

Highbury Primary School & Nursery



Oral Hygiene Policy

Promoting oral health in Early Years is essential to protect young teeth and establish good habits. Oral health is important, even with baby teeth. This is because children's teeth:

- Help them to bite and chew
- Support speech and language development
- Help them feel confident when they smile
- Make space for and help to guide adult teeth

Good oral health also keeps children free from toothache, infection and swollen gums. Tooth decay happens when sugars from food and drinks interact with bacteria in tooth plaque. This results in acid production, causing holes in teeth known as cavities. Tooth decay is largely preventable but it is still a serious problem among young children. Having decayed teeth removed is also the most common reason for surgery under a general anaesthetic for children aged 6 to 10.

Implementation

At Highbury Primary School & Nursery we support children with oral health in the following ways:

- By limiting the amount of free sugars children eat and drink at our setting
- By ensuring children have access to fresh drinking water all day
- By encouraging children to drink from an open-top cup or free flow beakers
- By practising tooth brushing on dolls and toys
- By using a set of model teeth and encouraging the children to use a toothbrush to remove 'plaque'
- By carrying out supervised toothbrushing using the Brush Bus Programme

The Brush Bus Programme

The Brush Bus programme is a supervised tooth brushing activity which takes place every day in schools and nurseries across the country to reduce tooth decay in children.

Why carry out supervised toothbrushing?

Reviews of multiple research studies show that the daily application of fluoride toothpaste to teeth reduces the incidence and severity of tooth decay in children. However, children in more deprived areas are less likely to brush their teeth at least twice daily.

Targeted childhood settings such as nursery and school settings can provide a suitable supportive environment for children to take part in a supervised toothbrushing programme, teaching them to brush their teeth from a young age and encourage support for home brushing.

The evidence tells us that to maximise caries prevention children aged 0 to six years should brush their teeth at least twice a day with family fluoride toothpaste (containing 1350-1500 part per million ppmF), with under three-year-olds using a smear and three- to six-year-olds a pea sized amount. They should spit not rinse after brushing and toothbrushing should be supervised by an adult.

The evidence tells us that brushing each day at school over a two-year period is effective for preventing tooth decay and can establish life-long behaviour to promote oral health. It is also important that school based toothbrushing activity should promote and support toothbrushing in the home as well as the school or early years setting.

Process

Staff are responsible for the toothbrushing programme daily and all staff are familiar with the Core Standards (Appendix 1).

Each child is allocated his/her own toothbrush which corresponds to the symbol on the brush rack. The brush rack meets Government cross infection guidelines. The symbols screen printed on each rack correspond with the symbols printed on the toothbrushes to allow children and adults to easily identify their brush.

A member of staff is responsible for placing the fluoride toothpaste on to a paper towel before transferring it to a dry toothbrush. Children are asked to swallow any saliva in their mouth prior to commencing toothbrushing and will be encouraged to use the paper towel to wipe away any excess toothpaste afterwards. Rinsing out is discouraged.

Toothbrushes will be rinsed thoroughly under cold running water before being replaced in the brush rack. Brushes will NOT be soaked in Milton or any other disinfectant solution. The brush rack is cleaned once a week using warm water and soap.

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Oral Hygiene Policy – Appendix 1

Core standards for Brush Bus Toothbrushing Programme

Toothbrushing in a dry area

1. The supervisor or child is responsible for collecting the toothbrush from the brush rack.
2. An unfolded disposable paper towel is placed on the desk in front of the child and the appropriate amount of toothpaste is dispensed onto the paper towel by the supervisor.
3. Children may be seated or standing whilst toothbrushing takes place.
4. After toothbrushing is completed, children can wipe away excess tooth paste into the disposable paper towel.
5. Tissues/paper towels must be disposed of immediately after use in a refuse bag.
6. Tooth brushes can either be:
 - a) Returned to the brush rack by each child and taken to an identified sink area by the supervisor who is responsible for rinsing each tooth brush individually under cold running water.
 - b) Rinsed at a designated sink area where each child is responsible for rinsing their own brush under running water. If children are unable to do this themselves, a member of staff must undertake this activity.
7. After the rinsing of the toothbrushes is complete, the child or the supervisor is responsible for shaking off excess water into the sink.
8. Toothbrushes are returned to the brush rack by the supervisor or child and allowed to dry.
9. Disposable paper towels should be used to clean any drips visible on the brush rack and the lid must be replaced as soon as the brushes have air dried. The brush racks should be cleaned once a week using warm soapy water then allowed to air dry.
10. Toothbrushes do not need to be soaked in Milton or other cleaner/disinfectant.
11. Cleaning must be carried out by an appropriate adult who is also responsible for rinsing sinks after toothbrushing is completed.
12. Local monitoring of the toothbrushing programme will take place at timely intervals. This may involve an observation of the toothbrushing session or a telephone call to obtain feedback.