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Funded by: NIHR ARC Child Health and Maternity Programme











www.supervisedtoothbrushing.com





The Supervised Toothbrushing Toolkit

Supporting supervised toothbrushing programmes to reduce tooth decay in young children

This toolkit was developed to bring together new and existing resources to help support the implementation of supervised toothbrushing programmes and clubs. There are resources for those who are responsible for commissioning new programmes (commissioners), for those delivering programmes across a specific area (providers), as well as resources for nurseries, schools or childminders (early years settings) with a Supervised Toothbrushing Programme running and parents whose children are involved.

optimising toothBrushing pRogrammes in nUrseries and ScHools

Outline

What is a Supervised Toothbrushing Programme / Club
Why
Evidence
Our research
National surveys 2022, 2024
Qualitative study
Co-design and development of implementation toolkit
Case studies

What is it









Why

"...manifesto commits to the introduction of a supervised tooth-brushing scheme for 3- to 5-year-olds targeting areas of highest need"



Labour party 2024 manifesto, NHS Confederation analysis



Why

Department for Education

Early years foundation stage statutory framework

For childminders

Setting the standards for learning, development and care for children from birth to five

1

Published: 8 December 2023 Effective: 4 January 2024 Department for Education

Development Matters

Non-statutory curriculum guidance for the early years foundation stage

First published September 2020 Revised September 2023



Evidence







89.1% of eligible childr Evidence info.png 94%

Children from the most deprived quintile more likely to participate



Reduction of tooth decay was 52.7% to 45.7% for the most deprived quintile within 12-24 months.

43.4% to 35.7% for the second most deprived quintile within 12-24 months.

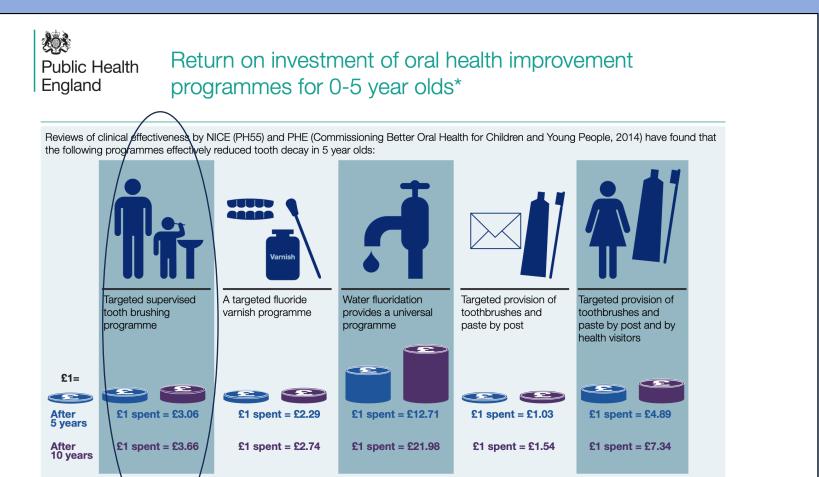
For all quintiles there was a significant benefit when participation was greater than 36 months.



Reduction in health inequalities show that children with the greatest risk of dental caries recieved the greatest benefit, including children with special educational needs.



Evidence



*All targeted programmes modelled on population decayed, missing or filled teeth (dmft) index of 2, and universal programme on dmft for England of 0.8. The modelling has used the PHE Return on Investment Tool for oral health interventions (PHE, 2016). The best available evidence has been used in this tool and where assumptions are made these have been clearly stated



Aim

To explore the variation in toothbrushing programmes across England and identify determinants of implementation to increase uptake, sustainability and impact on oral health.





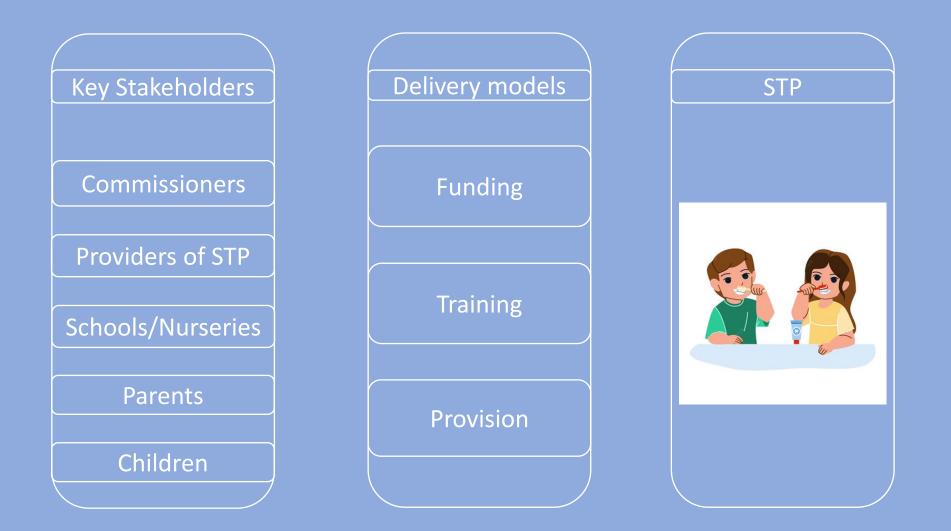














Methods

Surveys of toothbrushing programmes
 Qualitative interviews with key stakeholders
 Co-design and pilot an implementation toolkit
 Implementation case studies

Methods



Data comparison

2022 stocktake data – 141 local authorities responded

Number of children in STPs	Number of settings with STPs	'Yes'	'No'	'No, but planning to start in future'	'Used to have a programme'	
106,273	2,325	74 (52.5%)	44 (31.2%)	22 (15.6%)	1 (0.7%)	

2024 stocktake data – 152 local authorities responded

Number of children in STPs	Number of settings with 'Yes' 'No' STPs	'No'	'No, but planning to start in future'	'No, no plans to start'	'No, we tried it previously and it was stopped'	
143,200	2,978	90 (59.2%)	18 (11.8%)	33 (21.7%)	8 (5.3%)	3 (2%)





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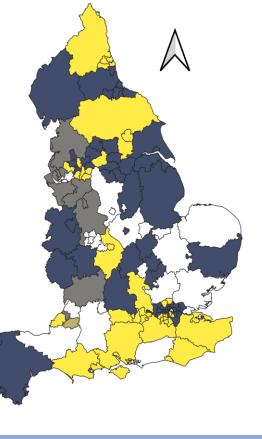
Boundary type
Upper Tier Local Authority boundaries

Status of supervised toothbrushing programmes (2022)

- Toothbrushing programme not present
- Ad-hoc schemes
- Plans to implement/re-establish
- Toothbrushing programme present

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📃 No data





Legend

Boundary type
Upper Tier Local Authority boundaries

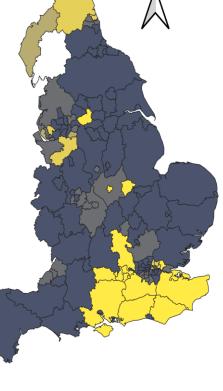
Status of supervised toothbrushing programmes (2024)

- No No
- No, no plans to start
- No, we tried it previously and it was stopped

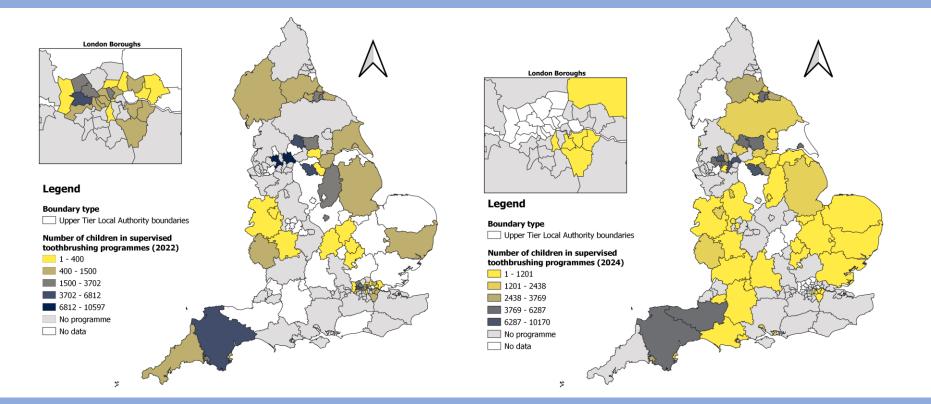
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- No, but planning to start in future
- Yes











Qualitative interview

- 159 interviews
- Audio recorded, transcribed and framework analysis using CIFR
- Yorkshire and Humber, North-West, North-East, South-West, South-East, West Midlands, East-Midlands and London



Qualitative interview

Key Themes

- Acceptability of STP
- External make or break conditions
- Importance of engagement across the system
- Desire for centralise support

Gray-Burrows 2024, submitted



Toolkit



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	HOME	ABOUT	SUPERVISED TOOTHBRUSHING PROGRAMMES	COMMISSIONERS	PROVIDERS	EARLY YEARS	PARENTS	CONTACT

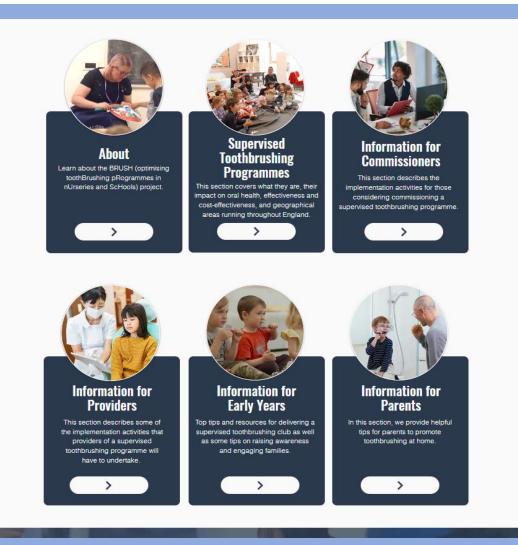


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Toolkit



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- Total visitors: 10,595
- Unique visitors: 7,204
- Countries: visitors from 59 countries, mainly from the UK, followed by the USA, Australia, India, and Ireland.
- Requests for further information: 93 requests
- Website subscribers: 90 people





- Case Studies
- Third survey due in January 2025
- Development of website content to address gaps
 identified by users



A country that works for all children and young people

An evidence-based plan for improving children's oral health with and through education settings



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