



Solent **NHS**
NHS Trust

Saving Smiles

*Supervised tooth brushing programme handbook
Local standards for nursery and pre-school*



Introduction

This handbook is for frontline staff working in the early years nursery and pre - school setting and will help with the implementation and delivery of a daily supervised tooth brushing programme. One hardcopy manual will be provided to each participating setting. Further copies will be available electronically.

Daily toothbrushing with a suitable fluoride toothpaste is an effective means of helping to prevent tooth decay (Delivering Better Oral health 3rd Ed, 2014). Establishing a daily supervised toothbrushing programme within nursery and pre-school settings is central to the Oral Health Initiatives actively promoted by Public Health England and local authorities.

Oral health is central to healthy living and a key marker of the health of a community. Good oral health makes an important contribution to an attractive appearance, self-esteem and quality of life.

Many of the factors associated with poor oral health are common to other health conditions such as obesity. Your role as a child carer is very important, as many children spend a significant amount of time in an early years setting. You are able to offer early interventions which can prevent dental disease and offer support to parents and carers to enable them to make healthier food choices and provide oral care in the home.

Children may suffer dental pain or other adverse consequences as a result of poor dental health, are reliant on their carers to seek treatment for them.

If you are concerned about a child's dental health, please raise this with the child's parent or guardian, or your local Oral Health Improvement Practitioner.

Regular tooth brushing and a healthy diet, low in added sugar, are crucial for securing good oral health.



The aim of the programme

Young children are learning all the time from what they see as well as what they are taught. The aim of the programme is to improve the health of children's teeth. This will be achieved by:

- improving tooth brushing skills to develop a habit for life
- increasing the number of children using fluoride toothpaste in the Early Years setting in addition to tooth brushing at home
- raising awareness of good oral health practice with parents/carers and children
- sign posting to dental services.

Resources

Resources will be available to the setting:

- Toothbrushes and toothpaste. Allowance is one new brush per child per term and six tubes of toothpaste per 30 children per term. Extra toothbrushes are provided as replacements in the event that they are dropped on the floor or worn out.
- Brush buses/racks to store toothbrushes in.



Tooth brushing consent

We advise that consent should be obtained before the child can take part in tooth brushing within the setting. However consent may be withdrawn by the child or parent/carer.

This will be retained by the setting for their records and used in accordance with the Data Protection Act (1998).

Staff training

At least one member of staff should be nominated to be responsible for the setting up and running of tooth brushing programme and managing the stock.

All staff involved will have received appropriate training for the programme from an Oral Health Improvement Practitioner.

Staff training will be recorded and monitored.

The setting will receive regular updates and support from the Oral Health Improvement Team.



Model A – tooth brushing at a sink:

- the supervisor and child should wash their hands before and after the tooth brushing session to prevent cross-infection
- the child (under supervision) is responsible for collecting their toothbrush from the storage system. Discretion should be used if a child has special care needs
- toothpaste is dispensed following the appropriate methods (Standard 2).
- tooth brushing takes place at the identified sink area
- ideally, no more than two children are permitted at each available sink. They should be closely supervised and encouraged to spit excess toothpaste into the sink
- tissues/paper towels must be disposed of immediately in a refuse bag.

Toothbrushes can either be:

1. returned to the storage system by each child and taken to an identified sink area by the supervisor, who is responsible for rinsing each toothbrush individually under cold running water
 2. rinsed at a designated sink area where each child is responsible for rinsing their own toothbrush under cold running water. The supervisor or the child can be responsible for the control of the running tap.
- after rinsing of the toothbrushes is complete, the child or the supervisor is responsible for shaking off excess water into the sink. Toothbrushes should not come into contact with the sink
 - each child (under supervision) is responsible for returning their toothbrush to the storage system to air dry. Discretion should be used if a child has special care needs. Lids should be replaced at this stage provided that there is sufficient air circulation
 - paper towels should be used to mop up all visible drips on the storage system
 - all supervisors are responsible for rinsing sinks after tooth brushing is completed.

Model B – tooth brushing in dry areas

- the supervisor and child should wash their hands before and after the tooth brushing session to prevent cross-infection.
- the child (under supervision) is responsible for collecting their toothbrush from the storage system. Discretion should be used if a child has special care needs
- toothpaste is dispensed following the appropriate methods (Standard 2)
- children may be seated or standing while tooth brushing takes place
- after tooth brushing is completed, children should spit excess toothpaste into either a disposable tissue, disposable paper towel or a disposable cardboard cup
- tissues/paper towels must be disposed of immediately after use in a refuse bag.

Toothbrushes can either be:

1. returned to the storage system by each child and taken to an identified sink area by the supervisor, who is responsible for rinsing each toothbrush individually under cold running water
 2. rinsed at a designated sink area where each child is responsible for rinsing their own toothbrush under cold running water. The supervisor or the child can be responsible for the control of the running tap.
- after rinsing of the toothbrushes is complete, the child or the supervisor is responsible for shaking off excess water into the sink. Toothbrushes should not come into contact with the sink
 - each child (under supervision) is responsible for returning their own toothbrush to the storage system to air dry. Discretion should be used if a child has special care needs. Lids should be replaced at this stage provided that there is sufficient air circulation
 - paper towels should be used to mop up all visible drips on the storage system
 - children up to the age of 7 (at least) should be supervised.

Standards for nursery and pre - school tooth brushing programmes

Standard 1: Organisation

1. The programme is available for all children, regardless of whether they attend nursery, or pre - school full-time or part-time.
2. All settings have a designated lead person who is responsible for the tooth brushing programme.
3. Dental support and guidance is available to all settings
4. All staff involved in delivering tooth brushing programmes have received appropriate training in tooth brushing and cross-infection procedures.
5. Staff training is recorded and monitored.
6. Performance against the standards is monitored in each setting at least once every term with a checklist. More frequent visits should be undertaken when appropriate.
7. We advise arrangements for consent are in place.
8. The tooth brushing handbook and an abbreviated version are available for parents/carers to see.



Standard 2: Effective preventive practice

Children use an appropriate and effective quantity of toothpaste while minimising cross-contamination.

1. Toothpaste containing at least 1000 ppm (parts per million) fluoride is used.
2. A smear of toothpaste (0–2 years) or small pea-sized amount (over 3 years) is used.
3. Where toothpaste is shared, a supervisor dispenses it onto a clean surface such as a plate or paper towel.
4. There is sufficient spacing between the quantities of dispensed toothpaste to allow collection without cross-contamination.
5. Toothpaste must only be dispensed at the time the child is ready to brush.
6. Where children have their own tubes of toothpaste and dispense it, they should be closely supervised.
7. Supervisors should cover any cuts, abrasions or breaks in their skin with a waterproof dressing and wear appropriate gloves.
8. Toothbrushes and brushing techniques are appropriate and are able to be used effectively by each child.
9. Toothbrushes and brushing techniques are appropriate to the age and ability of the child.



10. Toothbrushes are replaced at least once a term, or sooner if required, eg when the bristles become splayed.
11. Toothbrushes are individually identifiable for each child.
12. Tooth brushing is organised in a safe and effective way which is integrated with nursery, school and home routines.
13. Each child, whether full-time or part-time, only brushes once a day in a tooth brushing programme.
14. Children are closely supervised when brushing their teeth.
15. Tooth brushing takes place at a time which is most suitable for each setting.
16. Tooth brushing takes place in groups or individually with children seated or standing.
17. Children are discouraged from swallowing toothpaste during or after brushing their teeth. Discretion should be used if child has special care needs.
18. After tooth brushing, brushes are rinsed thoroughly and individually under cold running water and replaced in the storage system to allow them to air dry.
19. The tooth brushing programme uses either Model A or Model B.



Standard 3: Prevention and control of infection

1. Toothbrush storage systems comply with best practice in the prevention of cross-contamination.
2. Toothbrushes are stored in appropriate storage systems or individual ventilated holders.
3. Storage systems enable brushes to stand in the upright position.
4. Storage systems allow sufficient distance between toothbrushes to avoid cross-contamination.
5. Storage systems display symbols corresponding with those on the toothbrushes to allow individual identification.
6. Storage systems which do not have covers are stored within a designated trolley or in a clean, dry cupboard.
7. Storage systems in toilet areas must have manufacturers' covers and be stored at adult height or in a suitable trolley.
8. Appropriate cleaning procedures are in place to ensure that cross infection risks are minimised.
9. Dedicated household gloves should be worn when cleaning storage systems and sinks. All cuts, abrasions and breaks in the skin are covered with a waterproof dressing before tooth brushing and cleaning is carried out.
10. Storage systems, trolleys and storage areas are cleaned, rinsed and dried at least once a week (more if soiled) by nursery/primary staff using warm water and household detergent.
11. Care is taken to ensure that toothbrushes do not cross contaminate when being removed from or replaced in storage systems.
12. The storage system should not be placed directly beside the children while tooth brushing takes place to avoid contamination via spray.
13. Storage systems are replaced if cracks, scratches or rough surfaces develop.
14. Any toothbrushes dropped onto the floor are discarded.
15. Toothbrushes must not be soaked in bleach or other cleaner/ disinfectant. Tubes of toothpaste can be cleaned with a damp tissue.

Supporting information:

- the toothpaste provided to the nursery and pre school settings is free from animal derivatives
- while it is usually recommended that tooth brushing should not directly follow the consumption of acidic foods and drinks, it is acceptable for settings to opt to brush at any time throughout the day. In these circumstances, it is considered that the benefits of decay prevention outweigh concerns about dental erosion
- it is not recommended that children rinse their mouths after brushing. Rinsing after brushing significantly reduces the benefits of fluoride. Spit don't rinse
- disinfectant wipes are not recommended for the brush bus/ rack systems. Wash with household detergent and warm water as this removes the majority of relevant micro organisms
- rough surfaces including labels on racks/buses can encourage the growth of harmful micro organisms, damaged racks therefore need replacing
- while some tap water supplies in nursery and pre school settings are not technically of drinking water quality, they are considered suitable for rinsing toothbrushes as water is not ingested
- ideally settings taking part in the programme should have sinks available that are designated for tooth brushing and personal hygiene.
- local monitoring of tooth brushing programmes will take place once per term. Monitoring will include observation of the tooth brushing session and discussion of the Standards with the key nursery lead.





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