

**BASCD 2024 Abstract #09****Increasing consent for school fluoride varnish programme:  
engaging schools and incorporating co-design**

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**Background:**

School fluoride varnish programmes (SFVP) improve oral health but are hampered by low parental engagement and participation. Co-design involves collaboration between researchers, service users, and other stakeholders to define the problems, implement and evaluate the solutions in real-world settings. A pilot study was undertaken in a North East London borough using co-design to improve the uptake of SFVP.

**Objectives:**

The objectives were to engage school staff in the SFVP process using co-design methods, recruit Oral Health Champions at the school to promote the programme, and evaluate the impact of this intervention on parental consent rates.

**Methods:**

Redbridge primary schools participating in the SFVP were encouraged to book a staff engagement session with an Advanced Oral Health Practitioner. The engagement session explained the programme, and incorporated co-design, encouraging the school to identify barriers and challenges to programme delivery. Oral Health Champions were recruited at this session. Ethics approval was not required as this is part of a Trust quality improvement project.

**Results:**

Of the 12 schools approached, 58% (n=7) organised engagement sessions and appointed Oral Health Champions. The co-design ideas varied across individual schools. For example, distribution of consent forms at parent events and using existing school resources to support hard to reach families. For schools that engaged in the intervention and also took part in SFVP the year before (n=4), consent rates increased from 74% (2022/23) to 85% (2023/24). In schools that engaged there was a range of consent rates from 77-92%, whereas those that did not engage from the range was 69-76%.

**Conclusion:**

Our study suggests school engagement and co-design interventions may increase parental consent for SFVP by addressing local community needs and reducing barriers for hard-to-reach parents. Further exploration of individualised school approaches is recommended to improve uptake of oral health programmes.

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