

Doncaster Toothbrushing Club Toolkit



Doncaster
Council

The information within this toolkit has been amended to reflect the fact we are now “living with Covid 19”. We acknowledge that the guidance might change again. Toothbrushing clubs will be made aware of any changes to guidance as they occur, and advised on how new guidance may impact on the running of toothbrushing clubs.

Contents

1.	Introduction	P.2
2.	Public Health Contact details	P.2
3.	Setting up a toothbrushing club	P.3-7
4.	Effective preventive practice	P.8
5.	Infection prevention and control	P.9-12
6.	Carrying out the toothbrushing club	P.12-13
7.	References	P.14
8.	Appendices	P.15 - 32

1. Introduction

The oral health of children in Doncaster is worse than the national average. 37.2% of 5-year-olds in Doncaster have experience of tooth decay, compared with the national average of 23.4%, with each child having around 4 teeth affected (PHE, 2019).

Poor oral health can cause pain and infection, which can affect sleeping, eating, speaking, playing and socialising with other children.

Every time we eat sugary food and drink, bacteria in dental plaque produce acid which attacks the teeth. If we eat or drink sugary foods frequently throughout the day these acid attacks can lead to holes developing in the teeth - tooth decay.

Tooth decay can be prevented by brushing teeth with a toothpaste containing fluoride. Fluoride strengthens teeth and makes them more resistant to the acid attacks.

Early years providers have a responsibility to promote the health of children in their setting, as set out in the Early Years Foundation Stage Strategic Framework. Good oral health can form a part of this. 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 promoting toothbrushing at home. The Doncaster Council Public Health Team is supporting settings to run supervised toothbrushing clubs.

2. Contact Details for the public health team

For advice about setting up a toothbrushing club, training supervisors, ordering resources and other advice, please contact:


Laura Quinn
Public Health Improvement Co-ordinator
Laura.quinn@doncaster.gov.uk
01302 737260

If Laura is not available, please contact
Public Health Enquiries
publichealthenquiries@doncaster.gov.uk
01302 862146

3. Setting up a toothbrushing club

- The toothbrushing club should have a designated lead, who is responsible for the toothbrushing club in the setting and for liaising with the Doncaster Council Public Health Team who manage the toothbrushing programme.
- An agreement outlining the roles and responsibilities of the council and staff in the setting should be completed (see Appendix 1)
- All staff involved in the club, should:
 1. read this Doncaster Toothbrushing Club Toolkit;
 2. Receive training before supervising a session
 3. At least one person per setting must attend a council supervised toothbrushing training session led by Laura Quinn. The designated lead must attend this training, and additional staff are also welcome to attend. The designated lead should then disseminate the training to all the other staff supervising the toothbrushing sessions back at the setting.
- Training should be recorded and monitored, and any new staff who may need training should be identified and trained before they supervise any sessions.
- Doncaster Council Public Health Team will provide initial start-up toothbrushes, toothpaste, S-racks and covers. They will also replenish toothbrushes and toothpaste as required. It is the setting's responsibility to order new stock when required by notifying the Public Health Team with at least 3 weeks' notice.

The table below shows resources required to deliver supervised toothbrushing and additional information about the equipment.

Equipment	Information
<p>S-racks and ventilated covers</p>  <p>'S' Rack 10</p> <p>Available with cover Holds 10 Toothbrushes</p>	<p>These have picture symbols pre-printed on them by each slot, which correspond to those pre-printed on the toothbrushes. Each child has an individual picture symbol. The toothbrushes stand upright with the bristles pointing towards the front of the rack so they do not touch each other or the cover. There should be a separate S-rack for each 'group/class' of children. Larger groups/classes will need multiple S-racks. Where there are multiple S-racks being used, they should be different colours.</p> <p>Please label the S-racks and covers with an identification number in indelible pen. Please label each rack cover with the word 'front' so that it is always replaced on its rack in the same orientation</p>
<p>An individual toothbrush with individual picture symbol for each child</p>	<p>Each toothbrush has a pre-printed picture symbol which corresponds with those by each slot in the S-rack. In addition, please write the child's name and rack number on the toothbrush in indelible pen. A layer of clear nail varnish over the markings may help them stay on. Each child's brush should be returned to their own slot in their designated rack following brushing. Toothbrushes should be replaced termly or as soon as they appear damaged, the bristles are splayed, or if it falls on the floor or touches another brush.</p> <p>The S- racks, covers and pre-printed toothbrushes must be supplied by AMS</p>

	<p>International (www.amsinternational.net/) to ensure compatibility and correct fit. Always contact the public health team for replacements.</p>
Fluoride toothpaste	<p>Containing 1350-1500ppm fluoride (check packaging for amount), and free from animal products. Please contact the Public Health Team for additional supplies. Specific non-foaming toothpastes can be used for children with swallowing difficulties. If this applies to any child in your care, please contact the Public Health team for further information.</p>
Paper towels and plates	<p>Individual paper towels are used for toothpaste to be dispensed onto and excess toothpaste to be spat into following brushing. Toothpaste may also be dispensed onto a paper plate with sufficient spacing between the quantities of toothpaste to allow transfer to each child's brush without cross- contamination. Not provided by Public Health.</p>
Hand sanitiser, and sink area for hand washing and rinsing brushes	<p>Supervisors and children must wash their hands (or use hand sanitiser) before and after the toothbrushing session and cover cuts/abrasions/breaks in skin with a waterproof dressing.</p> <p>Brushes must be rinsed individually by each child immediately after use in cold running water and toothpaste not left to dry on the brush. Brushes must not contact the sink/tap. Leave the water running so children don't touch the taps.</p>

Personal Protective Equipment (PPE)	Supervisors are not routinely required to wear PPE apart from household gloves for cleaning, because they should not be brushing any child's teeth or touching any of the toothbrushes. However they may wish to wear disposable latex-free nitrile gloves.
Household gloves and standard cleaning and disinfection products (e.g. detergents and bleach)	For cleaning and disinfection of S-racks, covers, trolleys, storage area, toothbrushing area and sinks. These will not be provided by Public Health
Wall charts (Refer to appendix 5)	Will be given to each setting by Public Health once training has been completed. They are available for all settings taking part. Please write the colour of the rack and rack number on the wall chart. Write children's names against their individual picture symbol.

- Children aged 2 and over may participate in the toothbrushing club. Please note, children will be brushing their own teeth. Supervisors must not brush any child's teeth or touch any of the toothbrushes. Any child taking part must be able (under supervision) to:
 - collect their own toothbrush from their slot in the S-rack
 - transfer their dispensed blob of toothpaste onto their brush
 - brush their own teeth
 - rinse their own toothbrush after use, and
 - replace it back into the correct slot in the correct S-rack
- Parents/carers of children should be provided with a letter informing them about the toothbrushing club, and asking for their consent (model letter in Appendix 2).
- The setting must keep the consent form in the child's personal file.
- All staff must be aware of any children not consented to take part in the class or not taking part for medical reasons.

- There are very few medical reasons why children should not take part in the club. However, anyone who has respiratory symptoms or has tested positive for COVID-19 should not participate. Children with other infections or oral ulceration (e.g. mouth ulcers or cold sores), may be temporarily excluded. Toothbrushing at home can continue as this will usually aid healing. If parents/carers inform nursery/school of specific medical conditions (e.g. cystic fibrosis, blood borne viruses) advice regarding the risk for individual children may be sought by contacting the public health team and local health protection team. For further information, see the health protection in education and childcare settings guidance. <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>
- Decide on a convenient time to run the club each day.
- Ensure children are well supervised during the club.
- Ensure infection, prevention and control processes are always followed. These are described from Page 9-12.
- Ensure quality assurance assessments are carried out by staff in the setting once every term, and by the Public Health Improvement Co-ordinator once a year, using the checklist in Appendix 4. Completed quality assurance checklists should be emailed to:
laura.quinn@doncaster.gov.uk

4. Effective preventive practice

Toothbrushing clubs should be set up and run in such a way that children receive the most benefit:

- Each child, whether full-time or part-time, brushes once a day as part of the supervised toothbrushing club. In addition, parents and carers are encouraged to brush their child's teeth at home.
- Toothbrushing takes place at a time which is most suitable for each setting.
- Toothbrushing takes place in groups or individually with children seated or standing for two minutes.
- Children are closely supervised when brushing their teeth.
- Toothpaste containing 1,350 – 1,500 ppm F (parts per million fluoride) should be used. This is stated on the side of the tube or on the packaging.
- Specific non-foaming toothpastes can be used for children with swallowing difficulties. If this applies to any child in your care, please contact the Public Health Team for advice.
- Toothpaste is dispensed by a supervisor.
- A smear of toothpaste is used for children under three (Figure 1), and a pea-sized amount for children aged three to six years (Figure 2)

Figure 1:



Figure 2:



- Children should be discouraged from swallowing toothpaste during or after brushing their teeth. Toothpaste is not reapplied if swallowed.
- After brushing, children spit out residual toothpaste and don't rinse.
- A small headed toothbrush with medium texture bristles is recommended.
- Toothbrushes are replaced termly or as soon as they appear damaged, the bristles are splayed, or if the toothbrush has fallen on the floor or touches another brush.
- Toothbrushes are available with adaptations for those with special needs.

5. Infection prevention and control

Toothbrushes are a possible source of cross infection. Good hygiene practice should be an essential part of childcare in nursery and school settings. Toothbrush storage systems (S racks and covers) should comply with best practice in the prevention of cross-contamination.

In order to ensure best practice in infection prevention and control it is important that toothbrushing clubs follow the guidance below:

- Supervisors and children should wash their hands or use hand sanitiser before and after the session and should cover any cuts, abrasions or breaks in their skin with a waterproof dressing.
- Ensure the water being used meets drinking water standards.
- Supervisors are not routinely required to wear PPE apart from household gloves for cleaning, because they should not be brushing any child's teeth or touching any of the toothbrushes. However they may wish to wear disposable latex-free nitrile gloves.
- Only the dry brushing method is permitted (see section 6). Wet brushing at a sink is no longer recommended as it is considered more likely to risk droplet and contact transmission and offers no additional benefit to oral health over dry brushing. Children may sit/stand during brushing but the area surrounding them should be easy to clean and disinfect, and well ventilated.
- When a toothpaste tube is shared, the toothpaste must not be put directly onto the toothbrushes. Instead, supervisors should dispense a small amount of toothpaste onto a clean surface such as an individual paper towel or onto a paper plate for the child to transfer onto their brush.
- If toothpaste is being put onto a paper plate there must be sufficient spacing between the quantities of dispensed toothpaste to allow transfer to each child's brush without cross-contamination.
- Toothbrushes must be individually labelled for each child with a pre-printed picture symbol (which matches the picture by their slot on their rack), their name and S-rack number, enabling each child to be able to recognise their own brush. Names and S- rack numbers should be written clearly with indelible pen. You can apply a layer of clear nail varnish over the labels to stop them wearing off. Children are responsible for collecting their own toothbrushes from the rack.

- After toothbrushing, brushes and handles are rinsed thoroughly and individually under cold running water by the child and replaced back into their S-rack by the child to allow them to air dry. Toothbrushes should not be washed together in the sink and should not touch the taps or sink when being rinsed. The supervisor should leave the tap running, to avoid children needing to touch the taps.
- Toothbrushes must not be soaked in bleach or other cleaner/disinfectant.
- Toothbrushes must be replaced termly or if damaged, bristles splayed, fall on the floor or touch another brush.
- Most Doncaster settings are currently using S-racks and covers (supplied by AMS International) to store the toothbrushes (please speak to Public Health for advice if you are using a different system). These have picture symbols pre-printed on them by each toothbrush slot, which correspond to those pre-printed on the toothbrushes. The toothbrushes stand upright with the bristles pointing towards the front of the rack so they do not touch each other or the cover to avoid cross contamination. There should be a separate S-rack for each 'group' of children. Larger groups will need multiple S-racks. Where there are multiple S-racks being used in a setting, they should be different colours. Please label the S-racks and covers with an identification number in indelible pen.
- Each child (and the supervisors) must know their toothbrush and rack slot picture, and the colour and number of their rack. They should be able to identify their own brush and rack, and must always replace their brush in their own slot in their rack following rinsing.
- Wall charts (Appendix 5) are available from Public Health to write in children's names against their corresponding picture for each S-rack. Please also write the colour and number of the rack.
- S-racks and covers should allow air-flow around the toothbrush heads to enable the toothbrushes to dry. Covers should only be used once brushes have dried or if they allow sufficient ventilation to allow drying. (If using the S-rack ventilated covers, they may be placed straight away). Please label each rack cover with the word 'front' so that it is always replaced on its rack in the same orientation.
- S-racks and covers are stored within a designated toothbrush storage trolley or in a clean, dry cupboard. S-racks in toilet areas must have manufacturers' covers which allow the free flow of air, be stored at adult height or in a suitable toothbrush storage trolley.
- Cuts, abrasions and breaks in the skin should be covered with a waterproof dressing and dedicated household gloves should be worn

when cleaning and disinfecting S-racks, covers, trolleys, storage area, toothbrushing area and sinks.

- Use the standard cleaning and disinfection products (e.g. detergents and bleach) which your setting has decided to use as part of the system of controls during COVID-19. They should be effective against bacteria and viruses. For further information, see the infection prevention and control chapter in the health protection in education and childcare settings guidance. <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>
- All surfaces in the toothbrushing area and sinks should be cleaned and disinfected **after every toothbrushing session** using the setting's standard cleaning and disinfection products such as detergents and bleach.
- S- racks, covers, trolleys and storage areas should be cleaned and disinfected, rinsed and dried **at least once a week** (more if soiled) by staff using the setting's standard cleaning and disinfection products such as detergents and bleach. Rinse with hot water.
 - The S-rack may also be washed in the top shelf of a dishwasher, however please be aware that dishwasher cleaning would remove any identification stickers.
 - Please ensure that cleaning and disinfection products meet manufacturers' guidelines and do not remove the picture symbols/labels
 - Cleaning and disinfection of the S-racks and covers should ideally be done once children have collected their brushes to commence brushing.
- The S-racks and covers should not be placed directly beside where toothbrushing takes place or beside the toilet area to avoid contamination via aerosol spread.
- S-racks and covers should be replaced if cracks, scratches or rough surfaces develop.
- Care must be taken to ensure that toothbrushes do not cross-contaminate when being removed from or replaced into the S-racks by the child. Supervisors must not touch any of the brushes or brush any child's teeth.

Anyone who has respiratory symptoms or has tested positive for COVID-19 or has another infectious disease must not take part in the toothbrushing club. The health protection in education and childcare settings guidance provides details around specific infectious diseases and how to contact the UKHSA Health Protection Team for advice in the event of a case(s) having taken part in the supervised toothbrushing club. <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Please ensure you ask for specific advice regarding your supervised toothbrushing club. While awaiting this advice, please suspend your supervised toothbrushing club and inform the Public Health Team.

- **6. Carrying out the toothbrushing club**

Before starting a toothbrushing club session, it is important to ensure all the equipment is ready to use. Children should brush for at least 2 minutes. You may wish to time this using an egg timer or have a brushing song playing in the background.

Toothbrushing in dry areas (only permitted method)

1. The supervisors and children should wash their hands or use hand sanitiser before the toothbrushing session, and cover any cuts, abrasions or breaks in their skin with a waterproof dressing to prevent cross infection. Supervisors may also wish to wear disposable nitrile gloves.
2. The children under supervision collect their own toothbrush from their rack.
3. Toothpaste is dispensed by the supervisor. When a toothpaste tube is shared, the toothpaste must not be put directly onto the toothbrushes. Instead, supervisors should place a small amount of toothpaste onto a clean surface such as an individual paper towel or onto a paper plate for the child to transfer onto their brush. There must be sufficient spacing between the quantities of dispensed toothpaste to allow transfer to each child's brush without cross-contamination.
4. Children may be seated or standing while toothbrushing takes place, but ensure toothbrushing area is easy to clean and disinfect and well-ventilated.
5. After toothbrushing is completed, children should spit excess toothpaste into a paper towel (encourage children to raise the tissue to their mouths to do so) and wipe their mouths.
6. Paper towels and paper plates must be disposed of immediately after use in a refuse bag.
7. Each child is responsible for rinsing their own toothbrush and handle in

turn under cold running water at an identified sink, under supervision. This should be done straight away so the toothpaste doesn't dry on the brush. Toothbrushes must not be washed together.

8. The supervisor should leave the tap running so the child doesn't need to touch the tap.
9. After rinsing of the toothbrushes is complete, the child is responsible for shaking off excess water into the sink. Toothbrushes should not come into contact with the sink or tap.
10. Each child, under supervision, is responsible for returning their own toothbrush to their own slot in the correct rack to air dry. Ventilated S-rack covers should be replaced in the correct orientation (front labelled) on their rack at this stage, as they will allow brushes to dry. (If a non-ventilated cover is being used, it should be replaced once brushes have dried.)
11. Paper towels should be used by supervisors to mop up all visible drips on the S-racks.
12. Supervisors should cover cuts/abrasions/breaks in skin with a waterproof dressing and wear household gloves for cleaning and disinfection. Supervisors are responsible for cleaning and disinfecting surfaces in the toothbrushing area and sinks after each toothbrushing session is completed. S-racks, covers, trolleys and storage areas should be cleaned and disinfected at least once a week (at a time when the brushes have been collected by the children).
13. After the toothbrushing session is complete, children and supervisors must wash their hands (or use hand sanitiser).

A key information sheet is included in Appendix 3, which is intended to be kept as a reference document for supervisors.

7 .References

Public Health England (2020) Covid-19: Guidance for supervised toothbrushing programmes in early years and school settings. Available at: <https://www.gov.uk/government/publications/covid-19-supervised-toothbrushing-programmes> [Accessed 07/07/2022]

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Department for Education (2022). Emergency planning and response for education, childcare, and children's social care settings. Available at: <https://www.gov.uk/government/publications/emergency-planning-and-response-for-education-childcare-and-childrens-social-care-settings> [Accessed 07.07.2022]

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UKHSA (2022). Living safely with respiratory infections, including COVID-19. Available at: <https://www.gov.uk/guidance/living-safely-with-respiratory-infections-including-covid-19> [Accessed 07.07.2022].

Appendices

APPENDIX 1

Agreement between partners involved in toothbrushing club

This agreement sets out the roles and responsibilities of Doncaster Council and staff at settings carrying out toothbrushing clubs

Doncaster Council Public Health Team responsibilities

1. Provide every setting with the Doncaster Toothbrushing Club Toolkit July 2022 for implementation, and any relevant updates.
2. Provide the supervised toothbrushing club starter training sessions and refresher sessions to ensure effectiveness and safe delivery of the scheme. Training includes infection prevention and control.
3. Have access to a dental professional for advice if needed.
4. Provide initial and ongoing resources to support the toothbrushing club.
5. Ensure that parents are fully informed about the programme, through providing setting with appropriate information and consent letter.
6. Check the Doncaster Toothbrushing Club Toolkit is being followed at the setting, and that quality assurance checklists are being completed by the setting every term
7. Check procedures at each establishment at least once in an academic year, through observation of a toothbrushing club session and completion of a quality assurance checklist.
8. Records kept of all the above.
9. Use information from the oral health needs assessment to identify areas where children are at high risk of poor oral health and appropriate for targeted supervised toothbrushing programmes.
10. Ensure appropriate governance and performance monitoring processes are in place.
11. Facilitate co-ordination of programmes across the locality preventing duplication and maximising use of resources

Child care (Family Hub/nursery/school) staff responsibilities

1. Ensure there is a named lead with overall responsibility for the toothbrushing club in the setting
2. The designated lead must: attend a Doncaster Council starter supervised toothbrushing club training session or attend local on-site training; and must have read and retained a copy of the Doncaster Toothbrushing Club Toolkit July 2022.
3. Commitment to the toothbrushing club, providing supervised toothbrushing on a daily basis and following the Doncaster Toothbrushing Club Toolkit.
4. Ensure the programme follows infection prevention and control procedures as described in the Doncaster Toothbrushing Club Toolkit.
5. Send information letters and consent forms out to parents/carers and follow-up.
6. Consent forms – are kept by the nursery/school setting in the child's personal file and all staff are aware of those children not taking part in the toothbrushing club.
7. Ensure staff are aware of any children not taking part (temporarily or permanently) in the toothbrushing club for medical reasons.
8. Put in place systems that ensure all equipment and resources used are appropriate, looked after, and checked regularly in line with the Doncaster Toothbrushing Club Toolkit.

9. Contact the Public Health team for new staff to be trained.
10. Contact the Public Health team when additional stocks of toothbrushes, toothpaste and S-racks and covers are required
11. Contact the Public Health team for advice or queries about the toothbrushing club.
12. Complete a quality assurance checklist once a term and send/email a copy to the Doncaster Public Health team

Provision of equipment

1. Initial set-up equipment and ongoing resources (toothbrushes, toothpaste and S-racks and covers) will be provided by Doncaster Public Health. The resources are ordered in from an external supplier, therefore the setting must give Public Health a minimum of 3 weeks' notice when new supplies are required.

Opting out of the programme

If, at any time, the decision is made to stop running the toothbrushing club, the setting lead should immediately inform the Doncaster Council Public Health team. As toothbrushing club resources remain the property of Doncaster Council Public Health, arrangements will be made to collect any surplus stock and the S-racks and covers. If a nursery/school stops running the toothbrushing club after parents have given permission/consent, the head teacher/manager is responsible for informing the parents of the decision to withdraw and for informing school governors.

Name of setting.....

Approximate number of children taking part in
toothbrushing club in setting

Lead	Signature	Date	Contact details: address, telephone number, email address
Doncaster Council Public Health Improvement co-ordinator			
Family Hub/ Nursery/school setting toothbrushing club lead person			

APPENDIX 2

Contact details for setting

Date

Dear Parent/Carer

Re: Supervised Toothbrushing Club

We are giving children aged 2 and over (amend as appropriate) the opportunity to take part in a supervised toothbrushing club, as part of a wider Doncaster Council toothbrushing programme. This letter will explain about the toothbrushing club, why we are doing it, and what you need to do if your child would like to take part.

What will the toothbrushing club involve?

All children taking part in the toothbrushing club will be provided with their own toothbrush, and will brush their teeth with a fluoride toothpaste once a day when they attend the Family hub/nursery/school (delete as appropriate). They will be closely supervised by staff who have received oral health training. All toothbrushes will be kept in a covered toothbrush storage unit to keep them clean, labelled clearly for individual identification, and will be replaced every term (or sooner if needed).

Why are we doing it?

Over a third of 5-year-olds in Doncaster have tooth decay. Fluoride toothpaste is proven to help strengthen teeth and prevent tooth decay. It is really important that we all brush our teeth twice a day as part of a good dental health routine. The toothbrushing club will provide an extra opportunity for this to happen; as well as reinforce what is taught at home.

The toothbrushing club does not replace toothbrushing at home, so please continue to brush your child's teeth twice a day at home (last thing at night and one other occasion). For maximum prevention of tooth decay check on the packaging that it contains 1350-1500 parts per million (ppm) fluoride. Use a smear of toothpaste for children under 3 years and a pea-sized amount for children aged 3-6 years. Encourage children to spit out toothpaste after brushing and do not let them rinse out with water as this will wash away the fluoride so it doesn't work as well.

What next?

For your child to take part in the toothbrushing club, we need your consent. If you would like your child to be involved, please fill out the consent form with this letter and return it to us. We will keep you up to date with how the toothbrushing club is going and may ask you for feedback from time to time.

You can opt out of the toothbrushing club at any time, but please let us know.

If you have any questions about the programme or would like any information, please ask the Family hub/ nursery/school staff (delete as appropriate).

Visiting the dentist

Please remember to take your child to the dentist regularly. NHS dental care is free for children. All children aged 3-16 can have fluoride varnish painted on their teeth at least twice a year to help strengthen their teeth and prevent decay. If you do not have a dentist, you can search for your nearest dentists at <https://www.nhs.uk/service-search/find-a-dentist>

Yours faithfully,

Family hub manager/nursery manager/head teacher

.....

Consent form for the Toothbrushing Club

Please complete the following table:

Name of Family hub/nursery/school	
Child's name	
Please tick one of the following statements:	
I give permission for my child to join the toothbrushing club	
I do not give permission for my child to join the toothbrushing club	

Signature of parent/legal guardian

PRINT NAME.....

Date

APPENDIX 3

Toothbrushing club – key information

For detailed information, please read the **Doncaster Toothbrushing Club toolkit**

Organisation

- there should be a designated lead person for the toothbrushing club
 - The lead for the toothbrushing club at
(nursery/school) is.....(please complete)
- there is an agreement which outlines the roles and responsibilities of(nursery/school) and Doncaster Council
- support and training is available for staff to deliver the programme, including infection prevention and control procedures. Training is recorded and monitored
All staff must read the Doncaster Toothbrushing Club Toolkit July 2022 and the designated lead must complete a Doncaster Council supervised toothbrushing club starter training session
- informed consent should be sought from parents or carers for their children to take part in the scheme and records should be maintained
- staff should know which children are not taking part due to non-consent or specific medical reasons.
- quality assurance assessments should be carried out by the nursery/school designated toothbrushing club lead each term and by the council once a year and documented using the quality assurance check list
- for advice about the toothbrushing club, contact:

Laura Quinn

Public Health Improvement Co ordinator

Laura.quinn@doncaster.gov.uk

01302 737260

If Laura is not available please contact

Public Health Enquiries

publichealthenquiries@doncaster.gov.uk

01302 862146

Toothbrushing

- children must be closely supervised when brushing their teeth
- family toothpaste containing 1,350 – 1,500 ppm (parts per million) fluoride is used
- for children aged under 3 years use a smear of toothpaste (Figure 1) and for children aged three years and over use a pea size amount of toothpaste (Figure 2)

Figure 1



Figure 2



- children should be discouraged from swallowing toothpaste during or after brushing their teeth
- after brushing the child spits and doesn't rinse
- toothpaste is not reapplied if swallowed
- toothbrushes are replaced termly or when they appear damaged, the bristles are splayed or if the toothbrush is dropped on the floor, or touches another brush.

Infection prevention and control

- only dry brushing is permitted
- children and staff wash their hands (or use hand sanitiser) before and after the toothbrushing session and all cuts, abrasions and breaks in the skin are covered with a waterproof dressing. Supervisors may also wish to wear disposable nitrile gloves
- supervisors dispense the toothpaste onto a clean surface such as an individual paper towel or a paper plate
- there is sufficient spacing between the quantities of dispensed toothpaste to allow collection without cross-contamination
- care is taken to ensure that toothbrushes do not touch each other and cross-contaminate when being removed from or replaced into the S-racks.
- toothbrushes are individually identifiable with picture symbol, name and rack number.
- S- racks have picture symbols and rack number corresponding to those on toothbrushes. Each group has its own rack(s). Covers are labelled with the rack number and the word 'front' to show orientation.
- wall charts show the rack colour and number, and each child's name and corresponding picture symbol
- each child must know their toothbrush and rack slot picture, and rack number and colour. They should be able to identify their own brush, rack and slot.
- each child must collect their own toothbrush, transfer the dispensed toothpaste onto their brush, brush their own teeth, rinse their brush and return it to their correct slot in the correct S-rack.
- Ventilated S-rack covers are replaced in the correct orientation on their rack after the

brushing session (non-ventilated covers are replaced after brushes have dried). S-racks and covers are stored within a designated toothbrush storage trolley or in a clean, dry cupboard

- S-racks stored in toilet areas must have manufacturers' covers which allow the free-flow of air and are stored at adult height or in a suitable toothbrush storage trolley
- all cuts, abrasions and breaks in the skin are covered with a waterproof dressing and dedicated household gloves are worn when cleaning and disinfecting.
- all surfaces in the toothbrushing area and sinks should be cleaned and disinfected after every session using the settings standard cleaning and disinfection products.
- S- racks, covers, trolleys and storage areas are cleaned and disinfected, rinsed and dried at least once a week by staff using standard cleaning and disinfection products.
- S-racks and covers are replaced if cracks scratches or rough surfaces develop.

APPENDIX 4

Quality assurance checklist for nursery/school designated toothbrushing club lead to complete once a term following observation of a toothbrushing session and Doncaster public health to complete once a year.

Name of nursery/school/other childcare setting			
Class			
Number of children consented to take part in toothbrushing club			
Number of children not consented to take part in toothbrushing club			
Age range of children taking part in toothbrushing club			
Do the children enjoy the Toothbrushing club? (please circle one)	Yes	No	
Has the toothbrushing club prompted any parents/carers to talk with staff about oral health this term (please circle one)	Yes – please provide details	No	
Have parents/carers raised any concerns about the toothbrushing club this term (please circle one)	Yes– please provide details	No	
Have any oral health activities taken place in the setting this term? (please circle one)	Yes – please provide details	No	
Name of nursery/school toothbrushing club lead observing toothbrushing session and completing checklist below	Print	Sign	Date

Instructions for completing the checklist

For the standards below, please tick to show if the standard has been:

- **Achieved** or
- **Not achieved, but improvements are possible** – please list the action plan for improvements and date when these improvements are completed or
- **Not achieved, so the toothbrushing club has been suspended** until further notice – please list reasons for suspension

Please send/email a copy of the completed checklist (once a term) to:

Laura Quinn
Public Health
Doncaster Council
Civic Office
Waterdale
Doncaster
DN1 3BU

laura.quinn@doncaster.gov.uk

Standard	Achieved	Not achieved, but improvements possible		Not achieved - toothbrushing club suspended (state reasons)
		Action plan for improvements	Date of completion of improvements	
Organisation				
There is a signed agreement between Doncaster Council and the setting outlining the roles and responsibilities of partners				
All staff involved in leading/supervising toothbrushing club have read and retained a copy of the Doncaster Toothbrushing Club				

Toolkit July 2022				
The designated lead/s has completed a Doncaster Council starter supervised toothbrushing club training session				
The designated lead/s have received on-site training including infection prevention and control procedures				
Training of staff, including new starters has been recorded and is monitored				
Information letters and consent forms have been sent to all children invited to join the club				
Staff are aware and records kept of children who have been consented to take part and those who have not				
Staff are aware of any children who are not taking part in the club(temporarily or permanently) for medical reasons				
Staff are aware of how to contact the council Public Health team for advice if necessary				
Effective preventive practice				
There is a toothbrushing club session every day				
Fluoride toothpaste containing 1350-1500ppm fluoride is being used				

Correct amount of toothpaste is being used: <ul style="list-style-type: none"> • Smear-sized for children under 3 years • Pea-sized for children 3 years and over 				
Children are being supervised by an adult during the brushing club				
Children brush for at least 2 minutes				
Children are discouraged from swallowing toothpaste during and after brushing				
After brushing, children spit out residual toothpaste and do not rinse mouth				
All the toothbrushes have been replaced this term				
Toothbrushes have also been replaced if they appear damaged, the bristles are splayed, they have touched another brush, or if they have fallen on the floor				
Infection, Prevention and Control				
Supervisors and children wash their hands or use hand sanitiser before and after the toothbrushing session and cover any cuts, abrasions or breaks in their skin with a waterproof dressing. (Please also indicate if disposable nitrile gloves are being worn by supervisors)				
Toothbrushes are individually identifiable for each child with picture symbol, name and rack number				

Where multiple S-racks are used, they are different colours and numbered				
Picture symbols on S-rack, and rack number correspond to those on the toothbrushes to allow individual identification				
Setting is using wall charts which show each child's rack number and colour, picture symbol and name				
Where toothpaste tubes are being shared, the supervisor dispenses it onto a clean surface e.g. individual paper towel or plate. <i>(There must be sufficient spacing between the quantities of dispensed toothpaste to allow transfer to each child's brush without cross-contamination.)</i>				
Toothbrushes are stored in the S-rack) so that brushes stand in the upright position with bristles pointing towards the front of the rack so they do not touch each other or the cover to avoid cross-contamination				
Ventilated S-rack covers are replaced in the correct orientation on their rack after brushing session (non-ventilated covers are replaced once brushes have dried).				

S-racks and covers are stored within a designated toothbrush storage trolley or in a clean, dry cupboard. S racks stored in toilet areas must have manufacturers' covers which allow the free flow of air, be stored at adult height or in a suitable toothbrush storage trolley.				
S-racks, covers, trolleys and storage areas are cleaned and disinfected, rinsed and dried at least once a week (more if soiled) by staff using standard cleaning and disinfection products				
After toothbrushing, toothbrushing area and sinks are being cleaned and disinfected using standard cleaning and disinfection products.				
Cuts, abrasions or breaks in the skin are covered with a waterproof dressing and dedicated household gloves are worn for cleaning and disinfection.				
S-racks and covers are regularly being checked for cracks, scratches or rough surfaces and replaced if required				
Toothbrushes are being rinsed individually (not together) by each child at the sink, with tap left running				
Toothbrushes are not being soaked in bleach or other cleaner or disinfectant				

The S-racks and covers are not being placed directly beside where toothbrushing takes place or beside the toilet area (to avoid contamination via droplet and contact spread)				
Supervisors are not handling any toothbrushes.				
Supervisors are not brushing any of the children's teeth				

S-Rack 10 Wallchart

Toys 1

Class: _____

Colour of Rack: _____

flower

teddy

tree

book

bed



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--	--	--	--	--

apple

house

hat

bicycle

ball

S-Rack 10 Wallchart

Toys 2

Class: _____

Colour of Rack: _____

coat

pram



bricks



shoe



spoon



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car

mug



bus



pencil

















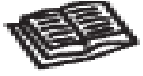





chair



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S Rack 20 Toys

S Rack 20 Toys		Colour of Rack			
Class		Name			Name
Flower			House		
Bed			Apple		
Teddy			Bike		
Bricks			Bus		
Mug			Chair		
Spoon			Tree		
Ball			Coat		
Car			Hat		
Book			Pram		
Pencil			Shoe		



This toolkit has been developed with the help of 'Mole-R' a character designed by the Edlington Hilltop Centre

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