

**NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE**

**Public Health Advisory Committee B – Meeting 2**

**Oral Health Improvement**

**19<sup>th</sup> September 2013**

**NICE Manchester Office  
Level 1A, City Tower, Piccadilly Plaza, Manchester M1 4BT**

**Final Minutes**

<b>Attendees:</b>	<p><b><i>PHAC Members</i></b> Alan Maryon-Davis (Chair), Rebecca Harris, Rachel Johns, Richard Watt, Sabrina Fuller, Mandy Murdoch, Brendan Collins</p> <p><b><i>Co-optees</i></b> Jenny Godson</p> <p><b><i>NICE Team</i></b> Simon Ellis (SE), Linda Sheppard (LS), Clare Wohlgemuth (CW), Charlotte Haynes (CH), Rebecca Maguire (RM)</p> <p><b><i>Review Teams</i></b> <b>Bazian:</b> Sarah Caton, Rob Cook <b>Cardiff University School of Dentistry:</b> Ivor Chesnutt, Nigel Monaghan <b>York Health Economics Consortium:</b> Lindsay Claxton, Matthew Taylor (both pm only)</p> <p><b><i>Observers</i></b> Jessica Fielding (NICE), John Huston (NICE), Jane Newton (DH), Janette Leech (SCIE)</p>
<b>Apologies:</b>	<p><b><i>PHAC Members</i></b></p> <p>Elizabeth Kay, Peter Sims, Jo Cooke, Jakki Cowley, Daniela DeAngelis, Martin Landers</p>

<b>Author</b>	RM
<b>File Ref</b>	PHAC B 3.5 Draft minutes of PHAC 2 on 19th September
<b>Version</b>	Final
<b>Audience</b>	<b>PHAC members, NICE team, members of the public</b>

Item		Action
<p><b>1. Welcome and objectives for the meeting</b></p>	<p>The Chair, Alan Maryon Davis, welcomed the members and co-optee of the Public Health Advisory Committee (PHAC B) to the second meeting on Oral Health Improvement. The observers and members of the public were also welcomed to the meeting. The table introduced themselves to the three new committee members.</p> <p>The Chair outlined the objectives of the meeting which included:</p> <ul style="list-style-type: none"> <li>• To hear from Jenny Godson at Public Health England about the new policy context and delivery mechanisms for oral health improvement in England</li> <li>• To discuss the findings from the ‘Overview of Oral Health Needs Assessments’ and agree outline areas for draft recommendations</li> <li>• To discuss the findings from the ‘Review of effectiveness of oral health improvement’ and agree outline areas for draft recommendations</li> <li>• To hear interim findings from the cost effectiveness review and learn more about the proposed economic model</li> </ul> <p>The Chair informed the PHAC that six apologies had been received. These are noted above.</p>	
<p><b>2. Declarations of Interests</b></p>	<p>The Chair explained that verbal declarations of interest are a standing item on every agenda and are recorded in the minutes as a matter of public record. The Chair asked everyone to verbally declare the interests they had made in writing at the time of their application to join the PHAC and also to declare any additional interests that may have arisen since then.</p> <p>The potential conflicts of interest declared were as follows:</p> <p><b>PHAC B Committee members</b></p> <p><b>Personal pecuniary interest:</b>  <b>Alan Maryon- Davis;</b> has written articles on a range of health matters in an independent freelance capacity, occasionally on oral health matters.</p> <p><b>Richard Watt:</b> receives a bottle of champagne each Christmas from Colgate</p> <p><b>Personal family interest:</b>  None declared</p> <p><b>Non-personal pecuniary interest:</b>  <b>Alan Maryon Davis:</b> His academic institution, Kings</p>	

	<p>College London, derives income by training dental care and oral health professionals and undertaking research into oral health; Chair of Best Beginnings, a childrens' charity that is funded to promote healthy pregnancy and children's early years, including breastfeeding and healthy nutrition; Vice-chair of the UK Health Forum, an umbrella organisation that brings together non-governmental organisations and experts in non-communicable disease prevention (including healthy nutrition) and undertakes policy analyses and modelling under contract with government and various national agencies.</p> <p><b>Jo Cooke:</b> employed by an organisation that may apply for research and implementation funding</p> <p><b>Elizabeth Kay:</b> has undertaken commissioned research for the British Dental Association's Research Charity.</p> <p><b>Rebecca Harris:</b> employed by an organisation that may apply for research and implementation funding. Rebecca is also commissioned to undertake an evaluation for the Department of Health, however payment is made to her institution, not Rebecca personally</p> <p><b>Personal non-pecuniary interest:</b>  <b>Elizabeth Kay:</b> has made, as Scientific Advisor to the British Dental Association, a number of public statements on oral health issues; as Dean of Peninsula has given a number of public statements on oral health and education; Paid to attend Advisory Board style meetings by Colgate-Palmolive, Johnson and Johnson, Oasis Healthcare. Payments are made to her employing university not directly to her</p> <p><b>Rebecca Harris:</b> has an honorary consultant contract with Royal Liverpool &amp; Broadgreen Hospitals Trust which may result in pay supplement in consultant excellence award</p> <p><b>Review Teams</b></p> <p><b>Personal pecuniary interest:</b>  <b>Ivor Chesnutt:</b> holds an honorary NHS contract with Cardiff and Vale University Health Board</p> <p><b>Non personal pecuniary interest:</b>  <b>Robert Cook:</b> his employer holds and has held contracts with other organisations in the healthcare industry  <b>Sarah Caton:</b> her employer holds and has held contracts with other organisations in the healthcare industry</p>	
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	<p><b>Matthew Taylor:</b> his employer receives funding from pharmaceutical and medical device manufacturers for health economics consultancy</p> <p><b>Personal non pecuniary:</b>  <b>Matthew Taylor:</b> employed as a scientific adviser for NICE Scientific Advice Programme</p> <p>The Chair and Simon Ellis, Associate Director, agreed that the interests declared did not prevent the attendees at committee from fully participating in the meeting.</p>	
<b>3. Minutes of the last meeting</b>	The minutes were agreed as an accurate record.	
<b>4. National strategy for oral health improvement</b>	<p>Jenny Godson from Public Health England presented the national strategy for oral health improvement. A summary is as follows:</p> <ul style="list-style-type: none"> <li>• It was noted that the Local Authorities have a statutory duty to improve health, including oral health</li> <li>• Public Health England provides support to Local Authorities and Government in their development of improvement initiatives and strategies. They publish performance against the PH Outcomes Framework</li> <li>• The contents and purpose of the 'Improving oral health outcomes' commissioning guide was explained</li> </ul> <p>The PHAC were invited to ask questions and a number of issues were raised and discussed.</p>	
<b>5. Overview of Oral Health Needs Assessments</b>	<p>Professor Ivor Chesnutt from Cardiff University School presented the findings from Cardiff University's review of Oral Health Needs Assessments (OHNAs).</p> <p>The PHAC were invited to ask questions and a number of issues were raised and discussed.</p>	
<b>6. Outline areas for draft recommendations</b>	The Chair led a discussion on areas for draft recommendations. Some areas to explore were noted and will be discussed at the next committee meeting in October.	
<b>7. Review of Effectiveness of Oral Health Improvement (review 1): presentation of findings</b>	<p>Sarah Caton from Bazian presented the findings of the review, following on from the initial report in the first committee meeting in July.</p> <p>The PHAC were invited to ask questions and a number of issues were raised and discussed.</p>	
<b>8. Cost effectiveness</b>	Mat Taylor from the York Health Economics Consortium (YHEC) presented the proposed economic	

<p><b>review: presentation of interim findings</b></p>	<p>models. A summary is as follows:</p> <ul style="list-style-type: none"> <li>• The model considers a range of ‘perspectives’, e.g. Local Government, public sector and employer in addition to NHS and PSS</li> <li>• Additional expenditure requires justification unless it is shown that all interventions are cost-saving</li> <li>• There is little research into using QALYs in oral health, which would pose challenges</li> <li>• YHEC is proposing to use a population-level approach</li> </ul> <p>The PHAC were invited to ask questions and a number of issues were raised and discussed.</p>	
<p><b>14. Suggestions for addressing any gaps in the evidence</b></p>	<p>Some suggestions were discussed.</p> <p>It was noted that there is scope for a possible Local Authority briefing in addition to the main piece of guidance.</p>	
<p><b>15, 16. Summary of the day and any Other Business/Next steps</b></p>	<p>The Chair summarised the items that had been discussed throughout the day as follows:</p> <ul style="list-style-type: none"> <li>• NICE and Public Health England will ensure their respective guidance is complementary</li> <li>• OHNAs need to be robust at local level and open for adaptation as and when needed</li> <li>• The guidance should focus on sustainable changes impacting on health inequalities and using combinations of interventions.</li> </ul> <p>The Chair noted that the next meeting will take place on 24 October at Red Rooms, City Tower, Piccadilly Plaza, Manchester M1 4BT.</p> <p><b>AOB:</b> PHAC members are reminded that NICE will only process expenses that <b>are submitted within 3 months of the date incurred.</b></p>	
	<p>The meeting closed at 4.15pm.</p>	

**DATE OF NEXT MEETING: Thursday 24th October 2013**

**VENUE FOR NEXT MEETING: Red Rooms, City Tower, Piccadilly Plaza, Manchester M1 4BT**