

BRIGHT: Brushing RemInder 4 Good oral HeaLTh

Information for Young People

Funded by
NHS
National Institute for
Health Research

What is BRIGHT?



- BRIGHT is a research project.
- The aim of BRIGHT is to find out how we can help young people stop getting tooth decay and toothache.



- Your school has been chosen to take part in BRIGHT.
- Pupils in Year 7 and Year 8 are being invited to take part if they have a mobile phone.

What will it involve?



- To take part, you would need to share your mobile number with the research team.
 - Your mobile number will be stored safely.
- Some classes will get a lesson about dental health and text messages.
 - The text messages will only be about tooth brushing.
 - We want to see if this helps young people look after their teeth.

Group A

A dental health lesson and text messages

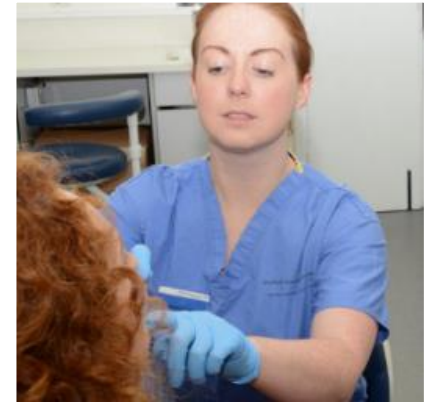
Group B

No dental health lesson or text messages

What will it involve?



- Completing some simple questionnaires at school (6 or 8 questionnaires over 3 years).
- Let a dentist look at your teeth at school (3 times over 3 years).
 - This will only take 10-15 minutes.



Questionnaire 
BRIGHT

How often do you usually brush your teeth?

- More than three times a day
- Three times a day
- Twice a day
- Once a day

- We will also ask your parents/carers to complete some simple questionnaires if they want to.
- All information about you will be kept confidential (private).

Why should I take part?



- We hope our project results will help other young people in the future to have healthy teeth.
- If you complete the first questionnaires and dental assessment, you will be given a £10 shopping voucher.
- If you complete the final questionnaires and dental assessment, you will be given a £5 shopping voucher.



What happens next?



BRIGHT


- Give your parents/carers the information pack about BRIGHT.
- This pack includes information for your parents/carers and information for you.
- You can talk about whether you want to take part in BRIGHT with your parents/carers.



What happens next?



- Your parents/carers can return an opt out form if they would prefer for you to **not** take part.
- Bring that back to school and give it to your form teacher



Parent/Carer Opt Out Form
BRIGHT: Brushing RemInDer 4 Good oral HealTh

To be completed by the parent/carers

A research project called BRIGHT is starting in your child's school. The project aims to reduce tooth decay in school children and is explained in the enclosed Parent/Carer Information Sheet [[V.X. Date](#)].

If you are happy for your child to make their own decision about taking part in BRIGHT, there is no need to return this form. If you do not return this form by the date listed on the school cover letter, we will assume that you are happy for your child to take part in BRIGHT if they would like to.

If you DO NOT want your child to take part in BRIGHT, please tick the box below and complete and return this form to your child's school.

I DO NOT want my child to take any part in the BRIGHT trial

Name of Parent/Carer (please print) _____

Signature of Parent/Carer _____ Date _____

Name of child (please print) _____

Date of birth of child


Day Month Year

We have sent you two copies, please return one copy to your child's school and keep the other for your information.

If you have any questions or would like further information, please contact the BRIGHT trial team:

<p>BRIGHT Trial Team - York Trials Unit ARRC Building University of York Heslington YORK YO10 5DD Tel: 01904 521083 Email: yu-bright@york.ac.uk</p>	<p>[INSERT SITE SPECIFIC CONTACT DETAILS]</p>
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BRIGHT has been funded by the NIHR HTA. For more information please visit:
<https://www.york.ac.uk/healthresearch/>
BRIGHT Parent Carer Opt Out Form V3.0 20180718 IRAS ID 223377



NIHR
National Institute for
Health Research

What happens next? I want to take part




BRIGHT

- If your parents/carers are happy and you want to take part, you sign a consent form.
- The consent forms will be given out in form time.
- We will give you an information sheet at the same time to help you decide.

Young Person Consent Form

BRIGHT: Brushing RemInDer 4 Good oral Health



School ID Participant ID For office use only

Name of Lead Researcher: Professor Nicola Innes Sponsors: University of Dundee & Tayside Health Board
Clinical Trials Unit: York Trials Unit (YTU)

- If you agree to the following sentences, please **initial** the boxes:
1. I have read the information provided for young people [V3.0 20180724] about BRIGHT. I have had the chance to think about the information, ask questions and my questions have been answered.
 2. I understand that it is my choice to take part and I can change my mind at any time without giving a reason. I understand it will not change anything at school, my usual dental care or my legal rights.
 3. I understand that personal information that identifies me collected during the study will be stored in York Trials Unit, University of York (my mobile telephone number, name for text messages, and any text messages I send back will also be stored at the University of Dundee). It may be looked at by some members of the research team, the Sponsors or other responsible people to check the research is being done well. I agree for them to see my information.
 4. I understand that my school will share information about me and that my parents/carers may share information about me with the research team.
 5. I understand that the information collected about me by the research team will be used to support other research in the future and may be shared with other researchers working with the sponsors, but they will not be given my name.
 6. I agree for personal information (such as my name and home postcode) to be used to find out other information about my dental health, that is collected by the NHS, for up to 5 years at the end of BRIGHT (such as NHS Digital and NHS National Administrative Health Data).
 7. I would like to take part in BRIGHT.

Please fill in the below boxes using capital letters:

First name: Last Name:

Date of Birth:
Day Month Year

Do you have your own mobile telephone? Please cross one box. Yes No

Please sign or write your name again in the box below to say you would like to take part:

Signature:

Today's date:
Day Month Year

We have given you two copies of this form, one should be given to your teacher or a BRIGHT researcher and you should keep the other one as a reminder about BRIGHT.

BRIGHT has been funded by the NHS HTA. For more information please visit
<http://www.york.ac.uk/healthresearch/bright>

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Questions



- Thank you for listening
- Do you have any questions?

