

Dear Parent/Carer

Exciting news for all parents: free access to NHS Dental Services for your child at school

We would like to introduce you to an important dental programme that NHS Mid and South Essex Integrated Care Board (MSE ICB) are rolling out to improve children and young people's oral health and to help your child learn how to take care of their teeth and mouths.

Oral health is often the first great sign of your child's overall health. Developing healthy habits early in life will help to prevent tooth decay, support their overall wellbeing, and get them off to the best possible start in life.

This programme aims to support your child by providing a free oral health mouth check in school and there will be fun interactive lessons on looking after their oral health.

The Assessment (mouth check)

A dental care professional will be coming into school to check your child's oral health which will include looking in your child's mouth. No dental treatment will be provided at the school - they will just take a look at your child's teeth and mouth.

Following this, your child will be given a letter that will tell you whether your child/children's teeth are fine or if they recommend a dental appointment. If your child already has a regular dentist, they will still need to visit them for treatment and check-ups. If the dental care professional identifies that your child needs some dental treatment, they will be given a letter to take home that you can give to your regular dental practice.

A dental practice has been assigned to your child's school and so you will have direct access to this practice for a dental appointment if you do not already have a regular dentist.

Please note children under 18 are eligible for **free NHS dental care**.

Please see the parental consent form on the back of this letter that we need you to complete and return to the school before your child can take part in the assessment.

Mid and South Essex Integrated Care Board
PO Box 6483, Basildon, SS14 0UG

www.midandsouthessex.ics.uk | 01268 594 350
Chair: Professor Michael Thorne CBE | CEO: Tom Abell



Child Consent Form

I have read and understood the information in the attached letter for parents and persons with parental responsibility.



I agree for my child to take part in the programme and have a free dental check at school.

- Child's name: _____
- Child's date of birth: _____
- Child's home postcode: _____
- School Postcode: _____
- Name of parent or person with parental responsibility: _____
- Signature of parent or person with parental responsibility:

- Date: _____

Please return this form to your child's school.

Thank you.