fit with the school and overall impact: Almost all schools reported that they felt the scheme fitted well with their school curriculum and their wider health promotion efforts. Similarly, all but a handful of schools were of the view that the programme had impacted positively on the school as a whole.

Future intentions: 90% of schools were either very or fairly sure that they would continue taking part in the scheme in the future. The remaining 10% (representing 1,520 children) were either unsure of their plans or unlikely to take part going forward, with the majority citing time constraints. It is obviously of great importance that the CDS are able to work with such schools to ensure their ongoing involvement in the programme.

Class size and age groups: The majority of classes surveyed were nursery or reception age (3-5 years old), with some Year 1 and Year 2 classes (5-7 years old). There was an average of 23 children per class, which was consistent between both South and North Wales and between age groups.

Brushing frequency: One third of schools reported that they missed at least one brushing session per week. Overall, it is estimated that children in South Wales miss a total of 3 weeks of brushing sessions over the course of the 39 week academic year, whereas children in North Wales miss 7 weeks. There are large variations by local area, however: children in Denbighshire, for instance, miss around 10 weeks of sessions. Non-compliance with daily brushing is identified as the most important finding of this evaluation. From both a clinical and cost-effectiveness perspective, it is crucial that as the programme matures, all schools are encouraged to work towards daily brushing.

Brushing duration: On average, brushing took around 11 minutes per session. Crucially, schools that brushed for more than 15 minutes were more than twice as likely as others to miss out sessions each week, or to express doubts about their involvement in the scheme going forward. Longer brushing times were associated with larger class sizes to some extent, but teachers reported that a range of factors, including manpower and classroom facilities, were influencing factors.

Satisfaction with training and support: All but a handful of schools were happy with both the length of their training session and the amount of information they had received. Likewise, most schools felt that they received adequate day-to-day support from the CDS staff.

Satisfaction with brushing materials: Satisfaction with toothbrushes, toothpaste, Brush-Buses and other materials was generally high. There were some reports of problems cleaning Brush-Buses and occasions where the re-supply of materials had caused delays in the scheme. Perhaps most pressingly, there still appear to be problems in some schools with labelling toothbrushes.

It is strongly recommended that the CDS amend their yearly school feedback forms in order to collect reliable information on brushing frequency, brushing duration and future

intention to participate in the programme. This data would allow each team to focus their resources on the schools in need of the most support in their local area.

Introduction

(1) BACKGROUND

In March 2008, the Welsh Assembly Government laid out plans for the commissioning and implementation of a school-based oral health improvement programme called “Designed to Smile”.

The initial aim was to establish a supervised toothbrushing scheme in two Super Pilot areas involving nurseries and schools in North and South East Wales. This targeted 3-5 year-olds in nursery, reception and Year 1 classes. The pilot areas in South Wales comprised Cardiff, Vale of Glamorgan, Bridgend, Rhondda Cynon Taf and Merthyr Tydfil. The North Wales pilot involved, Denbighshire, Conwy, Flintshire, Anglesey and Gwynedd. As well as providing a mixture of urban and rural localities, the pilot areas also cover almost a third of the Welsh population.

The Community Dental Service (CDS) has been responsible for organising, coordinating and delivering the programme, including the production of resources, translation of written materials, the sourcing of materials and recruitment of new staff members to the project.

In both South and North Wales, the CDS has extensive experience of providing oral health promotion programmes and, through work with the Fissure Sealant Programme and other toothbrushing schemes, has existing relationships with schools in the targeted areas.

Each local team was provided with a priority list of high-need schools for their area, produced by The Welsh Oral Health Information Unit (WOHIU) on the basis of deprivation and epidemiological survey data on oral health. In South Wales, Designed to Smile staff began to approach schools to take part in the scheme in the autumn school term of 2008, while schools in North Wales were approached early in 2009.

(2) EVALUATION PROCESS

The Welsh Assembly Government has contracted the Dental Public Health Unit at Cardiff University to carry out a formal evaluation of the Designed to Smile programme. Figure 1 shows the three stages of the evaluation project, with the current interim report highlighted in yellow.

Stage	Subject	Method	Report date
Stage 1 ✓	CDS staff	Face-to-face interviews with staff in South Wales and North Wales	December 2009
Stage 2	School staff	Questionnaire survey sent out to all participating schools in South Wales and North Wales	December 2010
Stage 3	Parents of children	Face-to-face interviews with parents in South Wales and North Wales	December 2011

We have previously reported on the perspective of the CDS staff on the implementation of the toothbrushing programme. The current report describes the views of teaching staff in schools taking part in the project, determined via a postal questionnaire.

Specifically, this element of the evaluation aimed to investigate:

- How well schools felt the programme fitted with their curriculum and other health promotion programmes
- The overall impact of the scheme on the school
- How likely they were to continue taking part in the scheme in the future
- How often they brushed and how long each session lasted
- How happy they were with the toothbrushing materials provided to them.

A separate quantitative analysis of the Designed to Smile Programme is being undertaken by the Wales Oral Health Information Unit.

Methods

(1) SCHOOLS

- The Community Dental Service (CDS) provided the names and addresses of the 298 schools that had begun the toothbrushing scheme in the two Super Pilot areas (162 in South-East Wales and 134 in North Wales). These 298 schools comprised the survey sample.

(2) QUESTIONNAIRE

- Two questionnaires were developed: one for completion by the school's headteacher; and a second for completion by a classroom teacher who supervised the toothbrushing programme.
- After an initial set of questions were drawn up, draft copies were sent to CDS staff for feedback and comment. Amended versions of the questionnaires were then sent to two participating schools in order to pilot them.
- The final versions of both questionnaires are shown in Appendix A, with the covering letters shown in Appendix B.

(3) MAILOUT

- The finalised questionnaires were sent out to all 298 schools in May 2010, along with an explanatory covering letter and a pre-paid, pre-addressed return envelope. Both the questionnaires and the covering letter were provided bilingually.
- Schools were encouraged to be honest with their opinions, which they were assured would remain confidential.
- Three weeks after the initial mailout, as responses began to slow, a second mailout was sent to all schools who had failed to return the questionnaires, with an updated covering letter and return envelope.
- Finally, four weeks after the second mailout, the remaining schools were contacted by telephone in order to confirm their address, obtain a named contact and encourage them to complete and return the questionnaires. If required, these schools were then sent a third copy of the survey.

Findings

- The findings are presented in three separate sections:
 - The **response rate** gives details of the number and type of schools that responded to the questionnaire surveys.
 - The **basic results** provide a frequency analysis for each of the questions asked, with results broken down by Super Pilot region.
 - The **further analysis** section looks at the relationship between factors such as class size, age groups, brushing frequency and brushing duration, to give a fuller interpretation of the findings.

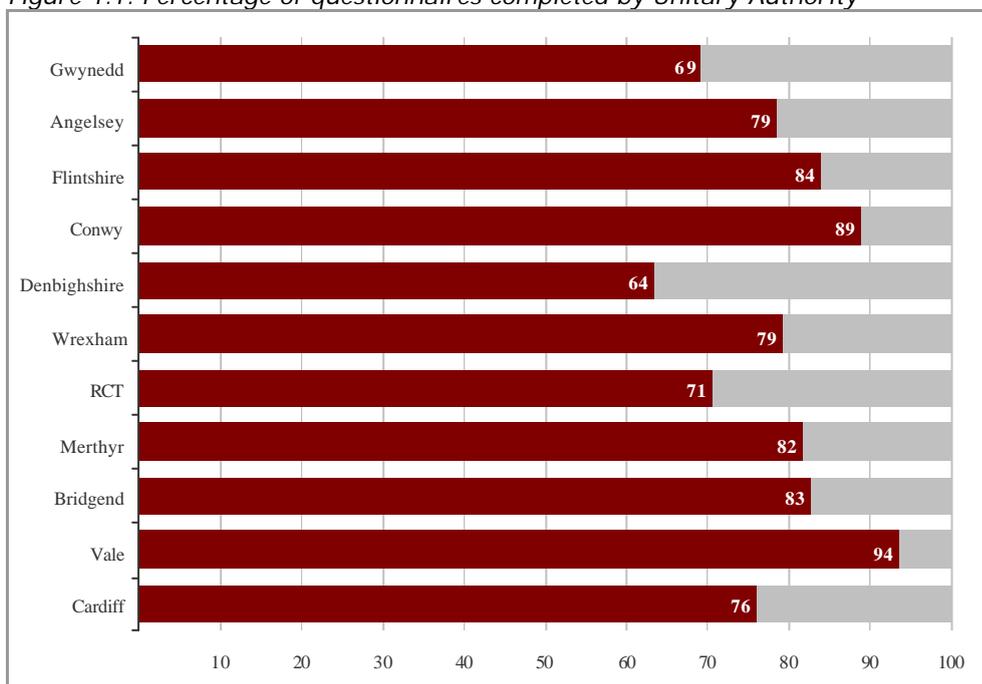
(1) RESPONSE RATE

- Of the 298 schools whose names and addresses were provided by the CDS, 12 had either withdrawn from the scheme or merged with other schools, leaving a final sample of 286 schools.
- In all, 222 schools responded to the questionnaire, representing 77.6% of those sent a questionnaire. On occasion, only one of the two questionnaires was completed, or individual questions were missed out. For that reason, the baseline totals occasionally deviate from the total of 222.
- Table 1.1 shows that the response rate did not differ significantly between South Wales and North Wales overall, but there were variations by Unitary Authority as shown in Figure 1.1.

Table 1.1: Response rate to the postal questionnaire

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Yes	77.6	222	78.2	118	77.0	104
No	22.4	64	21.8	33	23.0	31
Total	100.0	286	100.0	151	100.0	135

Figure 1.1: Percentage of questionnaires completed by Unitary Authority



(2) BASIC RESULTS

(I) HEADTEACHER QUESTIONNAIRE

- The first of the two questionnaires was filled out by the school headteacher (see Appendix A1).
- These questionnaires were intended to provide an overview of the school's feelings about their involvement in the scheme and specifically asked the headteacher about:
 - their prior knowledge of Designed to Smile
 - the way in which they felt the scheme fitted with their school plans
 - the overall impact of the scheme on the school
 - Their inclination to continue taking part in the programme in the future.

Awareness of the scheme

- Headteachers were asked whether or not they had heard of the Designed to Smile programme before being contacted by the CDS team.

Table 2.1: Responses to the question: 'Had you heard of the Designed to Smile scheme before being contacted by the CDS team?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Yes	26.9	58	34.2	40	18.2	18
No	73.1	158	65.8	77	81.8	81
Total	100.0	216	100.0	117	100.0	99

- Just over a quarter of the school headteachers (27%) were aware of the programme before they were contacted. Headteachers in South Wales were almost twice as likely to have heard of the scheme as their North Wales counterparts (34% v. 18%).

COMMENTARY

Given the scale of the Designed to Smile programme and the level of investment during the initial months, it is somewhat disappointing that so few headteachers had heard of the scheme before being contacted.

The problem was more acute in North Wales, where less than one in five teachers had heard of the scheme. Even in South Wales, where awareness was twice as high, the majority of headteachers knew nothing about the programme.

These findings are consistent with what CDS staff reported in previous interviews: they felt as if they were 'cold calling' schools, and would have preferred that letters had been sent to eligible schools at Assembly or LEA level in order to underline the importance of the scheme.

Nevertheless, take-up for the scheme has been very good with only a small minority of eligible schools declining to take part. Such a record reflects well on the hard work and enthusiasm of the CDS staff.

Fit with the school

- Headteachers were asked how well they thought the toothbrushing scheme fitted with their curriculum and any other health promotion schemes.

Table 2.2: Answers to the question: 'How well do you feel the Designed to Smile scheme fits with your other health promotion schemes?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Very well	54.0	116	62.4	73	43.9	43
Fairly well	37.2	80	31.6	37	43.9	43
Not sure/no opinion	4.2	9	1.7	2	7.1	7
Not particularly well	3.7	8	2.6	3	5.1	5
Not well at all	0.9	2	1.7	2	0.0	0
Total	100.0	215	100.0	117	100.0	98

Table 2.3: Answers to the question: 'How well do you feel the Designed to Smile scheme fits with your other health promotion schemes?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Very well	67.4	145	74.4	87	59.2	43
Fairly well	28.4	61	23.9	28	33.7	43
Not sure/no opinion	2.8	6	1.7	2	4.1	7
Not particularly well	1.4	3	0.0	0	3.1	5
Not well at all	0.0	0	0.0	0	0.0	0
Total	100.0	215	100.0	117	100.0	98

- Only 10 schools (5%: 5 North Wales, 5 South Wales) of the 215 who responded to this question felt that the toothbrushing programme did not fit well with their school curriculum. 9 schools (4%: 7 North Wales, 2 South Wales) were unsure, but the vast majority (91%) felt that the scheme fitted either very well or fairly well with their syllabus.
- Likewise, the majority of schools (96%) thought that the toothbrushing fitted well with their existing health promotion schemes.

“ ” Initiatives like this one are great for schools like us and they fit in really well with our healthy living agenda

“ ” The programme fits nicely with the independent learning we try and promote – they’re learning how to take responsibility for looking after their teeth

Overall impact on the school

- Views on the impact of the Designed to Smile toothbrushing programme on the school, as a whole were also sought.

Table 2.4: Answers to the question ‘Overall, what sort of an impact do you think the Designed to Smile scheme has had on the school?’

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Very positive	55.8	120	66.7	78	42.9	41
Fairly positive	36.3	78	29.1	34	44.9	44
Not sure/no opinion	5.6	12	3.4	4	8.2	8
Fairly negative	1.9	4	0.0	0	4.1	4
Very negative	0.5	1	0.9	1	0.0	0
Total	100.0	215	100.0	117	100.0	98

- Only 5 schools (2%: 4 North Wales, 1 South Wales) felt that their involvement with the programme had negatively impacted on the school, while 12 schools (6%: 8 North Wales, 4 South Wales) were unsure about the scheme’s impact.

“ ” *It’s been a very positive experience – both the children and staff have learned a lot and are used to the routine of brushing after lunch. The children actually remind us about the brushing if we ever forget!*

“ ” *It’s great that we know that these children are now brushing their teeth at least once a day – and hopefully more, with their home packs. I’m pretty sure that a lot of them were not brushing their teeth at all before we started doing this.*

COMMENTARY

When we spoke to CDS staff about the difficulties of implementing the Designed to Smile programme, they told us that one of their biggest challenges was to convince schools that a daily toothbrushing session was not just an ‘extra chore’ in an already busy school schedule, but rather an initiative which could form part of the curriculum and fit in with their wider aim to promote good health.

These findings suggest that they have been largely successful with that goal: all but a handful of schools felt that the toothbrushing programme fitted well with their existing curriculum and health-promotion schemes.

Moreover, the vast majority of schools were happy that the scheme was having a positive impact on their school as a whole. Headteachers and teachers alike commented on the enthusiasm that the children displayed for brushing with their friends.

Future intentions

- The intentions of headteachers with regards to the future participation of their school in the Designed to Smile programme were also investigated.

Table 2.5: Answers to the question 'How likely is it that your school will continue to run the toothbrushing programme in the next academic year?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Very likely	73.0	157	82.1	96	62.2	61
Fairly likely	17.7	38	12.8	15	23.5	23
Not sure	8.4	18	4.3	5	13.3	13
Fairly unlikely	0.5	1	0.0	0	1.0	1
Very unlikely	0.5	1	0.9	1	0.0	0
Total	100.0	215	100.0	117	100.0	98

- Two schools indicated that they were unlikely to continue with the scheme in the future. 18 schools (8%: 13 North Wales, 5 South Wales) were unsure about whether they'd want to take part going forward, with time constraints the most common reason provided. The rest (91%) were either fairly likely or very likely to continue their involvement.

(II) CLASSROOM TEACHER QUESTIONNAIRE

- The second of the two questionnaires was filled out by a classroom teacher who supervised the toothbrushing (see Appendix A2).
- The questionnaire was intended to provide some detail on the nature of the toothbrushing programme and specifically asked the class teacher about:
 - the number of children in the class and their age
 - the number of times per week that toothbrushing was carried out
 - the length of time it took to carry out the brushing
 - how happy the teachers were with training, guidelines and support
 - and how happy they were with various toothbrushing materials.

Age groups

- Many schools have multiple year groups taking part in the scheme, but for the purpose of the questionnaire, they were asked to answer the questions on behalf of just one of their classes.
- Teachers were asked about the age group of the class that they supervised.

Table 2.6: Answers to the question 'What age group are the children in your classroom?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Nursery/reception	72.8	158	77.1	91	67.7	67
Year 1/Year 2	22.4	48	16.1	19	29.3	29
Year 3/older	2.3	5	1.7	2	3.0	3
Special Ed. Needs	2.8	6	5.1	6	0.0	0
Total	100.0	217	100.0	118	100.0	99

- Most classrooms (73%) were nursery or reception aged children (3-5 years old), while around a quarter were Year 1 or Year 2 children (5-7 years old). In a few areas where a toothbrushing programme has been established for a number of years, classes of Year 3 children (or older) were taking part. In South Wales, 6 Special Educational Needs schools responded, where children can be aged from 3-18 years old.

Class size

- The number of children in each classroom was also collected.

Table 2.7: Answers to the question 'How many children are there in your class, altogether?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Average number/class	23.3		23.8		22.7	
<20 children	28.2	61	26.5	31	30.3	30
20-30 children	58.3	126	56.4	66	60.6	60
>30 children	13.4	29	17.1	20	9.1	9
Total	100.0	216	100.0	117	100.0	99

- The majority of schools (58%) had between 20 and 30 children in a class. While schools in South Wales are more likely to have classes with over 30 children (17.1% vs. 9.1%), the average number of children per class is around 23 in both areas.

Frequency of brushing

- Schools were asked how many times, in a typical week, they carried out the toothbrushing programme in their classroom.

Table 2.8: Answers to the question 'On average, how many times do you carry out the toothbrushing programme each week?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Average sessions/week	4.4		4.6		4.1	
< 5 times/ week	33.2	72	25.4	30	42.4	42
5 times/week	66.8	165	74.6	88	57.6	57
Total	100.0	217	100.0	118	100.0	99

- Around a third of all schools (33%) reported that they typically missed at least one session each week. Schools in North Wales were more likely to miss a session than those in South Wales (42% vs. 25%).

Duration of each brushing session

- Similarly, schools were asked how long each brushing session lasted each day.

Table 2.9 Answers to the question 'On average, how long does it take to carry out the toothbrushing programme each day?'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Average minutes/session	11.3		12.0		10.4	
<10 minutes	28.2	61	26.5	31	30.3	30
10-15 minutes	58.3	126	56.4	66	60.6	60
>15 minutes	13.4	29	17.1	20	9.1	9
Total	100.0	216	100.0	117	100.0	99

- The majority of schools (58%) reported that toothbrushing sessions lasted between 10 and 15 minutes each day, with the average time being 11.3 minutes. Schools in South Wales took 1.6 minutes longer on average to brush than those in North Wales.

Satisfaction with training

- Teachers were asked how happy they had been with the training session they had received from the CDS staff before the school had commenced the programme.

Table 2.10: Answers to the question 'With regard to the training that you received from the Designed to Smile team, would you say the amount of information you were given was...'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Too much	0.5	1	0.8	1	0.0	0
Just right	98.6	213	98.3	116	99.0	97
Not enough	0.9	2	0.8	1	1.0	1
Total	100.0	216	100.0	118	100.0	98

Table 2.11: Answers to the question 'And would you say that training session...'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Lasted too long	3.7	8	1.7	2	6.1	6
Lasted right amount of time	95.4	206	97.4	114	92.9	92
Didn't last long enough	0.9	2	0.9	1	1.0	1
Total	100.0	216	100.0	117	100.0	99

- The vast majority of schools were happy with both the length of the training sessions and the amount of information that they had been given by the CDS staff: 99% thought that they had received just the right amount of information, while 95% thought the training session had lasted just the right amount of time.

Satisfaction with day-to-day support

- Enquiry was also made as to how happy teachers were with the level of day-to-day support offered by the teams.

Table 2.12: Answers to the question 'Would you say that the level of day-to-day support that you receive from the Designed to Smile team is...'

	Overall		South Wales		North Wales	
	Percent	N	Percent	N	Percent	N
Too much	2.3	5	1.7	2	3.0	3
Just right	92.6	201	94.9	112	89.9	89
Not enough	5.1	11	3.4	4	7.1	7
Total	100.0	217	100.0	118	100.0	99

- 11 schools (5%) felt that they didn't receive enough day-to-day support from the teams, but again, the vast majority (93%) were happy with the current arrangements.

Satisfaction with materials

- In a series of questions school teachers were asked to rate the quality of the various toothbrushing materials that they had been provided by the CDS teams. Not all schools receive a trolley, gloves or marker pens, so the percentages reported exclude those who chose the ‘not applicable’ answer option.

Table 2.13: Answers to the question: ‘How would you rate the quality of the following toothbrushing materials provided to you by the Designed to Smile teams?’

	Very good		Fairly good		Okay		Fairly poor		Very poor	
	Percent	N	Percent	N	Percent	N	Percent	N	Percent	N
Toothbrushes	69.9	151	17.6	38	10.2	22	2.3	5	0.0	0
Toothpaste	79.2	171	15.3	33	5.1	11	0.5	1	0.0	0
Brush-Buses	72.0	154	17.8	38	7.0	15	2.3	5	0.9	2
Trolleys	68.9	72	20.0	18	5.6	5	4.4	4	1.1	4
Gloves	73.7	115	12.8	20	10.9	17	1.9	3	0.6	3
Marker pens	50.8	65	12.5	16	19.5	25	5.5	7	11.7	15

- Most schools thought that the three main materials – the toothbrushes, toothpaste and Brush-buses – were either very or fairly good. The least satisfactory piece of equipment was the marker pens provided to label toothbrushes: over a third (39%) of schools thought they were either ‘okay’ or poor.

(3) FURTHER ANALYSIS

Future intentions

- Table 3.1 shows a breakdown of schools' intentions to continue with the scheme alongside the *total* number of children brushing in the school as a whole. Three of the answer options – unsure, fairly unlikely and very unlikely – have been collapsed into one category, 'unsure/unlikely' for the purposes of the analysis.

Table 3.1: Future intentions of each school and the total number of children taking part in the scheme

	Number of schools	Total number of children brushing	Percentage of all children brushing
Very likely	157	11,535	74.3%
Fairly likely	38	2,476	15.9%
Unsure/unlikely	20	1,520	9.8%
Total	215	15,531	100.0%

- The data shows that three-quarters of the children brushing in the sample were attending schools that were very likely to continue brushing in to the future; a further 16% were at schools that were fairly likely to continue. 20 schools were unsure about their future involvement, or unlikely to continue, representing just over 1,500 children and 10% of all children brushing.
- Among those schools that reported that they were unsure about their future involvement, the majority of the headteacher comments referred to time constraints.

“ ” The importance of the aims of the scheme cannot be disputed, but with so many demands on staff, curriculum time and other priorities it is a difficult decision as to what stays in and what is left out of what we do

“ ” A nursery child is only in school for two hours and as we cannot brush teeth within 30 minutes of milk and fruit, it can cause a huge timetable problem

“ ” I'm just not sure we can justify spending so long doing this every day, when we're losing so much teaching time after lunch

COMMENTARY

The long-term viability and effectiveness of the Designed to Smile scheme relies not only on eligible schools agreeing to take part, but on their maintaining that involvement on a year-to-year basis.

Reassuringly, these results suggest that the vast majority of schools in the Super Pilot areas will continue to take part in the future. There is, however, a minority (10%) who are uncertain about their future participation.

Although a minority, these particular 20 schools nonetheless represent more than 1,500 children receiving a daily fluoride application. It goes without saying the CDS – particularly in North Wales, where 14 of the schools are based – need to work closely with schools to minimise the risk of any such loss. The analysis section of the results looks at factors which are related to future intentions.

The latest data reported by the WOHIU shows that as of March 2010, 39 schools in Super Pilot areas have withdrawn since the scheme's inception.

Age group

- Table 3.2 shows the interaction between the different year groups and the number of children in a class, the duration and frequency of brushing and the school's intention to continue the scheme in the future. Percentage figures are not reported for Year 3/older or Special Educational Needs schools due to the low baseline numbers involved.

Table 3.2: Class age group and its effect on class size and brushing outcomes

	Average minutes per brushing session	Average number of children per classroom	Percentage brushing 5 times per week	Percentage unsure/unlikely to continue
Nursery/reception	11.4	23.9	67.7	8.7
Year 1/Year 2	11.7	23.3	60.4	8.7
Year 3/older	7.8	17.2	-	-
Special Ed. Needs	6.5	11.5	-	-
Overall	11.3	23.3	66.8	8.7

- There was little difference in class size or brushing time between nursery groups and Year 1 or Year 2 classes. Schools commented that while nursery-aged children require greater supervision while brushing, this is usually offset by an increased number of classroom assistants present.
- Special Educational Needs schools tend to have much fewer children per class and even greater supervision, so it is perhaps not surprising that they typically take less time per brushing session and are generally able to brush every day.

Class size

- Table 3.3 shows the interaction between the number of children in a classroom and the duration and frequency of brushing, as well as the school's intention to continue the scheme in the future.

Table 3.3: Class size and its effect on brushing outcomes

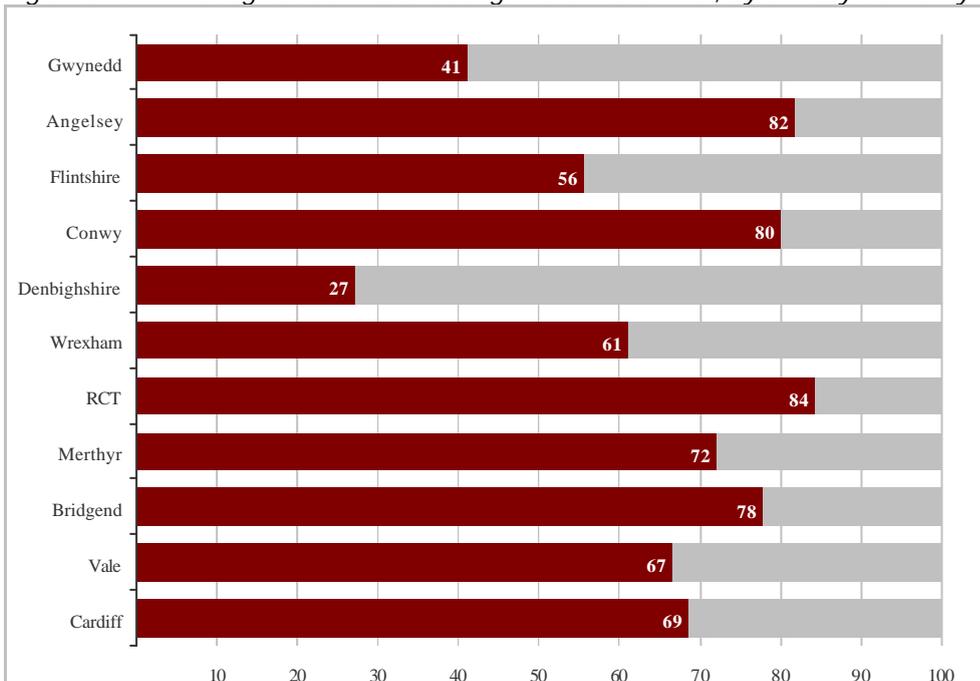
	Average minutes per brushing session	Average number of children per classroom	Percentage brushing 5 times per week	Percentage unsure/unlikely to continue
<20 children	10.2	12.4	59.0	8.9
20-30 children	11.2	25.4	70.6	7.4
>30 children	13.9	37.1	65.5	14.3
Overall	11.3	23.3	66.7	8.7

- There is a relationship between class size and brushing time: classes with over 30 children take, on average 3.7 minutes more to brush each day than classes with less than 20 children. With regard to brushing frequency however, smaller classes are actually somewhat less likely to brush five times a week than the average.
- Schools that had more than 30 children in their classroom were almost twice as likely to report being unsure about their future participation in the scheme compared to the average (14.3% vs. 8.7%)

Brushing frequency

- Figure 3.1 shows the percentage of schools in each local authority that carry out the toothbrushing scheme every day (five times per week).

Figure 3.1: Percentage of schools brushing five times a week, by Unitary Authority



- It is clear that there are wide variations in compliance between local areas. Within North Wales for instance, daily brushing was only achieved in 27% and 41% of schools in Denbighshire and Gwynedd respectively, whereas daily brushing was more commonplace in schools in Anglesey (82%) and Conwy (80%).
- Table 3.4 gives a detailed breakdown of the number of toothbrushing sessions missed in each local area (within the two Super Pilot regions), taking into consideration both the reported brushing frequency and the total number of children brushing in each school.
- The ‘maximum possible weekly brushing-sessions’ figure is calculated by multiplying the total number of children brushing in an area by five; whilst the reported weekly-brushing sessions is calculated on a school-by-school basis by multiplying the number of reported toothbrushing sessions each week by the number of children in each school. The efficiency measure statistic is simply a calculation of how many possible sessions are actually carried out in each area.

Table 3.4: Brushing efficiency and sessions missed by local area

Area	Total number of schools brushing	Total number of children brushing	Maximum possible weekly brushing sessions	Reported weekly brushing sessions	Reported weekly brushing sessions per child	Efficiency measure	Average number of days missed each school year per child
Cardiff	35	3,531	17,655	16,239	4.60	92.0%	15.6
Vale	15	1,108	5,540	4,782	4.32	86.3%	26.7
Bridgend	18	1,504	7,520	6,960	4.63	92.6%	14.5
Merthyr	18	1,226	6,130	5,667	4.62	92.4%	14.7
RCT	32	1,847	9,235	8,806	4.77	95.4%	9.1
South Wales	118	9,216	46,080	42,454	4.61	92.1%	15.3
Wrexham	18	1,777	8,885	7,059	3.97	79.4%	40.1
Denbighshire	11	727	3,635	2,665	3.67	73.3%	52.0
Conwy	15	986	4,930	4,453	4.52	90.3%	18.9
Flintshire	27	1,814	9,070	7,328	4.04	80.8%	37.5
Anglesey	11	351	1,755	1,679	4.78	95.7%	8.4
Gwynedd	17	626	3,130	2,517	4.02	80.4%	38.2
North Wales	99	6,281	31,405	25,701	4.09	81.8%	35.4
Total	217	15,497	77,485	68,155	4.40	88.0%	23.5

- The figures show that an average child in the surveyed schools will miss 23.5 days per school year, or just less than 5 weeks out of a 39 week academic year. This represents 88% of all possible sessions. The number of days missed depends heavily on the area, however: children in North Wales can expect to miss about 7 weeks out of 39, while those in South Wales will typically miss about 3 weeks a year. In Denbighshire, where compliance was the lowest reported, children taking part in the scheme will miss an estimated 10 out of 39 weeks, over a quarter of all possible sessions.

COMMENTARY

The percentage of schools that brush fewer than five times a week (33%) is surprisingly high. The problem is particularly prevalent in North Wales, where almost half of all schools miss at least one session a week.

Further analysis shows that on average, children in South Wales are missing around 15 days (3 weeks) each school year, while children in North Wales are missing 35 days (7 weeks) out of the 39 week academic calendar.

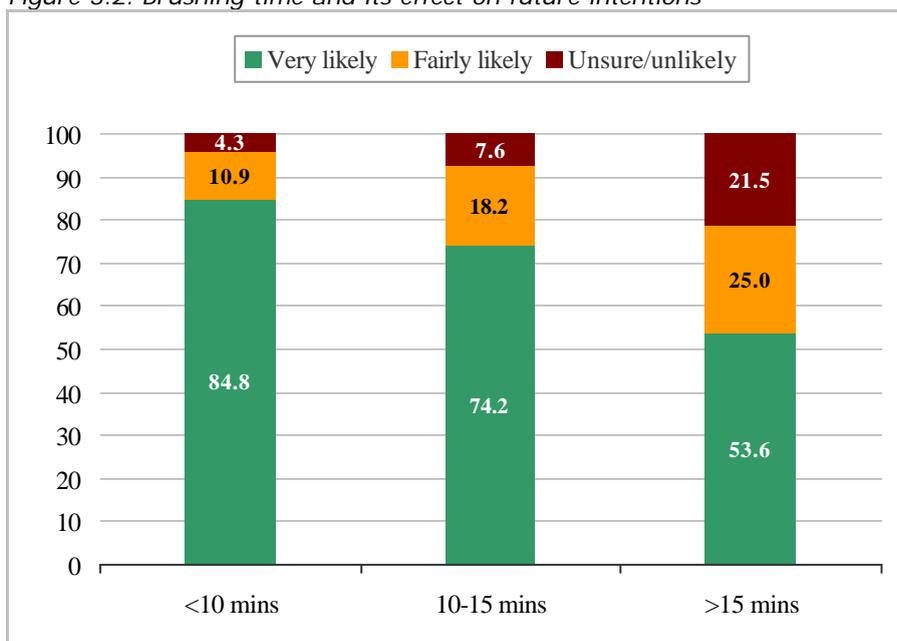
CDS staff understandably report that it is difficult to strike a balance between insisting that schools carry out toothbrushing every day and allowing schools enough flexibility that they won't feel the need to withdraw from the scheme altogether. Nevertheless, from both a clinical and cost-effectiveness point of view, this is an area of great importance.

These data are based on the brushing frequency reported by teachers. They differ from the compliance figures reported by the CDS teams in the data fed back in the process analysis being conducted by WOHIU. It is important is that the CDS collect accurate data about which schools are regularly missing brushing sessions, in order that they can work with them to encourage daily sessions.

Brushing time

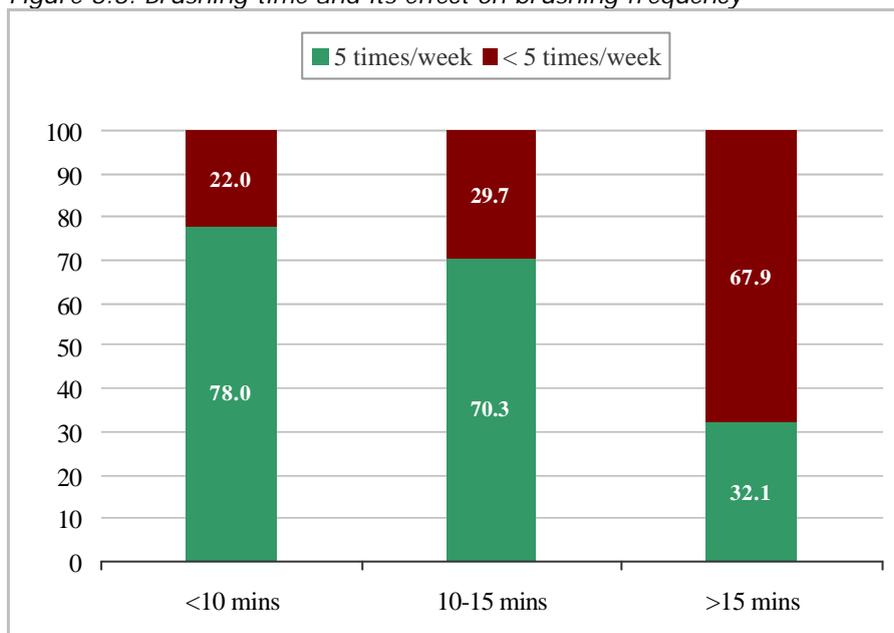
- Figure 3.2 shows the influence of brushing time on how likely it is that headteachers feel that their school will continue taking part in the programme. Schools are divided in to three categories: those who report that brushing takes under 10 minutes, those who report that it takes between 10 and 15 minutes, and those who say it takes over 15 minutes per session.

Figure 3.2: Brushing time and its effect on future intentions



- The 29 schools who reported that their brushing sessions took over 15 minutes were more than twice as likely as the average (21.5% vs. 9.2%) to be uncertain about their involvement in the programme. At the opposite end of the spectrum, 85% of schools where brushing sessions lasted less than 10 minutes reported that they were very likely to continue taking part in the scheme.
- Figure 3.3 shows the effect of brushing time on the frequency of brushing sessions in an average week. Again, schools were separated into three categories: those who report that brushing takes under 10 minutes, those who report that it takes between 10 and 15 minutes, and those who say it takes over 15 minutes per session.

Figure 3.3: Brushing time and its effect on brushing frequency



- The effect of brushing time on brushing frequency is particularly notable. Again, the 29 schools who reported brushing for more than 15 minutes showed poorer outcomes than the average. In this case, over two thirds of the schools (68%) reported missing at least one toothbrushing session each week, compared to around a fifth (22%) of schools that brushed for less than 10 minutes.

“ ” I think I’ll find this easier next term when I have a classroom assistant to help me – at the moment, cleaning and preparing the brushes and buses just takes up too much teaching time

“ ” It’s just finding time to organise the buses, and to tidy away all the things at the end – so yes, we do occasionally have to miss some days out, or we’d never get everything else done!

COMMENTARY

One apparent predictor for both brushing frequency and future participation is the length of time it takes to carry out each brushing session. The data clearly suggest that schools who take over fifteen minutes to brush are far more likely to skip sessions, or to be unsure about whether they want to continue taking part in the programme.

Longer brushing time is related to larger class sizes to some extent, but it appears that a number of factors play a part in determining how long sessions last – teachers' comments referred to manpower and classroom facilities, for instance.

Again, if the CDS are able to accurately identify which schools are taking longer than average to brush, there is scope for providing extra support or training to those who need it. Moreover, it may be possible to learn from schools that are able to complete brushing sessions more quickly than others.

Brushing materials

- While the data suggested that schools were, overall, very happy with the toothbrushing materials provided to them, they did also attract a number of comments.
- The Brush-Buses, for instance, attracted several comments in the open answer section. A number of schools complained that, because the lid is not detachable, they had trouble cleaning inside the bus itself.

“ ” The Brush-Bus is extremely difficult to clean – unless we have some sort of narrow brush to get in between the holes, it's almost impossible to stop from getting dirty

“ ” The Brush-Bus takes a long time to clean each week – it would be very helpful to have a removable lid. That would cut the cleaning time in half!

- Most of the problems reported were due to labelling the brushes, however. Some schools have received brushes with symbols which they can use to match with pictures on the bus, but it appears that many schools are still using marker pens to create labels. Teachers complained that the names tend to rub off the brushes, causing the potential for misuse of toothbrushes...

“ ” We've tried and tested lots of ways to keep the names on the toothbrushes, but no pens seem to work

- Some schools felt that they would prefer to receive materials on a regular (i.e., monthly) basis, rather than having to request new materials each time they ran out of stock. Most, however, were happy with their current arrangements. In a small number of cases, schools reported that they'd had to wait a week or two to have new materials delivered and missed out on sessions in the interim.

“ ” When we run out of toothbrushes, toothpaste, etc., there’s sometimes a long delay before we get any replacements

“ ” We sometimes have a shortage of toothpaste – if possible, it would be great to have a monthly monitoring of resources.

COMMENTARY

It appears that, on the whole, the toothbrushing materials have been well received by schools.

Three fairly common problems were reported, however:

Firstly, the Brush-Buses appear to cause some schools problems in terms of cleaning, because of the design and the absence of a detachable roof. While replacing existing Brush-Buses is unlikely to be feasible, it may be worth investigating the possibility of a slight amendment for schools in newer areas of the programme. – particularly given the link between brushing/cleaning time and compliance.

Secondly, labelling of the toothbrushes has caused some difficulty. It appears that some schools have received brushes with symbols, for matching with the Brush-Bus, but others are still relying on marker pens which can rub off quite easily. With the potential, however small, for toothbrushes to get mixed up, it is important to roll out the newer brushes to all areas.

Lastly, there were a handful of schools who felt that they hadn’t received toothpaste or new brushes in time, so had missed some sessions either during or at the beginning of the school term. While this has only happened rarely, it is obviously important to maintain good communication with each school to ensure that no time is lost due to a shortage of materials.

Conclusions

The overall impression from the survey of participating schools is a very positive one. It is worth re-iterating that CDS staff have done an excellent job of recruiting targeted schools to the scheme, particularly in light of the finding that the majority of schools were unaware of the programme's existence before being approached by the teams. The results suggest that they have done a similarly excellent job in promoting the scheme as being compatible with schools' curriculum and wider health schemes.

The vast majority of schools were extremely happy with the training sessions and practical support that they received from their link workers. There were a number of very positive comments about the scheme's impact on the children taking part, and the level of enthusiasm that they showed for brushing their teeth along with their friends.

The real challenge for the CDS lies in ensuring that all of the participating schools continue to take part in the scheme and are able to find time to carry out the toothbrushing sessions every day. The results suggest that around 10% of schools (representing over 1,500 children) were unsure about whether or not they would maintain their involvement with Designed to Smile in the future. Furthermore, around a third of schools reported that they currently missed at least one toothbrushing session every week. In some areas, as much as 10 weeks of toothbrushing per academic year is being missed out on. It is obviously important, for both the clinical and cost effectiveness of the scheme, that schools are encouraged to work towards daily brushing.

Both of these outcomes appear to be strongly related to brushing time – the length of time that it takes the classroom teacher to carry out the toothbrushing and tidy away the materials. The data shows that schools that take over fifteen minutes a day to carry out the programme are far more likely to miss out sessions and be unsure about whether they can maintain the programme in their school. To some extent, the inverse is true – schools where brushing takes under ten minutes a day are far more likely to brush every day and be happy to continue the programme.

There is some evidence that brushing time is related to class size: schools with over 30 children in a class reported that their sessions lasted longer than the average. It is worth mentioning, however, that there are classrooms with high numbers of children who carry out the sessions in less than ten minutes, while other schools with very small class sizes take much longer to brush. Comments from teachers suggest a range of factors are important, including the number and relative experience of teaching assistants in each class and classroom resources. The implication is that improvements in brushing time may even be achieved by passing on simple lessons learned in classrooms where brushing time is relatively short.

It is obviously not feasible from a resource-allocation perspective for Support Workers to visit every school on a weekly or fortnightly basis, nor is it possible to speak in depth with every school headteacher at the end of a school year. The key for the CDS is in identifying which schools need more support than others.

The results of the current survey cannot be disseminated at a school-level because of the anonymity promised to all schools taking part. It would, however, be of great benefit if the CDS were able to amend or add to their current yearly feedback forms in order to collect three important pieces of information about each school: the length of time it takes them to carry out brushing, the number of times they carry out brushing in a typical week and their inclination to continue with the scheme in the future. That information alone would allow each team to target their resources at schools that need the most day-to-day help, and are the most likely to withdraw from the scheme.

On the whole, schools were happy with the toothpaste, toothbrushes, Brush-Buses and other materials provided to them. There appears however to be variation in how toothbrushes are labelled: while some schools have been given newer brushes with symbols to match with the Brush-Bus, others are still relying on marker pens to add children's names. Given the potential for cross-infection posed by names rubbing off the brushes, it is important to develop a consistent, nationwide approach.

While the current report is limited in scope to schools in Super Pilot areas in South Wales and North Wales, it is hoped that both the successes and the risks reported here should prove informative for CDS teams in the newer areas of the programme.

Acknowledgements

The co-operation of the school staff who took the time to complete and send back the questionnaires, as well as the CDS staff for providing details of the participating schools and feedback on the questionnaires, are both gratefully acknowledged.

This evaluation was funded by, and conducted on behalf of the Welsh Assembly Government.

Appendix

Appendix A1: Headteacher questionnaire (bilingual)

Designed to Smile Questionnaire

FOR HEADTEACHER TO COMPLETE

General

- 1** Had you heard of the Designed to Smile programme before you were contacted by the team?

Tick one box only

Yes	<input type="checkbox"/>	1
No	<input type="checkbox"/>	2

Designed to Smile and your school

- 2** How well do you feel the Designed to Smile programme fits in with your school curriculum as a whole?

Tick one box only

Very well	<input type="checkbox"/>	1
Fairly well	<input type="checkbox"/>	2
Not sure/no opinion	<input type="checkbox"/>	3
Not particularly well	<input type="checkbox"/>	4
Not well at all	<input type="checkbox"/>	5

- 3** And how well do you think it fits in with other health-promotion schemes?

Tick one box only

Very well	<input type="checkbox"/>	1
Fairly well	<input type="checkbox"/>	2
Not sure/no opinion/not applicable	<input type="checkbox"/>	3
Not particularly well	<input type="checkbox"/>	4
Not well at all	<input type="checkbox"/>	5

- 4** Overall, what sort of an impact do you think the Designed to Smile scheme has had on the school?

Tick one box only

Very positive	<input type="checkbox"/>	1
Fairly positive	<input type="checkbox"/>	2
Not sure/no opinion	<input type="checkbox"/>	3
Fairly negative	<input type="checkbox"/>	4
Very negative	<input type="checkbox"/>	5

Future intentions

- 5** How likely is it that your school will continue to run the toothbrushing programme in the next academic year?

Tick one box only

Very likely	<input type="checkbox"/>	1
Fairly likely	<input type="checkbox"/>	2
Not sure	<input type="checkbox"/>	3
Fairly unlikely	<input type="checkbox"/>	4
Very unlikely	<input type="checkbox"/>	5

Comments or suggestions

- 6** If you have any further comments, or suggestions for how the scheme may be improved, please let us know below:

Holiadur Cynllun Gwên

I'R PENNAETH EI LENWI

Cyffredinol

1 Oeddech chi wedi clywed am Gynllun Gwên cyn i'r tîm gysylltu â chi?

Ticiwch un blwch yn unig

Oeddwn	<input type="checkbox"/>	1
Nac oeddwn	<input type="checkbox"/>	2

Cynllun Gwên a'ch Ysgol chi

2 Pa mor dda yr ydych chi'n teimlo bod Cynllun Gwên yn cyd-fynd â chwricwlwm eich ysgol yn gyffredinol?

Ticiwch un blwch yn unig

Yn dda iawn	<input type="checkbox"/>	1
Yn eithaf da	<input type="checkbox"/>	2
Heb fod yn sicr / dim barn	<input type="checkbox"/>	3
Ddim yn arbennig o dda	<input type="checkbox"/>	4
Ddim yn dda o gwbl	<input type="checkbox"/>	5

3 A pha mor dda, yn eich barn chi, y mae'n cyd-fynd â chynlluniau eraill i hybu iechyd?

Ticiwch un blwch yn unig

Yn dda iawn	<input type="checkbox"/>	1
Yn eithaf da	<input type="checkbox"/>	2
Heb fod yn sicr / dim barn	<input type="checkbox"/>	3
Ddim yn arbennig o dda	<input type="checkbox"/>	4
Ddim yn dda o gwbl	<input type="checkbox"/>	5

4 Yn gyffredinol, pa fath o effaith y mae Cynllun Gwên wedi'i chael ar yr ysgol yn eich barn chi?

Ticiwch un blwch yn unig

Cadarnhaol iawn	<input type="checkbox"/>	1
Eithaf cadarnhaol	<input type="checkbox"/>	2
Heb fod yn sicr / dim barn	<input type="checkbox"/>	3
Eithaf negyddol	<input type="checkbox"/>	4
Negyddol iawn	<input type="checkbox"/>	5

Bwriadau at y dyfodol

5 Pa mor debyg yw hi y bydd eich ysgol yn dal i redeg y rhaglen brwsio-dannedd yn y flwyddyn academaidd nesaf?

Ticiwch un blwch yn unig

Tebygol iawn	<input type="checkbox"/>	1
Eithaf tebygol	<input type="checkbox"/>	2
Heb fod yn sicr	<input type="checkbox"/>	3
Eithaf annhebygol	<input type="checkbox"/>	4
Annhebygol iawn	<input type="checkbox"/>	5

Sylwadau neu awgrymiadau

6 Os oes gennych chi unrhyw sylw pellach, neu awgrymiadau ynghylch sut y gellir gwella'r cynllun, rhowch wybod i ni isod:

Appendix A2:
School teacher questionnaire (bilingual)

Designed to Smile Questionnaire

FOR CLASSROOM TEACHER TO COMPLETE

Your class

- 1** What age group are the children in your classroom?

Tick one box only

Nursery	<input type="checkbox"/>	1
Reception	<input type="checkbox"/>	2
Year 1	<input type="checkbox"/>	3
Year 2	<input type="checkbox"/>	4
Year 3	<input type="checkbox"/>	5

- 2** And how many children are there in your class, altogether?

Enter the number of children below

..... children

Toothbrushing

- 3** On average, how many times do you carry out the toothbrushing programme each week?

Enter the number times per week below

..... times per week

- 4** On average, how long does it take to carry out the toothbrushing programme each day?

Enter the number of minute below

..... minutes

School staff training

- 5** With regard to the training that you received from the Designed to Smile team, would you say were given....

Tick one box only

too much information?	<input type="checkbox"/>	1
just the right amount of information?	<input type="checkbox"/>	2
too little information?	<input type="checkbox"/>	3

- 6** And would you say that training session....

Tick one box only

lasted too long?	<input type="checkbox"/>	1
lasted just the right length of time?	<input type="checkbox"/>	2
didn't last long enough?	<input type="checkbox"/>	3

Guidelines and support

- 7** How would you describe the written guidelines for the toothbrushing programme that you've been given?

Tick one box only

Very clear	<input type="checkbox"/>	1
Fairly clear	<input type="checkbox"/>	2
Not sure/no opinion	<input type="checkbox"/>	3
Fairly unclear	<input type="checkbox"/>	4
Very unclear	<input type="checkbox"/>	5

- 8** Would you say that the level of day-to-day support that you receive from the Designed to Smile team is....

Tick one box only

too much?	<input type="checkbox"/>	1
just right?	<input type="checkbox"/>	2
not enough?	<input type="checkbox"/>	3

Toothbrushing materials

9 How would you rate the quality of the following toothbrushing materials provided to you by the Designed to Smile teams?

Tick one box in each row

	Very good ▼	Fairly good ▼	Okay ▼	Fairly poor ▼	Very poor ▼	Not applicable ▼
Toothbrushes	<input type="checkbox"/>					
Toothpaste	<input type="checkbox"/>					
Brush buses	<input type="checkbox"/>					
Trolleys	<input type="checkbox"/>					
Gloves	<input type="checkbox"/>					
Marker pens	<input type="checkbox"/>					

Final thoughts

10 What would you say have been the positive outcomes of the toothbrushing scheme in your class?

11 If you've experienced any problems with the Designed to Smile programme, or if you think there aspects of the programme that could be improved, please let us know in the box below:

Holiadur Cynllun Gwên

I'R ATHRO/ATHRAWES EI LENWI

Eich dosbarth chi

1 I ba grwp oedran y mae'r plant yn eich dosbarth yn perthyn?

Ticiwch un bwllch yn unig

Meithrin	<input type="checkbox"/>	1
Derbyn	<input type="checkbox"/>	2
Blwyddyn 1	<input type="checkbox"/>	3
Blwyddyn 2	<input type="checkbox"/>	4
Blwyddyn 3	<input type="checkbox"/>	5

2 A faint o blant sydd yn eich dosbarth i gyd?

Rhowch nifer y plant isod

..... o blant

Brwsio dannedd

3 Ar gyfartaledd, faint o weithiau y byddwch chi'n cyflawni'r rhaglen brwsio dannedd bob wythnos?

Rhowch y nifer o weithiau bob wythnos isod

..... gwaith bob wythnos

4 Ar gyfartaledd, pa mor hir y mae'n cymryd i gyflawni'r rhaglen brwsio dannedd bob dydd?

Rhowch nifer y munudau isod

..... munud

Hyfforddiant i staff yr ysgol

5 O ran yr hyfforddiant a gawsoch gan dîm Cynllun Gwên, a fyddech chi'n dweud i chi gael...

Ticiwch un bwllch yn unig

gormod o wybodaeth?	<input type="checkbox"/>	1
yr union faint cywir o wybodaeth?	<input type="checkbox"/>	2
rhy ychydig o wybodaeth?	<input type="checkbox"/>	3

6 Ac a fyddech chi'n dweud bod y sesiwn hyfforddi...

Ticiwch un bwllch yn unig

wedi para'n rhy hir?	<input type="checkbox"/>	1
wedi para'r amser cywir?	<input type="checkbox"/>	2
heb bara'n ddigon hir?	<input type="checkbox"/>	3

Canllawiau a chymorth

7 Sut y byddech chi'n disgrifio'r canllawiau ysgrifenedig a gawsoch chi ar gyfer y rhaglen brwsio dannedd?

Ticiwch un bwllch yn unig

Eglur iawn	<input type="checkbox"/>	1
Eithaf eglur	<input type="checkbox"/>	2
Heb fod yn sicr/dim barn	<input type="checkbox"/>	3
Eithaf aneglur	<input type="checkbox"/>	4
Aneglur iawn	<input type="checkbox"/>	5

8 A fyddech chi'n dweud bod lefel y cymorth a gewch chi gan dîm Cynllun Gwên o ddydd i ddydd ...

Ticiwch un bwllch yn unig

yn ormod?	<input type="checkbox"/>	1
yn gywir?	<input type="checkbox"/>	2
ddim yn ddigon?	<input type="checkbox"/>	3

Defnyddiau brwsio dannedd

9 Beth yw'ch barn chi am ansawdd y defnyddiau isod a gewch chi gan dîm Cynllun Gwên o ran brwsio dannedd?

Ticiwch un blwch ym mhob rhes

	Da iawn ▼	Eithaf da ▼	lawn ▼	Eithaf gwael ▼	Gwael iawn ▼	Ddim yn gymwys ▼
Brwsys dannedd	<input type="checkbox"/>					
Past dannedd	<input type="checkbox"/>					
Bysiau brwsys	<input type="checkbox"/>					
Troliau	<input type="checkbox"/>					
Menig	<input type="checkbox"/>					
Pennau marcio	<input type="checkbox"/>					

Sylwadau terfynol

10 Beth, yn eich barn chi, yw canlyniadau cadarnhaol y cynllun brwsio dannedd yn eich dosbarth chi?

11 Os ydych chi wedi cael unrhyw broblem gyda rhaglen Cynllun Gwên, neu os credwch fod modd gwella agweddau ar y rhaglen, rhowch wybod i ni yn y blwch isod:

Appendix B1:
Original covering letter (bilingual)

Dear Sir/Madam,

I am writing to ask you to take part in a very brief survey about your school's involvement in the Designed to Smile toothbrushing scheme.

We have randomly selected 300 schools taking part in the scheme, and yours is one of the schools that were chosen.

The survey has been commissioned by the Welsh Assembly Government, who are keen to identify areas of the scheme which might be changed or developed in the future, in order to improve the experience of the schools taking part.

Any information that you provide in the survey will be strictly confidential. Your participation is entirely voluntary, but we hope that you'll take a few minutes to share your experience of Designed to Smile with us.

I've enclosed two short questionnaires: one to be completed by the head-teacher, and a second to be completed by any classroom teacher or assistant who supervises the toothbrushing on a day-to-day basis. Both forms are provided in English and Welsh, so you can complete the survey in your preferred language. There is also a pre-paid and addressed envelope included for returning the completed questionnaires.

If you have any questions at all about the survey, please contact the project co-ordinator Rob Trubey on 029 2074 5469.

Thank you for your time.

Yours sincerely,



Prof. I.G. Chestnutt

Dental Public Health Unit
Cardiff University Dental School
Heath Park, Cardiff

Tel: 029 2074 5469

Annwyl Syr/Madam,

Ysgrifennaf i ofyn i chi gymryd rhan mewn arolwg byr iawn o ymwneud eich ysgol â'r cynllun brwsio dannedd, Cynllun Gwên.

Rydym wedi dewis, ar hap, 300 o'r ysgolion sy'n cymryd rhan yn y cynllun, ac mae'ch un chi yn un o'r ysgolion a gafodd eu dewis.

Mae Llywodraeth Cynulliad Cymru wedi comisiynu'r arolwg am eu bod yn awyddus i ganfod pa feysydd yn y cynllun y gellid eu newid neu eu datblygu yn y dyfodol er mwyn gwella'r profiad a gaiff yr ysgolion sy'n cymryd rhan ynddo.

Caiff unrhyw wybodaeth a roddwch yn yr arolwg ei chadw'n gwbl gyfrinachol. Er mai mater gwirfoddol yw cymryd rhan ynddo, gobeithio y cymerwch chi ychydig funudau i roi gwybod ni am eich profiad o Gynllun Gwên.

Amgaeaf ddau holiadur byr, y naill i'w llenwi gan y pennaeth a'r llall i'w llenwi gan unrhyw athro neu athrawes neu gynorthwydd dosbarth sy'n goruchwyllo brwsio dannedd o ddydd i ddydd. Darperir y ddwy ffurflen yn Gymraeg a Saesneg er mwyn i chi allu eu llenwi yn eich dewis iaith. Cynhwysir hefyd amlen bwrpasol ar gyfer dychwelyd yr holiaduron.

Os bydd gennych unrhyw gwestiwn o gwbl am yr arolwg, ffoniwch arweinydd y prosiect, Rob Trubey ar 029 2074 5469.

Diolch i chi am eich amser.

Yn gywir iawn,



Yr Athro I.G. Chestnutt

Uned Iechyd Deintyddol y Cyhoedd
Ysgol Deintyddiaeth Prifysgol Caerdydd
Parc Mynydd Bychan, Caerdydd

Ffôn: 029 2074 5469

Appendix B2:
Follow-up covering letter (bilingual)

Dear Sir/Madam,

You may remember that I recently wrote to you to ask you to take part in a national survey of schools involved in the Designed to Smile toothbrushing scheme.

We have received a large number of responses so far which we hope will help us find ways to tailor the scheme for the benefit of all schools taking part. As yet, we have not received completed questionnaires from your school.

It is important that we receive as many completed questionnaires as possible. There a wide range of schools involved in the scheme, each with their own different experiences and viewpoints, all of which we are keen to learn.

I've enclosed replacement copies of the two questionnaires - one for completion by yourself and the other by a member of staff who supervises the toothbrushing – and a pre-paid return envelope with which to return them. Any information you share with us will be kept confidential at all times.

If you have any questions you'd like to ask about the survey, the project co-ordinator Rob Trubey is available to speak to on 029 2074 5469.

Thank you for your time.

Yours sincerely,



Prof. I.G. Chestnutt

Dental Public Health Unit
Cardiff University Dental School
Heath Park, Cardiff

Tel: 029 2074 5469

Annwyl Syr/Madam,

Efallai y cofiwch i mi ysgrifennu atoch yn ddiweddar i ofyn i chi gymryd rhan mewn adolygiad cenedlaethol o ysgolion sy'n rhan o gynllun brwsio dannedd Cynllun Gwên.

Rydym wedi derbyn nifer mawr o ymatebion hyd yn hyn a gobeithio y bydd y rheini'n ein helpu i ddod o hyd i ffyrdd o deilwra'r cynllun er budd pob ysgol sy'n cymryd rhan. Hyd yma, nid ydym wedi derbyn holiaduron wedi'u llenwi o'ch ysgol chi.

Mae hi'n bwysig ein bod ni'n derbyn cynifer ag sy'n bosibl o holiaduron wedi'u llenwi. Mae ystod eang o ysgolion yn ymwneud â'r cynllun, y mae gan bob un ohonynt ei phrofiadau a'i safbwyntiau ei hun, ac rydym ninnau'n awyddus i ddysgu amdanynt i gyd.

Rwyf wedi amgáu copïau eraill o'r ddau holiadur – un i chi ei lenwi eich hunan ac un arall i'w lenwi gan aelod o staff sy'n goruchwylio'r brwsio dannedd – ac amlen barod a stamp arni i chi eu dychwelyd. Bydd unrhyw wybodaeth rydych chi'n ei rhannu â ni'n cael ei chadw'n gyfrinachol bob amser.

Os oes gennych unrhyw gwestiynau yr hoffech eu holi am yr arolwg, mae Rob Trubey, cydlynnydd y prosiect, ar gael i siarad â chi ar 029 2074 5469.

Diolch yn fawr i chi am eich amser.

Yn gywir iawn,



Yr Athro. I.G. Chestnutt

Uned Iechyd Deintyddol Cyhoeddus
Ysgol Ddeintyddol Prifysgol Caerdydd
Parc y Mynydd Bychan, Caerdydd

Ffôn: 029 2074 5469