

Quality Assurance Monitoring Tool

Name of setting

Type of setting

Member of staff undertaking monitoring

Room/class

Number of children with consent

Time of day toothbrushing undertaken

Lead Person

Type of Quality Assurance Visit (initial/follow-up/termly/annual)

Type of toothbrushing being undertaken (supervised or assisted or supervised **and** assisted)

Number of children taking part today

Time from start to finish

Date

Criteria	Achieved/Not Achieved	Evidence	Action Required
Agreement			
1.1 All parties have signed and dated the "Brilliant Brushers" supervised toothbrushing scheme agreement		Completed agreement	
1.2 Risk assessment has been completed and approved by the oral health improvement practitioner prior to implementation		Completed risk assessment covering all required elements	
1.3 Termly quality assurance monitoring tool has been completed by lead/staff in setting		Completed quality assurance monitoring tool reviewed by oral health improvement practitioner	
Consent			
2.1 Parental consent has been received for all participating children		Lead person to confirm	
2.2 Consent forms are stored in accordance with GDPR regulations		Lead person to confirm	
Staff Training			
3.1 All staff involved in the scheme have attended training delivered by the oral health improvement team		Completed staff training record	
3.2 All staff involved in the scheme have signed the record to confirm that they have read and understood the quality standards		Completed staff quality standards record	
Supervised/Assisted Toothbrushing			
4.1 A record for identifying each child's toothbrush is maintained		Completed Toothbrush Identification Record	
4.2 A record of daily toothbrushing is completed to identify any children who have not taken part		Completed Daily Toothbrushing Record or register	

Criteria	Achieved/Not Achieved	Evidence	Action Required
Quality Standards			
4.3 All surfaces/tables are prepared/cleaned with household detergent before toothbrushing commences		Observation	
4.4 Staff and children wash hands with soap and water or decontaminate with hand sanitizer before toothbrushing <i>(If the child has full assistance with brushing there is no need for the child to decontaminate but the staff member who is handling the resources does)</i>		Observation	
4.5 Supervisors and children cover any cuts, abrasions or breaks in the skin with waterproof dressings. <i>(Where possible in SEND settings)</i>		Observation/Discussion	
4.6 If staff wear single use disposable gloves when assisting a child with toothbrushing, these are replaced before assisting another child <i>(Where possible in SEND settings)</i> Hands are washed or decontaminated after glove removal			
4.7 Toothbrushes are handed out to children or children collect them		Observation	
4.8 Staff dispense the correct amount of toothpaste onto a plastic plate or paper towel: - smear (a thin film covering less than 3/4s of the child's brush) for those aged up to 3 years - pea size amount for those 3 years and over		Observation	
4.9 There is sufficient space in between each amount of toothpaste		Observation	
4.10 Staff or children transfer toothpaste from the plate or paper towel onto the brush		Observation	

Criteria	Achieved/Not Achieved	Evidence	Action Required
Quality Standards			
4.11 All children are provided with a paper towel or tissue to spit excess toothpaste into during group/dry brushing Assisted children are provided with a suitable bowl to spit into or are able to spit into a clean sink during toothbrushing, if required		Observation	
4.12 Staff supervise/assist toothbrushing for 2 minutes		Observation	
4.13 Staff encourage children to spit out excess toothpaste into the tissue during and after dry brushing Children's mouths are wiped with a paper towel/tissue if they are unable to spit independently		Observation	
4.14 Toothbrushes are replaced every term		Observation/Discussion	
4.15 Toothbrushes are replaced when the bristles splay or if they fall onto the floor		Observation/Discussion	
After Toothbrushing			
5.1 Children (under supervision) or staff rinse toothbrushes individually with cold water, before returning them to storage systems		Observation	
5.2 The toothbrush does not touch the sink or taps whilst rinsing them		Observation	
5.3 Children do not rinse their mouths at any time during or after brushing		Observation	
5.4 Children do not put their toothbrushes back in their mouth after rinsing them		Observation	
5.5 Paper towels or tissues are disposed of appropriately		Observation	
5.6 Children wash their hands or decontaminate with hand sanitizer. (If the child has fully assisted brushing, there is no need for the child to decontaminate but the staff member who is handling the resources does)		Observation	

Criteria	Achieved/Not Achieved	Evidence	Action Required
Clean Down - After Toothbrushing			
6.1 Staff wear dedicated household gloves when cleaning sinks and surfaces, following toothbrushing		Observation	
6.2 All sinks and surfaces are cleaned down with COSHH approved household detergent		Observation	
6.3 Plastic plates (if used) are cleaned using household detergent or placed into a dishwasher		Observation	
6.4 Staff wash hands with soap and water or decontaminate with hand sanitizer		Observation	
Storage Systems			
7.1 Storage systems and lids provided by the oral health improvement practitioner are used		Observation	
7.2 Separate storage systems are used for each group or class		Observation	
7.3 Toothbrush storage systems are in good condition (no cracks) cleaned, rinsed and dried at least once per week (more if soiled) with warm water and household detergent		Observation/Discussion	
7.4 If storage systems are used for transferring brushes for rinsing after brushing, they are cleaned daily and prior to re-inserting. All brushes are cleaned individually and do not come into contact with each other		Observation	
7.5 Toothbrush storage systems are stored in a designated toothbrush trolley or a clean, dry cupboard or shelf out of reach of children. If storing in toilet areas, storage should be away from toilets. Manufacturers ventilated storage lids are used		Observation	

Quality Assurance Visit	
8.1 Supervised or assisted toothbrushing is being delivered safely and effectively	
8.2 Next quality assurance required	

Quality Assurance Summary

Completed by oral health improvement practitioner/setting lead

Date

Signed by setting lead

Date