



Annual report &  
financial accounts

2021-22

[www.dentalhealth.org](http://www.dentalhealth.org)



**Oral Health  
Foundation**

Better oral health for all



# Reference and administrative details

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Charity number:	263198 (England & Wales)
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# Welcome from the President

## Hello, and a warm welcome to the Oral Health Foundation's Annual Review for 2021-2022.

It has been a hugely rewarding 12 months in my first year as President of the Oral Health Foundation – a year which saw the charity celebrate its 50th birthday. I am pleased to report that our charitable activities grew compared to the previous year despite the many challenges faced by all types of organisations in the current economic climate.

By being able to invest more money into our programmes, we have ultimately been able to help more people achieve better oral health. At a time where many are having problems accessing dentistry and face impossible choices through a rise in cost of living, we are proud to be a charity that people can rely on for the health of their mouth.

Those who face the greatest challenges in caring for their oral health are repeatedly those without the means or opportunity to access primary care services. Their ability towards self-care is also often compromised. Poverty, geographical isolation, anxiety, mental and physical disabilities, all play a key role in creating individuals at higher risk of oral disease. Over the last year, we have been determined to help these groups and are committed to reducing health inequalities, which sadly seem to be widening.

Everybody deserves to have good oral health. That's why we have spent the last year being a key source for oral health information and advice while we are proud continue supplying vital oral health materials all over the world. Providing essential education about how to care for the mouth, as well as our rights as patients and consumers, continues to be at our heart.

While millions of people are provided help and support for their oral health through our materials and resources, our policy work could arguably go on to influence billions. I'm extremely proud to represent a charity with an incredibly influential presence in the world of global oral health policy.



Over the last year, the Oral Health Foundation has contributed to legislation and regulation reforms not only in the UK, but globally. From having MPs signing our new mouth cancer charter at the House of Commons, to MEPs supporting a new vision for oral health professionals' education as part of our work with Platform for Better Oral Health in Europe.

We have been proud to work with government, manufacturers, industry bodies, health providers and the media all over the world, to make sure more funding is going into quality education, that is free and easy to access. But that's not enough.

If we're really to make a difference to the landscape of oral health, there are several urgent measures that must be undertaken. Over the coming year, we anticipate our influence in driving forward new measures to reform areas like dental access, tobacco and alcohol controls, sugar regulations, and direct-to-consumer dentistry, will be significantly important. Our aim must be to reduce dental disease and stem the crisis in oral health we have experienced since the beginning of the pandemic.

I would like to thank all our supporters, corporate sponsors, partners, trustees and staff for their support and hard work over the past 12 months. If we are to achieve our goals and help people improve the health of their mouth, we will surely once again need your support. We look forward to working with you again to achieve our shared mission of improving oral health.



Mhari Coxon | President

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# Our mission

The Oral Health Foundation is a charity that believes everybody deserves to have good oral health.

Perhaps more than ever before, the health of the population takes the upmost priority.

That's why our charity is determined to continue supporting people achieve healthier lives through better oral health.

Being in good oral health protects a person from a whole manner of diseases and conditions. It is why we take our responsibility extremely seriously, to improve people's quality of life, by helping them have and maintain a healthy smile.

Over the last year, communities across the UK have benefited from our wealth of oral health programmes, campaigns and activities. These initiatives have education at their core, giving people the ability to make informed decisions about the health of their mouth.

In recent years, the pandemic and rise in cost of living has widening health inequalities across the board. Our initiatives work to eliminate them.

We also realise that many people might not have the means to access dental services and oral care products. That's why our team continues to support these people by offering confidential and reassuring advice, as well as being determined to get vital oral health tools out to those who need them.

During 2021-22, we have:

- Provided oral health information, education and support to communities at increased risk of oral disease.
- Given direct and personal advice to thousands to help reduce health inequalities.
- Successful lobbying for effective oral health policies in the UK, across Europe and throughout the world.
- Invested funds to raise awareness of mouth cancer and have become a founding member of a new head and neck cancer coalition.
- Developed more partnerships with associations and organisations, to help extend the impact of our programmes, not only in the UK but around the world.
- Reached millions of people with oral health information through press activity, public health awareness campaigns and social media activities.



## The values that drive us

Removing all dental disease might be our dream but reducing it must be a reality. To help us along the way, we have pledged to uphold a series of core values.

These values will help support our vision, shape our culture and be a part of everything that we do:

### Ambition and progression

We will be driven, evolve as an organisation and will never settle for anything other than our vision for a world where everybody has a healthy mouth.

### Trust and compassion

Everybody's opinion, values and needs will be respected while our support and guidance shall remain impartial and fair.

### Inclusivity and togetherness

Whether working on our own, or partnering with others, all our campaigns, resources and expertise will be available to all.

### Accountability and responsibility

We will recognise and act on all social, economic and environmental challenges because it is the right thing to do.

### Efficiency and effectiveness

From our day-to-day work, to our national campaigns, everything we do will be productive, cost effective and make a positive impact.



# The strategy to 2024

Better oral health for all. That's the theme of our strategy and encapsulates our determination to address the world's growing oral health demands. It also sets out how we intend to tackle oral disease and help improve the quality of life for millions of people in the UK and around the world.

As part of this, we are pledging to help the most vulnerable members of society by reducing dental disease and the pain and suffering that comes along with it.

To help us achieve this, we have identified six key areas:

## Healthier communities

We want to help create a healthier population by reducing the prevalence of oral diseases across all communities. We will do this by creating public health campaigns that champion better oral health.

These campaigns will be aimed at families, the elderly, those with additional needs, the homeless, children, and people on low incomes.

## Support and advice

Oral diseases often lead to feelings of anxiety and helplessness. We will compassionately support thousands of people, leaving them more informed and reassured. Everybody deserves free access to information, support and advice about their oral health.

We will make sure our support services are impartial, trusted and accessible for everybody who needs them.

## Education

All organisations should be armed with the right tools to educate their patients, public and staff about oral health. That's why we are dedicated to creating resources for dental practices, hospitals and pharmacies. It is also important for us to provide tools and information for schools, workplaces and other community groups.

Making a positive difference for more groups by creating a diverse range of programmes and resources.

## Policy & influence

To create a healthier future, we will champion initiatives with policy makers, to raise their awareness

of the changes required to bring about significant improvements to oral health. To do this most effectively, we are determined to form partnerships with like-minded professionals and organisations while making sure oral health plays a more prominent role in the media agenda.

Influencing matters of policy, from WHO's global oral health strategy and Europe's Beating Cancer Plan, to the UK's new water fluoridation bill, will be at the cornerstone of our charity's work.

## Excellence

To continue to survive as a charity and help people with their oral health problems, it is important we work efficiently and cost-effectively. This will make sure our campaigns maximise their potential and have a truly worthy impact. We will also be entirely ethical and transparent about how we invest our money.

We pledge to run our organisation with excellence while being adaptable to changes and challenging environments.

## Income

Our campaigns, programmes and charitable work are not possible without the generous financial support of others. Over the next five years, we plan to create more opportunities for supporters to help us financially. In return, we will invest our resources in helping people achieve good oral health.

The more money we can raise, the more we can do to help people to achieve better oral health.



# 2021-22

## Our year in numbers



### Healthier communities

- £940,016 invested in improving oral health.
- 3 awareness campaigns delivered.
- 23 new modules created to help carers and hospital staff look after their patient's oral health.

### Education

- 17,500 accessed Dental Buddy.
- 17,000 dental packs distributed.
- 1,414 organisations supplied with oral health materials.

### Support and advice

- 2 million visitors to the website.
- 6,500 Dental Helpline enquires.
- 193,823 leaflets sold.

### Policy and influence

- 1,655 pieces of coverage in the media.
- 15 million social media reach.
- 3.5 billion still suffer from oral diseases – that's why we influence effective policy measures worldwide, across Europe and in the UK.

### Excellence

- 50 years as a charity improving oral health.
- 60 accredited products across 60 countries.
- 105 partnerships with other companies.

### Income

- £228,662 in donations and sponsorships.
- £349,264 in accredited products.
- £297,724 in educational resource sales.

Thanks to the generosity and hard work of you, our supporters, we have been able to reach families, children, the elderly, those on lower incomes and the most vulnerable people in society.



# Healthier communities

We want to help create a healthier population by reducing the prevalence of oral diseases across all communities. We will do this by creating public health campaigns that champion better oral health. These campaigns will be aimed at families, the elderly, those with additional needs, the homeless, children, and people on low incomes.



## National Smile Month 2022

‘Everybody deserves a healthy smile’ was the theme of the 46th National Smile Month campaign.

This is the Oral Health Foundation’s hugely successful annual campaign to promote its three key messages for improving oral health:

- Brush your teeth for two minutes twice a day with a fluoride toothpaste.
- Cut down on how often you have sugary foods and drinks.
- Visit your dentist regularly, as often as they recommend.

National Smile Month is a charity campaign all about championing the benefits of having good oral health and promoting the value of a healthy smile.

The campaign has coincided with major improvements in UK oral health over the past 40 years and continues to provide everyone with the opportunity to participate in the challenge of improving oral health.

During National Smile Month 2022, we focused on addressing inequalities by providing people with the information, education, tools and support so they can achieve the smile they deserve.



We looked at how to get and maintain a healthy smile throughout all stages of life and gave support to people whose disabilities and additional needs make good oral health more challenging to achieve.

We offered advice to those who financially struggle to access care and provision while we also sought to provide an insight into the links between oral health and general health.

Much of the public and professional support for National Smile Month is undertaken at a practice and community level across the UK each year. Grassroots activities such as events, talks, fun days, displays, open sessions and competitions form the backbone of the campaign and help to share the proven messages to improve oral health.

The educational grants and marketing expertise of five major sponsors helped to make National Smile Month a success in 2022. Align Technology, Johnson & Johnson, Oral-B, GSK and the Wrigley Oral Health Care Programme, enabled us to achieve 165 pieces of national print, radio and television coverage. This activity reached more than 8 million people and created a media buzz about oral health.

The campaign was launched with a major event in London and was attended by around 100 close partners and key stakeholders.

An official campaign website at [www.smilemonth.org](http://www.smilemonth.org) provided an easily accessible hub of information and support for professionals and public interested in National Smile Month and improving oral health. The site was visited by more than 100,000 people during the campaign.

The National Smile Month in 2022-23 will be 'Brush for better health' and will create many more opportunities for existing, and new organisations and supporters, to help share the message of how to achieve great oral health.



# Mouth Cancer Action Month 2021

Mouth cancer takes more lives than cervical cancer and testicular cancer combined. And with new cases continuing to rise, our role as a leader in mouth cancer awareness becomes so much more important.

During November, we held Mouth Cancer Action Month – the UK’s biggest charity campaign for mouth cancer awareness.

During the campaign, thousands of amazing people went out into their communities to raise awareness of mouth cancer and share the important message of being mouthaware.

Since we started our first event in the year 2000, we have invested nearly £2 million on improving awareness and education around mouth cancer. But there’s more we can do.

The more we know about mouth cancer, the better chance we have of beating it. This means knowing how to spot mouth cancer early and knowing where to go when we see something out of the ordinary. It also means

reducing our risk by cutting down on the things that cause mouth cancer.

For Mouth Cancer Action Month 2022, we worked alongside Denplan, part of Simplyhealth, and the Mouth Cancer Foundation, to improve people’s understanding of mouth cancer, in a bid to reduce the number of lives lost to the disease.

More than 15,000 posters were displayed across the UK, and we supplied over 100 dental centres across the Armed Forces with information and education about mouth cancer.

Almost 1,500 people supported the campaign by buying a Blue Ribbon badge while over 100 organisations bought educational materials for patients, employees and customers.



A Mouth Cancer Action Charter was published and signed by MPs and key stakeholders at a special event in the House of Commons.

The charter sets out the top policy interventions we believe would be most effective in addressing the increasing rates of mouth cancer. These include:

- Conducting a government funded public health awareness campaign of the signs and symptoms of mouth cancer.
- Improving access to routine dentistry so more oral cancers can be detected at an earlier stage.
- Enabling enhanced training of GPs to identify suspected mouth cancers and change the NICE guidelines so that more cases can be referred to secondary care.
- Improving training programmes for healthcare staff to look for signs of mouth cancer.
- Introducing free dental check-ups and treatment for mouth cancer patients.
- Supporting the development of better technology to diagnose mouth cancers.

We were also delighted to have over 12,000 dental professionals join us in a series of webinars about mouth cancer, discussing the early warning signs, risk factors, and supporting patients in their mouth cancer journey.

We helped generate more than 150 items of media coverage about mouth cancer, including national television, radio and newspapers. These messages reached millions of people while our digital information online and through social media was read by over 200,000 people.



Mouth cancer is a devastating disease and can have a physical and mental impact on a person's quality of life. Patients often have problems with breathing, swallowing, drinking and eating. Speech may also be affected, and occasionally even lost. Facial disfigurement can also occur. This can lead to other problems such as nutritional deficiency, and depression. Difficulties in communication, low self-esteem, social isolation and the impact on relationships can cause as much distress as the cancer itself.

Taking time to hear the personal experiences of those people affected by mouth cancer is an important part of our work. The strength and will of those who have been through mouth cancer is truly remarkable, and as ambassadors of our charity, we are so proud to help them share their stories.

Saving lives by raising awareness of mouth cancer will continue to be an important part of our charity's work.





## Safe Smiles

Many people spend hundreds of pounds each year on their dental care. In recent years, there has been a greater desire for a smile that not only feels healthy but looks good as well. This has led more patients to consider treatments that improve the appearance of their smile.

But are the correct choices being made? Our investigation into the truth suggests not.

Since the first lockdown and rise in cost of living, we have found that up to 25% of UK households have opted for some form of DIY dentistry. These might be hacks they have seen on social media, or online websites providing cheap alternatives for them to apply at home.

We are also concerned by the spate of complications arising from people going abroad for their dental treatment. A Which? Report found that almost one-in-five patients going overseas for dental treatment have problems afterward while more than one-in-five feel they do not receive correct aftercare. We have heard first-hand accounts from many of these people while ‘Turkey Teeth’ became an increasing popular source of news for UK media.

We are especially worried about the increase of DIY and direct-to-consumer dentistry being offered within adult orthodontics and tooth whitening but there are many more areas of concern. We’ve heard stories of bone and tooth loss, jaw problems and gum recession, just to name a few.

We have also seen a significant number of people – as many as 15% of households – attempt to treat cavities in their teeth, and even trying to extract teeth.



This cannot continue.

That's why we launched Safe Smiles – a new public awareness campaign that highlights the benefits and importance of safe dentistry.

The campaign looks at the benefits of dental treatment when carried out in the dental practice. It also reassures patients about the safety of cosmetic dentistry when performed by qualified and registered professionals.

The campaign also addresses the potential consequences of direct-to-consumer alternatives, tackles the dangers of unqualified persons carrying out dentistry and gives advice about the safety of ingredients and products been pushed as 'safe' for smiles.

Over the last year, the campaign has also aimed to restore patient confidence about the safety of dental practices following COVID-19.

During the year, we have heard reports from people who have made the wrong choices and risked the health of their smile.

We are really thankful to Align Technology for sponsoring the campaign and are delighted that it has had the widescale backing from the dental industry. Safe Smiles is being endorsed by the British Orthodontic Society, British Dental Industry Association, British Academy of Cosmetic Dentistry, British Dental Bleaching Society, British Society of Dental Hygiene and Therapy, British Association of Dental Nurses, and the British Association and Dental Therapists.





## Support for care homes

The world is facing significant changes to its elderly population. The proportion of older people is increasing. Around one in 12 people worldwide are now 65 and over and this is expected to double in the next 30 years. It is estimated that by 2050, almost one in five will be over 65, equating to 1.6 billion people.

Alongside this, a greater number of older people are now keeping their own teeth for longer. Although this is positive news and a good indicator that quality of life is on the rise, this does have implications for dental provision, residential carers and home carers.

This year, The Guinness Partnership generously donated an educational grant for us to provide these groups with a set of oral health training programmes.

We created 13 modules, each lasting about five minutes. These are free to download as a PowerPoint, pdf and video format (with audio).

It is our hope that these modules will help those looking after elderly patients or older family members. Elderly people are more likely to encounter more demands and difficulties caring for an older person's oral health because of their reduction in mobility, as well as losses in cognitive ability.

The training platform will help improve a carer's knowledge about oral health and give them the tools and confidence they need to support and maintain the oral health of those in their care.

# Training packages for hospital staff

Many studies have suggested that a patient's oral health declines while in hospital.

Quite often, this happens because a patient is unable to keep up with their regular oral health routine. Access to sugary foods and drinks also plays a significant role in the development of oral diseases in hospital.

This year, in partnership with Health Education England and Mouth Care Matters, we set out to improve the oral health of patients in hospital. We supported a new series of education and training packages for hospital workers, delivering a range of video training packages.

It is important that healthcare workers, especially in a nursing role, are comfortable in helping patients to maintain their oral health during hospital stays.

Our charity remains committed to helping all groups achieve the very best standards of oral health.



# Launching the largest ever public health campaign to drive the UK towards a preventive approach to oral health.

The new post-COVID world offers a unique opportunity to embrace change and establish new ways of working to deliver better oral health for the population.

During the last year, we have been busy planning a creative and engaging campaign that will change the public perception of dentistry from treatment to prevention. No longer will oral health be seen as an easy sacrifice.

**More details to be announced in 2023.**



# Support and advice

Oral diseases often lead to feelings of anxiety and helplessness. We will compassionately support thousands of people, leaving them more informed and reassured. Everybody deserves free access to information, support and advice about their oral health. We will make sure our support services are impartial, trusted and accessible for everybody who needs them.

# Supporting people with their oral health through the Dental Helpline

Oral Health Foundation's Dental Helpline continues to help members of the public with free and impartial advice on a range of oral health problems.

It has been a truly charitable service that we have provided for more than 25 years. Today, the crucial work by our experts continues to make a positive difference to the public and professionals alike, providing an invaluable resource in educating thousands on a range of dental and oral health related matters.

Over the past year, our qualified dental nurses and oral health educators were inundated with people who were struggling to find treatment, even for small problems. Many of those who came to us were unable to book dental appointments due to crisis in NSH dentistry.



The people who reach out to us are often in distress and feel like there's nowhere else to turn. Our team provides reassurance and support to all of those who call us looking for help about their oral health and has a long-standing record of delivering calm, accurate advice and information.

Most of the support we have given this year has been about finding access to dental treatment; issues with dentures, implants and crowns; understanding NHS dental regulations and patients' rights were also high on the list, as was managing pain and general oral health advice.

The people who make up the Dental Helpline also provide invaluable support for other parts of the Oral Health Foundation, including educational resource sales, product accreditation, press and sponsorship.

Over the year, across a variety of formats, including email, telephone and online information, our dedicated team have provided help and support for 6,500 people. Those accessing the service has declined by 17% over the last 12 months, decreasing to numbers lower than pre-pandemic levels.

With a rise in the number of people reaching out to us via social media, and visiting the website, there's evidence to suggest the public are finding new and digital methods to access the oral health information they are looking for. Therefore, a decision was taken to repurpose our advice and information services, to ensure we are delivering accurate information across multiple social and digital channels to meet the demands of the changing technology and the ways people choose to access information.



## Online and digital tools

As part of our new strategy, we want to provide a trusted online space where people can learn about their oral health and wellbeing.

Over the last year, more than 2 million people came to our website looking for help and advice about their oral health.

We know just how important it is for people to receive reliable and trustworthy advice, especially in a digital space. Continuing to take pride in investing heavily in online platforms gives us the opportunity to deliver engaging and comprehensive oral health materials to millions of people across hundreds of countries.

We supply oral health education online in Mandarin, Arabic, Hindi, Spanish, German, Russian, French, Polish and Portuguese – reflecting our ambition to share valuable knowledge and information with a wider audience.

Our digital e-magazine Word of Mouth now has more than 15,000 subscribers while almost 20,000 people keep up to date with our charity activities by email.

More than 100,000 people follow us across social media and as many as 15 million people interacted with our posts promoting oral health.

Over the last year, we have seen strong growth in audiences viewing video content on YouTube. More than 300,000 people learned about their oral health from our videos, with a combined watch time of almost 6,000 hours. We also had the opportunity to deliver a series of webinars, with audiences of around 20,000 viewers.

Podcasts are another exciting area we continue to develop. More than 20 podcasts were released during the year and listened to by thousands of people.

Everybody, no matter what their situation, deserves to access quality oral health information. Our charity will continue to provide engaging and trustworthy oral health content a range of channels and platforms.





# Education

All organisations should be armed with the right tools to educate their patients, public and staff about oral health. That's why we are dedicated to creating a diverse range of programmes and resources for dental practices, hospitals, pharmacies, schools, workplaces and other community groups.

# Educational Resources

By driving up standards of education and working towards positive learning experiences, we can help inspire changes in behaviour that will improve the health of the mouth.

At the Oral Health Foundation, we provide high quality information and oral health education products to health professionals across the UK. In the last year, we have sent oral health resources to over 1,400 dental practices, health centres, hospitals and education centres, offering a product range of over 600 items.

One of the most popular choices amongst patients is our range patient leaflets. They are made up of 52 titles and give impartial and independent information on a range of oral health subjects, topics and treatments. All written in Plain English, we have sent out almost 200,000 this year alone.

Community oral health was supported even further as we sent out 44,000 toothbrushes, 9,000 tubes of toothpaste and 17,000 dental packs.

Children's books, diet advice and brushing demonstration models were also really popular this year.

Our own brand products are being added to every year, offering value and quality to the professionals seeking oral health education and motivation materials for the patient and the public alike. We are also committed to expanding our ecological and sustainable product range.

Dental practice products continue to be an integral part of our work, and with 50 years' experience of advising members of the public how to improve their oral health, we have a wealth of knowledge on the dentist-patient communication process and offer constant support to our customers.

To find out more about the Oral Health Foundation's educational resources, please visit our online shop at [www.dentalhealthshop.org](http://www.dentalhealthshop.org), or request a free catalogue by email at [order@dentalhealth.org](mailto:order@dentalhealth.org).





## Learning with Dental Buddy

Throughout this year we have been proud to continue our work with Dental Buddy – an educational programme to improve children’s oral health.

Dental Buddy invites dental professionals, teachers and educators to take up the challenge and deliver oral health learning in a bid to increase the oral health and wellbeing of children aged 3-11.

Dental Buddy creates a platform where basic lessons could be passed on directly to children themselves and teach them the value of good oral hygiene. The programme aims to increase the prominence, and quality of, oral health education in schools and we’re delighted to say that in the last year Dental Buddy has provided around 600 nurseries and schools with a range of free materials and resources.

This year’s, we were delighted to welcome the government’s decision to add oral health as a key learning across primary and secondary schools. It means that information on dental health is now included in teacher training materials, to help school leaders plan and implement the new statutory curriculum.

To coincide with these changes, we re-launched Dental Buddy, with a new design and updated materials. A huge thank you to the Wrigley Oral Health Care Programme for providing us a grant to do this. The changes ensure all information is in-line with evidence-based guidelines.

More than 17,500 people used Dental Buddy last year, taking advantage of our classroom worksheets, lesson plans and whiteboard software, with tens of thousands of downloads having been recorded.

Another of our toothbrushing programmes, Brush Time, had nearly 2,000 downloads.

Delivering positive oral health messages to children in local communities is something we feel very passionately about. We will continue to use Dental Buddy to build relationships between dental practices and their local schools, to ensure that children learn the right oral health messages at an early age.



# Policy and influence

To create a healthier future, we will champion initiatives with policy makers, to raise their awareness of the changes required to bring about significant improvements to oral health. To do this most effectively, we are determined to form partnerships with like-minded professionals and organisations while making sure oral health plays a more prominent role in the media agenda.

# Oral health in the media

As oral health inequalities widen, we realise that getting our messages out to different audiences is crucial. That's why our media team is in constant communication with newspapers and broadcasters.

During 2021/22, we had an extraordinary 1,655 press clips featured in national, regional, online news and magazines. We had major national coverage promoting oral health on average twice a week while we also took part in more than 150 radio and television interviews.

Remarkably, our wonderful messages that aim to educate and inform people about their oral health reached millions of people, not only in the UK, but around the world.

Important oral health advice was picked up by 51 countries across six continents. Coverage included major news outlets in the USA, Canada, Argentina, Brazil, Egypt, Senegal, India, Indonesia, Spain and Germany.

During the year, we raised the profile of mouth cancer in the media and gave people vital advice about accessing care during the crisis within NHS dentistry. We provided sound toothbrushing advice, information on tooth-friendly diets and the dangers of sugar. We also spent time with the press discussing the cost of living and issuing advice about ways to save money while achieving a healthy smile.

Our press team and spokespeople continually work with members of the media to make sure that the oral health information published or broadcast, is as accurate and trustworthy as possible.





## The ways we are influencing policy

As a charity looking to make a positive impact in the public arena, lobbying and influencing policy on all matters relating to oral health remains essential. In the past year, we have been working to affect the direction and decision-making on certain issues so that we can achieve a higher level of care and health.

This year, the Oral Health Foundation congratulated the WHO Member States on the adoption of the global oral health strategy. Announced at the 75th World Health Assembly, we believe this is a landmark approach to recognising and acting on the burden of oral health on health systems across the world.

The WHO oral health strategy is an important first step in reducing the billions of cases of oral disease across the world. Our charity will continue to support effective preventive measures, including being a voice in the upcoming WHO oral health global action plan.

Successful implementation of the global strategy and action plan depends on the committed and coordinated efforts from

Member States, including Europe. As a founding member of the Platform for Better Oral Health in Europe, we are in a key position to work closely with the WHO Regional Office for Europe to ensure the strategy is fulfilled through programmes across Europe.

We're delighted by the progress and continued success of our work with the Platform for Better Oral Health in Europe. This year, a focus was made towards driving policy actions concerning oral health policy by inclusion in the health policy agenda. This led to the targeting of MEPs to co-sign the 'The status of oral health in EU health policies' – a collaborative charter on the vision for oral health professionals' education in Europe.

There is also a growing need to position oral health as integral to wider EU policies for non-communicable diseases. Endorsing the full European-wide implementation of Ireland's 'Public Health Alcohol Act 2018' to Brussels, was just one of many examples of progressive policy changes that would improve the quality of life for millions of people. We also applaud Europe's NCDs Beating Cancer Plan.

Over the last year, we have also spent a great deal of time lending our support and joining forces with like-minded organisations who are petitioning on the behalf of the UK general public raising important issues with MPs, Lords and government agencies.

We have been thrilled to welcome the government's Health and Care Bill into water fluoridation. The policy sets out plans to transfer responsibility for water fluoridation to the Secretary of State to remove the burden from local authorities. Water fluoridation is the single most effective public health measure there is for reducing oral health inequalities and tooth decay rates, especially amongst children. We welcome these proposals and believe they represent an opportunity to take a big step forward in not only improving this generation's oral health, but those for decades to come.

We were delighted to see a ban of junk food advertising on television before 9pm. This is a real milestone for steering younger people away from sugary foods and drinks.

Frustratingly, there are many preventive policies in the UK that government have been diluted or rowed back on over the last year. Oral health inequalities continue to widen and what we are seeing from government suggests a lack of appreciation for the value of public health. This is not an approach we are willing to settle for.

For example, while a junk food ban on television



advertising has been welcomed, it stopped short of extending this to online advertising – an increasingly used medium for information and entertainment. This is just one instance of UK officials not doing enough to reduce the harm caused by sugar.

We have expressed our extreme disappointment around the withdrawal of proposals for the new dental contract and have been urging government to focus on a preventive model. We believe this is essential for a fully functioning NHS dental system, to meet the needs of a growing and aging population. Most importantly, we have campaigned for this because we see it as the primary route for driving up standards of oral health. We will continue to lobby government towards preventive ways of working, instead of using dental practices as a repair shop.

We have placed our support towards the government's pledge to end smoking in England by 2030 but there are already signs that this will be diluted. These measures would significantly reduce the growing number of mouth cancer cases, as well as other oral health diseases. More commitment must be made towards tobacco control. Smoking is an addiction, not a choice, and the government have a duty of care to support people to quit.



Equality and fairness is at the heart of the Oral Health Foundation and we will continue to endeavour to be a charity whose values and actions have a positive effect on all corners of society.

This year we have helped countless people improve the health of their mouth through providing education materials and resources, advice and information and by organising campaigns and events.





# Excellence

To continue to survive as a charity and help people with their oral health problems, it is important we work efficiently and cost-effectively. We also be entirely ethical and transparent about how we invest our money. We also pledge to run our organisation with excellence while being adaptable to changes and challenging environments.

# Evaluating the claims of oral health products with Accreditation

For over 25 years we have been proud to help both consumers and health professionals make informed choices about the dental products they buy.

The Oral Health Foundation's Accreditation programme gives consumers and groups the information, protection and education they need to be reassured and make informed choices about which oral care products are best for their own needs.

There are so many oral health products on the market and many claims as to their effectiveness being made. We believe that our independent accreditation programme is an extremely helpful tool for both consumer and retailer when it comes to choosing oral healthcare accessories.



We're delighted to report that it was another successful year for our Accreditation programme, both domestically and internationally. We have now 'Accredited' over 1,000 products across 60 countries, making it one of the largest accreditation-based oral health schemes in the world.

The scheme covers both major global brands and (supermarket) 'own brands' and the market for both these two areas remains strong, as dental care and oral hygiene continue to become part of mainstream consumer care. We accredit oral healthcare accessories for the top six supermarkets in the UK.

Accreditation activity continues to be buoyant, providing a stable income stream in challenging times.

What is particularly significant over the past year is how the organisations we are working with, are endeavouring to improve the environmental credentials of oral healthcare products. Many are experimenting with components and packaging to reduce the amount of plastic being used, as well as exploring innovations such as removable toothbrush heads, toothpaste tablets and the use of bamboo. Most recently we have approved Nuud Plastic Free Chewing Gum, a xylitol-based chewing gum which is not only good for oral health, it's also good for the planet!

We are looking forward to seeing more environmental innovation being introduced to the oral healthcare category and to working strategically with our partners to help the public choose quality oral health products when taking control of their oral health between practice visits.



## Treasuring our partnerships


At its heart, the Oral Health Foundation is an inclusive organisation that welcomes support and partnership opportunities from anybody interested in improving oral health. In 2021-22, we have been honoured to work with so many amazing people to have a positive influence on oral health.

As an independent charity, operating without government grants, we rely on the generosity and goodwill of our supporters to help us fulfil our mission of improving oral health.

We're proud to deliver activities and projects alongside a vast range of organisations – all of whom share our passion shaping the future of better oral health.

What we can do wouldn't be possible without the invaluable support of so many companies, brands and manufacturers from all over the world. We would like to say a huge thank you to the below, all of those who have helped the Oral Health Foundation's activities over the last year.

Proctor & Gamble | Wrigley Oral Health Care Programme | Align Technology | Johnson & Johnson | Unilever | Nestle | Philips Sonicare | Simplyhealth Professionals | The Guinness Partnership | Mouth Care Matters | Health Education England | Mouth Cancer Foundation | Masonic Charitable Foundation | Association of Dental Groups | Tepe | The Probe | Smile Magazine | Dental Update | Ace IT | The Access Group | Folio Typography | ABC Printing | Nuud Plastic Free Gum | Waterpik | Tepe | Babycup | Bambooth | Biomin | Fixodent | Tesco | Sainsbury's | Morrisons | Aldi | Lidl | Marks & Spencer | ASDA | Home Bargains | Primark | Firefly | Seabond | Clinomyn | McBride | Anchor | Royal Sanders | Fixodent | Beauty Formulas | Sarakan | Scottish Water | Dr M's Oral Brush | Unum Dental | Dencover | Peppersmith | Kingfisher | Platform for Better Oral Health in Europe | Medway | Dental Health Spa | Link Mailing | Dentsply | Henry Schein | Dentists' Provident | Velopex | DentalEZ | Blue Horisons | W&H | Associated Dental Products | MEDiVision | Ivoclar Vivadent | George Warman Publications | Takara Belmont UK | Natural Source Waters | NSK | J & S David | British Dental Industry Association | Closer Still Media | Mark Allen Group | British Dental Association | British Society of Dental Hygiene & Therapy | British Orthodontic Society | Purple Media | ASP Promotions | PKF Cooper Parry Group | Setform | Word Centre | House of Commons | Sir Paul Beresford MP | British Association of Dental Nurses | Department of Health | Faculty of General Dental Practitioners (UK) | General Dental Council | General Medical Council | Royal Society for Public Health | The Dental Defence Union | Joint Medical Command (Armed Forces) | The Royal Society of Medicine | Royal College Of Surgeons



The Oral Health  
Foundation believes  
in creating strong  
partnerships with like-  
minded people who  
ultimately want to help  
improve oral health.

If your company would like to get involved and support us in any of our activities, we want to hear from you. Please call us on 01788 546 365 or email [mail@dentalhealth.org](mailto:mail@dentalhealth.org)



# Income generation

Our campaigns, programmes and charitable work are not possible without the generous financial support of others. Over the next five years, we plan to create more opportunities for supporters to help us financially. In return, we will invest our resources in helping people achieve good oral health. The more money we can raise, the more we can do to help people to achieve better oral health.

# Financial summary

The last few years have been a challenging period for most organisations in the charitable sector. We have not been immune to these financial pressures and several of our income streams, especially income from supporters and the sale of educational resources, have come under pressure.

While the charity's income has not fully recovered to pre-pandemic levels, revenue has grown year-on-year.

Oral health education has risen well, highlighting greater spending by the public sector. Income from educational resources increased by 40% over the year.

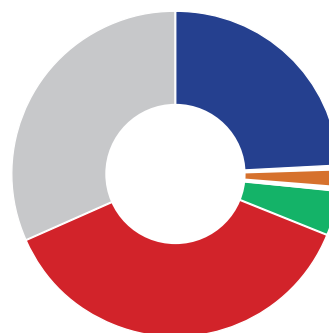
The charity's greatest strengths lay in its diverse portfolio of activities, broad customer base and independent income streams. Income from sponsorship and product accreditation have remained strong throughout this period. Revenue from product accreditation is now our largest income generator. In 2021-2022 it generated £349,264 – around 37% of all income.

The Oral Health Foundation continues to invest heavily in awareness campaigns and oral health initiatives. Despite sponsorship income for campaigns reducing by 9% year-on-year, the charity increased its investment into this area by 5%. Awareness campaigns continue to be a key driver in reaching mass audiences and forming healthier oral health behaviours.

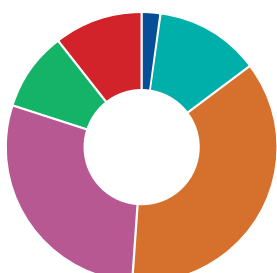
The charity continued to use its resources effectively and increased the amount of money invested in charitable activities. The charity spent over £940,000 improving oral health in 2021-22 – a 9% increase compared to the previous year. This included an investment of £84,968 into the running of the Dental Helpline.

By the end of the reporting period, the Oral Health Foundation had achieved an operating surplus of £2,000.

	Income 2021-22	%
	Donations, sponsorship and legacies	24.3%
	Furlough grant	0.3%
	Investment	1.9%
	Rental	0.3%
	Supporter subscriptions	4.5%
	Accreditation income	37.1%
	Education resource sales and related income	31.6%



	Expenditure 2021-22	%
	Supporter	2.4%
	Accreditation	13.2%
	Education resource sales	38.1%
	Information & awareness	28%
	Dental Helpline	9%
	Mouth cancer campaign	9.3%



# Report of the directors and trustees

The Directors present their report together with the financial statements for the year ended 31 July 2022.

## Structure, governance and management

The company is registered as a charity under the number 263198 and is governed by the memorandum and articles of association of the Oral Health Foundation whose Company registration number is 01027338. The company is limited by guarantee to the extent of £1 per member and has no share capital.

## Directors and trustees

The Directors of the company act as the Trustees and the Directors who served during the year are listed below.

Mhari Coxon RDH President

Dr Ben Atkins BDS (Immediate Past President)

Sarah Balsler

Janet Clarke

Dr Emanuele Cotroneo (resigned 13 June 2022)

Steven Hardiman (resigned 6 December 2021)

Professor Elizabeth Kay MPH PhD FDSRCPS FDSRCS (Retired by rotation 6 December 2021)

Professor Jonathon Timothy Newton

Tracey Posner (retired by rotation 6 December 2021)

Juliette Reeves

Dr Zahid Siddique BDS MPHARM

Professor Georgios Tsakos (appointed 6 December 2021)

## Recruitment and appointment of trustees

As set out in the articles of association, the Trustees are appointed by the members at the annual general meeting. The Trustees are the only members of the charity. Trustees are elected for a period of three years, as determined by the articles they may be re-elected for a further period of three years after which one year must elapse before any re-election except in the case of the President and President-Elect. The Immediate Past President may serve for a further period of two years after retirement as President.

The Trustee Board has the power to co-opt members between annual general meetings. The Trustees acknowledge their risk management responsibilities and have endorsed the risk register assessment and review it on a regular basis at least biannually.

The Trustees acknowledge that the management of Risk is high on their priorities of good governance. A risk assurance group, consisting of the Director of Operations, the Director of Finance, and two Trustees regularly review the register before it is presented to the Trustees for their review and approval. That way, the Trustees can have confidence that the changes have been scrutinised by their peers ahead of being presented with a summary of changes.

Going forward, managing risk and risk assurance reporting will fall under our 5th Strategic Objective: Excellence.

Five key risk areas are identified as:

1. Governance and Management e.g. inappropriate organisational structure, difficulties recruiting trustees with relevant skills, conflicts of interest.
2. Operational Risks e.g., IT and asset security, Structure and infrastructure disaster recovery plan, service quality and development, contract pricing, employment issues, health and safety issues, fraud and misappropriation.
3. Financial Risks e.g. accuracy and timeliness of financial information, adequacy of reserves and cash flow, diversity of income sources, investment management.
4. Environmental and External Factors e.g. public perception and adverse publicity, demographic changes, government policy, adverse social and environmental events.
5. Compliance Risk e.g. breach of trust law, employment law and regulatory requirements of activities, such as fund raising.

The organisation's risk register is a dynamic tool which is under constant review, it is approved twice a year by our team of Trustees. Earlier this year, the new external risks of global economic uncertainty and the invasion of Ukraine were added to the register. Mitigation measures are constantly monitored and revised to take account of impacts to the organisation such as energy costs, staff wellbeing and financial stability.

## Summary of changes

Addition of 'Risk date of Entry on Register': For each risk area identified post April 2017, the date of entry to the register has been added to the first column. For risk areas which were already on the in April 2017, when the new Director of Operations took on management of the register these risks have been marked as 'inherent risk' in the first column.

**Section 1: Governance – A SLIGHT INCREASE in risk level.** The key to decreasing risk in this area will be to carry out the strategic review which is now booked in for November the 16th. This will create an opportunity to assess strategic aims, review & plan for growth to alleviate the relatively static performance of the past decade. A restructure is currently underway to reduce the costs associated current Helpline service and to invest in new roles to help grow income and repurpose the patient information offering.



**Section 2: Managerial and Operational – A SLIGHT INCREASE in risk level.** Increased risk in this category has been noted due to the following reasons:

- HR Staff team changes – a restructure is underway. This will result in a number of redundancies from the Helpline department, as well as the creation of two new posts; one will enable better project management and business development to help propel the new preventive campaign and the other will focus on repurposing our advice and information service to ensure it has as wide a reach as possible and is accessible across multiple digital channels. Also, the organisation’s long standing finance director of 24 years, retires at the end of November. A replacement has been appointed and will commence in post with a month handover, from 1st November.
- Knowing the fair market value would empower the team when liaising with potential sponsors – A huge piece of work has been undertaken to properly evaluate and cost the teams resources in relation to delivering campaign content and packages. This has resulted in a substantial revision of the packages being pitched to potential corporate sponsors, particularly in relation to the preventive project.

**Section 3: Financial – NO CHANGE.** But risk currently higher than in prior years. This is due to cash-flow issues from reduced income and increasing terms on client invoicing.

**Section 4: External – NO CHANGE.** New risk added in March earlier in the year invasion of Ukraine by Russia. The energy cost risk is mitigated for now with fixed costs in place since Dec 2019 to December 2023. At time of writing, the situation and rhetoric from Russia is causing global concern. This threat, though slightly mitigated in terms of overheads continues to be monitored. Pound Sterling is at its lowest level against the dollar since the mid-80s. A new PM ‘mini budget’ has not arrested the recent decline – at time of writing the new PMs economic policy and budget announcements have seen the pound plummet further against the dollar.

**Section 5: Compliance – NO CHANGE.** All reports filed on time with regulatory bodies; a clean audit and a new business activity dynamic tool has been created and is being monitored / managed by Ops team.

Risk Area	Risk Identified	Mitigating Controls
Governance & Management	Ineffective Strategic Planning	Activities regularly reviewed to ensure alignment with strategic objectives.
	Trustee Conflicts of interest	Conflicts of interest item on the Board – updated every quarter. Conflict of interest register updated regularly.
Operational Risk	Structure, asset and infrastructure security	System disaster recovery plan and insurance in place.
	System Failures	Remote access & Comms. in place. IT back-up system renewed 2018.
	Assets Security	Insurances reviewed and renewed.
	Data Security	GDPR Policy in place.
	HR Issues /Loss of key staff	Employee handbook sets out HR policies. Flexible approach to home working now in place. Risk assessment and staff feedback carried out with changes implemented to safeguard staff from Covid.
Financial Risks	Income Reduction through loss of Sales, sponsors and activities	Fundraising/Development role refocussed to explore corporate income generation. Exploring digitalisation of educational resource offering. Redesigned existing campaigns to digitally.
	Cash flow	Daily bank reconciliation. Reserves management. Cash flow monitoring and projections.
Environment & External Factors	Brexit	Supply chain review.
	Global Recession	Prepare for no deal scenario. Cost saving measures and realistic budget planning.
	Pandemic	Mitigation measures implemented – staff working from home and job retention scheme deployed.
Compliance Risk	Non-compliance with legislation and regulations	Trustee sign-off on key documents.

## Trustee induction, training and evaluation

All Trustees receive appropriate induction to the Board. They are provided with a comprehensive induction pack prior to election or co-option. This includes relevant charity commission documentation and good practice documentation. Trustees are also expected to visit the charity head office to meet the team, within the first year of their post.

## Organisational structure

The full Trustee Board which consists of between 8-12 members meets at least four times a year. The Board is responsible for the governance, strategic direction and policies of the charity. The Chief Executive and other members of the senior management team attend and advise the Trustees as appropriate but are not voting members of the Board.

The Board delegates some powers relating to staff remuneration and other related issues to a Core Team consisting of the President, President-Elect and Trustee responsible for finance.

The Chief Executive, supported by the senior management team, is responsible for the day to day running of the charity and delivery of the annual business plan objectives to a budget agreed by the Board.

## Pay policy for senior staff

The key personnel of the Foundation consist of the board of directors (trustees) and the senior management team in charge of directing, controlling and running the day to day operations. All directors are unpaid and give up their time freely. Details of directors' expenses and related party transactions are disclosed in notes 12 & 25.

The pay of the senior staff is reviewed annually by the Core Team, CPI and wage inflation are used as benchmarks for this review.

# Public Benefit

Good oral health forms an essential part of general health and wellbeing. Since the Oral Health Foundation was established in 1971, it has played its part in transforming the nation's oral health.

Today, the collective push to improve oral health in the UK has resulted in:

- 11 million more adults having 21 or more of their natural teeth compared to 1978.
- Over 9 million more adults having their own teeth compared to 30 years ago.
- 30% more adults visiting their dentist regularly compared to 1978.
- 10 million fewer adults smoking compared to 30 years ago.
- 61% increase in 12-year-olds free of decay since 1973.

Education and information has helped to underpin this transformation and the Oral Health Foundation has made the following unique contribution in 2021/2022:

- Launching two new campaigns to help people achieve better oral health.
- Providing important oral health resources and materials to over 1,400 organisations.
- Sending out more than 17,000 dental packs and giving hundreds of schools and nurseries access to our children's oral health programmes.
- Distributing in excess of 100,000 Tell Me About leaflets to communicate and educate patients about good oral health.
- Giving personal advice to more than 6,500 people contacting our free Dental Helpline, staffed by a team of dental care professionals.
- Providing information to more than 2 million people seeking trusted dental advice from our websites.
- Continuing to independently assess dental health products to help inform consumers. More than 1,000 dental products across 60 territories have been approved since the product accreditation scheme was established 25 years ago.
- Raising oral health awareness in the media with more than 1,600 news stories in print press, radio and television.

When planning charitable activities, reviewing our aims and objectives and at meetings with the Board of Trustees, our Trustees have paid attention to the Charity Commission's guidance regarding public benefit.

## Financial Review

A year in which the Oral Health Foundation continues to adjust it's activities to the changes to dentistry following the Worldwide pandemic and rise in cost of living.

In 2021-22, a surplus of £0.5k (2021: £45.6k surplus) was generated from the charity's day to day activities before investment gains and losses.

## Investment Policy

The charity policy for the investment of available funds is that they should be held in investments that can be realised in the medium to short term. The investments should be of low to medium risk as a safeguard to hedge against the reduction in purchasing power by inflation.

Rathbone Investment Management oversees the investment portfolio. The Trustees monitor investment performance against standard policies and meet with the portfolio managers when appropriate during the year.

## Reserves Policy

The management has examined the charity's requirements and has established a policy where the reserves not committed or invested in tangible assets held by the Oral Health Foundation should be at least 6 months operating costs plus a contingency for unplanned repairs to the building. This equates to a reserve policy of £600,000. Levels are reviewed annually and are based on working capital requirements, future capital spending, allowance for unexpected contingencies and the financing of appropriate projects in line with the company's aims and objectives.

The company's free reserves (being unrestricted reserves excluding tangible fixed assets) amounted to £975,648 at July 2022 (2021: £995,581).

The company's unrestricted reserves amounted to £1,195,788 at 31 July 2022 (2020: £1,226,780).

## Responsibilities of the Directors and Trustees

The Trustees (who are also Directors for the purposes of company law) are responsible for preparing the Directors' and Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepting Accounting Practice).

Company law requires the Directors to prepare financial statements for each financial year which

give a true and fair view of the of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Directors are required to:

- Select suitable accounting policies and then apply them consistently.
- Observe the methods and principles in the Charities SORP 2019 (FRS102).
- Make judgements and estimates that are reasonable and prudent.
- State whether applicable UK accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Directors are responsible for maintaining adequate accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

### Provision of information to auditors

In so far as the Directors are aware:

- There is no relevant audit information of which the charitable company's auditor is unaware.
- The Directors have taken all steps that we ought to have taken to make ourselves aware of any relevant audit information and to establish that the charity's auditor is aware of that information.

The Directors are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of the financial statements may differ from legislation in other jurisdictions.

### Auditor

The auditor, Cooper Parry Group Limited, will be proposed for re-appointment in accordance with section 485 of the Companies Act 2006.

On behalf of the Board

Mhari Coxon RDH

Smile House, 2 East Union Street, Rugby, Warwickshire, CV22 6AJ

5 December 2022

# Independent auditor's report

## Opinion

We have audited the financial statements of Oral Health Foundation (the 'charity') for the year ended 31 July 2022 which comprise the Statement of financial activities, the Income and expenditure account, the balance sheet, the statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- Give a true and fair view of the state of the charitable company's affairs as at 31 July 2022 and of its incoming resources and application of resources, including its income and expenditure for the year then ended.
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice.
- Have been prepared in accordance with the requirements of the Companies Act 2006.

## Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the United Kingdom, including the Financial Reporting Council's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Trustees with respect to going concern are described in the relevant sections of this report.

## Other information

The other information comprises the information included in the annual report other than the financial statements and our auditors' report thereon. The Trustees are responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

## Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the Trustees' report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- The Trustees' report has been prepared in accordance with applicable legal requirements.

## Matters on which we are required to report by exception

In the light of our knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' report.

We have nothing to report in respect of the following matters in relation to which Companies Act 2006 requires us to report to you if, in our opinion:

- Adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Trustees' report and from the requirement to prepare a Strategic report.



## Responsibilities of directors

As explained more fully in the trustees' responsibilities statement, the Trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

## Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Our assessment focussed on key laws and regulations the charitable company has to comply with and areas of the financial statements we assessed as being more susceptible to misstatement. These key laws and regulations included but were not limited to compliance with the Companies Act 2006, Charities Act 2011, Charities (Protection and Social Investment) Act 2016, taxation legislation, data protection, anti-bribery and employment legislation.

We are not responsible for preventing irregularities. Our approach to detecting irregularities included, but was not limited to, the following:

- Obtaining an understanding of the legal and regulatory framework applicable to the charitable company and how the charitable company is complying with that framework, including agreement of financial statement disclosures to underlying documentation and other evidence.
- Obtaining an understanding of the charitable company's control environment and how the charitable company has applied relevant control procedures, through discussions with Trustees and other management and by performing walkthrough testing over key areas.

- Obtaining an understanding of the charitable company's risk assessment process, including the risk of fraud.
- Reviewing meeting minutes of those charged with governance throughout the year.
- Performing audit testing to address the risk of management override of controls, including testing journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for bias.

Whilst considering how our audit work addressed the detection of irregularities, we also considered the likelihood of detection based on our approach. Irregularities arising from fraud are inherently more difficult to detect than those arising from error.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities](http://www.frc.org.uk/auditorsresponsibilities). This description forms part of our auditors' report.

## Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

## Glen Bott FCA

Senior Statutory Auditor for and on behalf of:

*Cooper Parry Group Limited*

*Chartered Accountants and Statutory Auditor*

*Cubo Birmingham, Office 401, 4th Floor, Two Chamberlain Square, B3 3AX*

5 December 2022

# Statement of Financial Activities

Including Income and Expenditure Account - for the year ended 31 July 2022

	Note	2022	2021
		£	£
<b>Income from</b>			
Donations, sponsorship and legacies		228,662	252,532
Furlough grant		3,145	38,759
Investment		18,214	13,246
Rental		2,600	2,000
Council grant		0	10,000
Supporter subscriptions		42,371	46,556
Accreditation income	3	349,264	328,751
Education resource sales and related income		297,724	212,609
<b>Total income</b>		<b><u>941,980</u></b>	<b><u>904,562</u></b>
<b>Expenditure on</b>			
Supporter	4	22,914	20,514
Accreditation	5	123,680	106,629
Education resource sales	6	358,509	312,142
Information & awareness	7	263,648	249,425
Dental Helpline	8	84,968	81,679
Mouth cancer campaign	9	87,812	88,522
<b>Total expenditure</b>		<b><u>941,531</u></b>	<b><u>858,911</u></b>
Net income for the year before other recognised gains and losses	14	449	45,651
<b>Other recognised (losses) / gains</b>			
Realised gains on investment assets	16	7,357	13,226
Unrealised (losses) / gains on investment assets	16	(38,798)	86,952
<b>Net Movement in Funds</b>	19	<b><u>(30,992)</u></b>	<b><u>145,829</u></b>
Fund balances brought forward		<u>1,226,780</u>	<u>1,080,951</u>
<b>Fund balances carried forward</b>	19	<b><u>1,195,788</u></b>	<b><u>1,226,780</u></b>

All of the charitable company's activities are continuing and relate to unrestricted funds.

# Balance Sheet

at 31 July 2022

	Note	2022		2021	
		£	£	£	£
<b>Fixed Assets</b>					
Tangible fixed assets	15		220,140		231,199
Investments	16		<u>719,928</u>		<u>737,964</u>
			<u>940,068</u>		<u>969,163</u>
<b>Current Assets</b>					
Stocks		62,132		74,412	
Debtors	17	178,673		182,779	
Cash at bank and in hand		<u>144,407</u>		<u>177,323</u>	
		<u>385,212</u>		<u>434,514</u>	
Creditors: amounts failing due within one year	18	(129,492)		(176,897)	
Net Current Assets			255,720		257,617
<b>Net Assets</b>			<u>1,195,788</u>		<u>1,226,780</u>
<b>Represented by:</b>					
Unrestricted Funds	19		<u>1,195,788</u>		<u>1,226,780</u>

The notes on pages 54 to 64 form part of the financial statements. Approved and authorised for issue by the Board of Directors on 5 December 2022.



Mhari Coxon RDH  
President, Oral Health Foundation

# Statement of Cash Flow

For the year ended 31 July 2022

	Note	2022	2021
		£	£
Cash flow from operating activities	26	<u>(34,679)</u>	<u>60,387</u>
Cash flow from investing activities			
Payments to acquire tangible fixed assets	15	(3,045)	(8,235)
Purchase of investments	16	(150,713)	(174,790)
Proceeds from sale of investments	16	156,849	66,466
Net Cash movement on investments	16	(19,542)	50,168
Interest & Dividends received on listed investments		18,211	13,238
Bank Interest		3	8
Net cash flow from investing activities		<u>1,763</u>	<u>(52,695)</u>
Net increase in cash and cash equivalents		<u>(32,916)</u>	<u>7,692</u>
Cash and cash equivalents at start date 2021		177,323	169,631
Cash and cash equivalents at end date 2022		<u>144,407</u>	<u>177,323</u>

# Notes to the Financial Statements

## 1 Company Status

The company is registered as a charity. It is limited by guarantee to the extent of £1 per member and has no share capital.

## 2 Principal Accounting Policies

The principal accounting policies of the company are set out below:

### Basis of preparation of financial statements

The financial statements have been prepared under the historical cost convention apart from investments which are stated at market value. The financial statements have been prepared in accordance with applicable accounting standards, the Companies Act 2006 and the Statement of Recommended Practice “Accounting and Reporting by Charities” issued in October 2019 (SORP (FRS102)). The Charity meets the definition of a public benefit entity under FRS102.

### Cash flow statement

The charity’s cash flow statement reflects the presentation requirements of FRS102.

### Incoming resources

Voluntary income including donations, sponsorship and legacies are recognised when there is an entitlement, certainty of receipt and the amount can be recognised with sufficient reliability.

### Investment income is recognised on a receivable basis.

Income from charitable activities includes the accreditation of dental products, sales of educational resources and website licensing income and is recognised as earned.

Any part of the income received, which relates to a period beyond the balance sheet date, is carried into the following year as “unexpired proportion of subscriptions and website licensing received.”

Accreditation, subscriptions and intellectual property licensing once received are non-refundable.

### Resources expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category.

Costs of generating funds are those costs associated with attracting voluntary income and those incurred in trading activities that raise funds.

Charitable expenditure includes those costs incurred in the delivery of the charity's activities and services to its beneficiaries. It includes both the direct costs and the indirect support costs.

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include audit fees and costs relating to strategic management.

Governance costs are now apportioned on the same basis as other support costs.

Support costs include general overheads and administration and have been allocated to activities on a basis consistent with staff time and estimated usage.

### Investments

Investments are stated at market value as valued by the Company's investment advisers. Income arising on investments is accounted for as it accrues. Movements in the valuation of investments are shown as realised and unrealised gains and losses in the statement of financial activities.

### Tangible fixed assets

Expenditure on fixed assets over £1,000 is capitalised.

Depreciation is calculated by the straight-line method and aims to write down the cost of both intangible and tangible fixed assets over their expected useful economic lives.

The rates applicable are: Computer equipment	1 year
Equipment, fixtures & fittings	5 years
Freehold buildings	50 years

### Stocks for resale

Stock is stated at the lower of cost and net realisable value.

### Debtors

Trade debtors are recognised at the settlement amount due after any trade discounts offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

### Cash at bank and in hand

Cash in bank and cash in hand includes cash only.

## Creditors and provisions

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably.

## Taxation

The company has been granted exemption from corporation taxes under sections 486 and 487 of the Corporation Taxes Act 2010.

## Leased assets

All leases are regarded as operating leases and the total payments made under them are charged to the statement of financial activities on a straight-line basis over the lease term.

## Defined contribution pension scheme

Contributions are charged to the statement of financial activities as they become payable in accordance with the rules of the scheme.

## Funds

Funds held by the charity are either:

Unrestricted general funds – these are funds which can be used in accordance with the charitable objects at the discretion of the Directors.

Designated funds – these are funds set aside by the Directors out of unrestricted general funds for specific future purposes or projects.

Restricted funds – these are funds which must be used in accordance with the restrictions placed on them by the funder.

Transactions in foreign currencies are recorded using the rate of exchange ruling at the date of the transaction. Monetary assets and liabilities denominated in foreign currencies are translated using the rate of exchange ruling at the balance sheet date and unrealised and realised gains and losses in translation are included in the Statement of Financial Activities.

## 3 Incoming Resources

	2022	2021
	£	£
Accreditation income is derived from the following geographical markets:		
UK	316,748	287,191
Europe	15,026	20,945
Rest of the World	<u>17,490</u>	<u>20,615</u>
	<u>349,264</u>	<u>328,751</u>



4 Expenditure: Supporters	2022	2021
	£	£
Supporters direct costs	399	245
Salaries	15,560	13,846
Overheads & support costs	<u>6,955</u>	<u>6,423</u>
	<u>22,914</u>	<u>20,514</u>

5 Expenditure: Accreditation	2022	2021
	£	£
Accreditation of dental products	4,511	598
Salaries	81,666	76,360
Overheads & support costs	<u>37,503</u>	<u>29,671</u>
	<u>123,680</u>	<u>106,629</u>

6 Expenditure: Educational Resource Sales	2022	2021
	£	£
Cost of sales	146,294	109,875
Direct costs	58,532	48,372
Salaries	113,954	126,074
Overheads & support costs	<u>39,729</u>	<u>27,821</u>
	<u>358,509</u>	<u>312,142</u>

7 Expenditure: Information and Awareness Campaigns	2022	2021
	£	£
Projects	20,112	27,639
Publicity	44,067	28,039
Salaries	163,345	162,120
Overheads & support costs	<u>36,124</u>	<u>31,627</u>
	<u>263,648</u>	<u>249,425</u>

8 Expenditure: Dental Helpline	2022	2021
	£	£
Publicity	577	473
Salaries	78,417	75,917
Overheads & support costs	<u>5,974</u>	<u>5,289</u>
	<u>84,968</u>	<u>81,679</u>

9 Expenditure: Mouth Cancer Awareness	2022	2021
	£	£
Publicity	15,634	11,452
Salaries	64,525	69,579
Overheads & support costs	<u>7,653</u>	<u>7,491</u>
	<u>87,812</u>	<u>88,522</u>

10 Governance Costs (allocated under support costs)	2022	2021
	£	£
Overheads & support costs	1,744	1,367
Salaries	42,950	34,096
Other support costs	13,342	6,749
Audit, consultancy & professional fees	<u>16,890</u>	<u>13,658</u>
	<u>74,926</u>	<u>55,870</u>

## 11 Allocation of Support Costs

The Foundation allocates its support costs as shown in the table below. Support costs are allocated on a basis consistent with the use of resources and staff time.

Support Cost	Resources	Accreditation	Supporters	Info & Aware	Mouth Cancer	Helpline	Governance	Total
	£	£	£	£	£	£	£	£
Overheads	6,828	4,097	1,618	9,559	2,185	2,757	773	27,817
Depreciation	1,966	1,179	393	2,752	629	786	157	7,862
Amortisation	1,560	936	312	2,185	499	624	125	6,241
General Office	4,122	2,469	823	5,762	1,317	1,621	611	16,725
Finance	843	186	335	246	237	186	78	2,111
Governance (note 10)	24,410	28,636	3,474	15,620	2,786	0	0	74,926
Governance (overhead)	-----	-----	-----	-----	-----	-----	(1,744)	(1,744)
	<u>39,729</u>	<u>37,503</u>	<u>6,955</u>	<u>36,124</u>	<u>7,653</u>	<u>5,974</u>	<u>0</u>	<u>133,938</u>

## 12 Staff Costs

	2022	2021
	£	£
Wages and salaries	456,993	452,421
Social security costs	43,920	46,749
Staff insurance and benefits	25,386	25,376
Other pension costs	<u>33,849</u>	<u>33,446</u>
	<u>560,148</u>	<u>557,992</u>

The Directors were reimbursed a total of £2,560 for expenses incurred during the year ended 31 July 2022 (2021: £0).

The Directors received no other remuneration or emoluments during the year.

	2022 Number	2021 Number
Employees earning £60,000 per annum or more:		
£130,000 - £139,999	1	1

Pension contributions in the year for these employees amounted to £12,772 (2021: £12,496).

The key management personnel of the Foundation comprise the trustees, the Chief Executive and members of the senior management team. The total employee benefits of the key management personnel of the Foundation were £323,581 (2021: £318,027).

The average number of employees analysed by function was:

	2022	2021
Direct charitable activities	8	8
Income producing activities	2	3
Administration	3	4
	13	15

### 13 Defined Contribution pension scheme

The company pays contributions to a personal pension fund which is available to all employees. The pension cost charge represents contributions payable by the company to the fund and amounted to £33,849 (2021: £33,446). No contributions were payable to the fund at the year end. No Directors qualified for benefits and no contributions were paid to Directors.

### 14 Net outgoing resources

	2022	2021
	£	£
Net outgoing resources are stated after charging/ (crediting):		
Depreciation and amortisation	14,104	10,663
Auditors' remuneration	8,500	6,500
Operating lease rentals:		
- plant and machinery	-	1,316
Rental income	(1,500)	(2,000)

15 Fixed Assets	Freehold land & buildings	Fixtures & fittings	Computer equipment	Office equipment	Total
	£	£	£	£	£
<b>Cost</b>					
At 1 August 2021	348,065	22,379	44,568	36,797	451,809
Additions	<u>0</u>	<u>0</u>	<u>3,045</u>	<u>0</u>	<u>3,045</u>
<b>At 31 July 2022</b>	<b><u>348,065</u></b>	<b><u>22,379</u></b>	<b><u>47,613</u></b>	<b><u>36,797</u></b>	<b><u>454,854</u></b>
<b>Depreciation</b>					
At 1 August 2021	125,652	22,379	40,007	32,572	220,610
Charge for the year	6,241	-	6,013	1,850	14,104
<b>At 31 July 2022</b>	<b><u>131,893</u></b>	<b><u>22,379</u></b>	<b><u>46,020</u></b>	<b><u>34,422</u></b>	<b><u>234,714</u></b>
<b>Net book value</b>					
<b>At 31 July 2022</b>	<b><u>216,172</u></b>	<b><u>0</u></b>	<b><u>1,593</u></b>	<b><u>2,375</u></b>	<b><u>220,140</u></b>
At 31 July 2021	<u>222,413</u>	<u>0</u>	<u>4,561</u>	<u>4,226</u>	<u>231,199</u>

16 Fixed Asset Investments	2022	2021
	£	£
<b>Market Value</b>		
At 1 August	737,964	580,080
Additions	150,713	174,790
Disposals	(156,849)	(66,466)
Realised investment gains	7,357	13,226
Unrealised investment gains	(38,798)	86,952
Net cash movement	19,542	(50,618)
<b>At 31 July</b>	<b><u>719,928</u></b>	<b><u>737,964</u></b>

The investments consist of a share portfolio managed by stockbrokers Rathbones, primarily held to provide an investment return for the charity. All investment assets were held in the UK. All shareholdings are of listed companies. The historic cost at 31 July 2022 was £616,100 (2021: £590,053).

Investments held at market value comprised:

	2022	2021
	£	£
Equities	567,737	593,218
Interest securities	107,960	120,057
Cash held within investment portfolio	<u>44,231</u>	<u>24,689</u>
	<u>719,928</u>	<u>737,964</u>

## 17 Debtors

	2022	2021
	£	£
Amounts falling due within one year		
Trade debtors	101,133	144,758
Prepayments and other debtors	<u>77,540</u>	<u>38,021</u>
	<u>178,673</u>	<u>182,779</u>

## 18 Creditors: amounts falling due within one year

	2022	2021
	£	£
Trade creditors	29,682	36,388
Social security and other taxes	52,972	57,177
Accruals and deferred income	31,614	65,012
Unexpired proportion of supporter income received	14,666	17,691
Unexpired proportion of intellectual property licensing	558	629
	<u>129,492</u>	<u>176,897</u>

## Deferred Income

	Safe Smiles	Website	Supporter Income	Total
	£	£	£	£
Balance at 1 August 2021	50,000	629	17,691	68,320
Amount released to incoming resources	(50,000)	(629)	(17,691)	(68,320)
Amount deferred in the year	14,000	558	14,666	29,224
Balance at 31 July 2022	<u>14,000</u>	<u>558</u>	<u>14,666</u>	<u>29,224</u>

## 19 Reconciliation of movement in funds

	2022	2021
	£	£
Unrestricted funds		
Balance at 1 August	1,226,780	1,080,951
Income	941,980	904,562
Expenditure	(941,531)	(858,911)
(Losses) / gains	(31,441)	100,178
<b>Balance at 31 July</b>	<b><u>1,195,788</u></b>	<b><u>1,226,780</u></b>

## 20 Analysis of net assets between funds

	2022	2021
	£	£
Unrestricted funds		
Tangible fixed assets	220,140	231,199
Investments	719,928	737,964
Net current assets	<u>255,720</u>	<u>257,617</u>
<b>Total</b>	<b><u>1,195,788</u></b>	<b><u>1,226,780</u></b>

## 21 Guarantee

The company is limited by guarantees of £1 per member.

## 22 Other financial commitments

There were no financial commitments at 31 July 2022 (2021: NIL).

## 23 Contingent liabilities

At the year end, there were no contingent liabilities.

## 24 Commitments under operating leases

Total future minimum lease payments under non-cancellable operating leases are as follows:

	2022	2021
	£	£
Rent of plant and machinery:		
Due within one year	360	339
Due 2-5 years	-----	-----

## 25 Related party transactions

The Oral Health Foundation made sales to Ben Atkins director. The value of the sales was £152.25 (2021: £152.25). At 31st July 2022, the balance owed was £nil (2021: £nil).

The Oral Health Foundation made sales to Positive Communications Global Ltd, a company in which one of the Directors of the Oral Health Foundation, Tracey Posner, is also a director. The value of the sales was £48,600 (2021: £102,000). At 31st July 2022, the balance owed by Positive Communications was £nil (2021: £nil).

The Oral Health Foundation made purchases from Purple Media, a company in which one of the directors of Oral Health Foundation, Steve Hardiman is a director. The value of the purchases was £6,354 (2021: £5,160). At 31 July 2022, the balance owed by Oral Health Foundation was nil (2021: £nil).

## 26 Reconciliation of net movement in funds to net cash flow from operating activities

	2022	2021
	£	£
Net Movement in funds	(30,992)	145,829
Adjustment for:		
Depreciation & Amortisation	14,104	10,663
Investment income	(18,214)	(13,246)
Loss / (gain) on investments	31,442	(100,178)
Decrease in stock	12,280	21,404
Decrease / (increase) in debtors	4,106	(53,897)
(Decrease) / Increase in creditors	(47,405)	49,812
Net Cash generated in activities	<u>(34,679)</u>	<u>60,387</u>



The Oral Health Foundation campaigns to address the inequalities in oral health. We're a registered UK charity which relies on donations from the public, as well as the dental and health profession. Become a supporter. Your donation will be warmly received and will allow us to continue our important mission of providing independent and impartial information, education and advice to those who need it most.