

Brilliant Brushers



Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND Schools)

A toolkit to help staff in day nursery
and school settings implement a
supervised toothbrushing scheme



Shropshire Community Health
NHS Trust

Contents

1. Contact Details

2. Introduction

3. Brilliant Brushers Agreement

4. Quality Standards:

- 01 Organisation
- 02 Implementing Supervised Toothbrushing
- 03 Infection Prevention and Control Procedures

5. Appendices:


- 01 Staff Training Record
- 02 Quality Standards Record for Staff
- 03 Risk Assessment
- 04 Sample Parent Letter
- 05 Brilliant Brushers Information and Consent Forms 1 and 2
- 06 Best Way to Wash Hands - NHS guidance
- 07 'Quick Guide to Supervised Toothbrushing for Staff' Poster
- 08 Toothbrush Identification Record
- 09 Daily Toothbrushing Record
- 10 Home Toothbrushing Chart
- 11 Home Toothbrushing Certificate
- 12 'Top Tips for Toothbrushing' Poster
- 13 'We're Taking Part in Brilliant Brushers' Poster
- 14 Quality Assurance Monitoring Tool

6. Making Toothbrushing Fun

7. References

8. Acknowledgements

Contact Details



1

Contact Details

Day Nursery or School

Name of Early Years Provider or School

Name of Manager or Headteacher

Name of Lead

Oral Health Improvement Practitioner

Name

Telephone

E-mail

Introduction



2

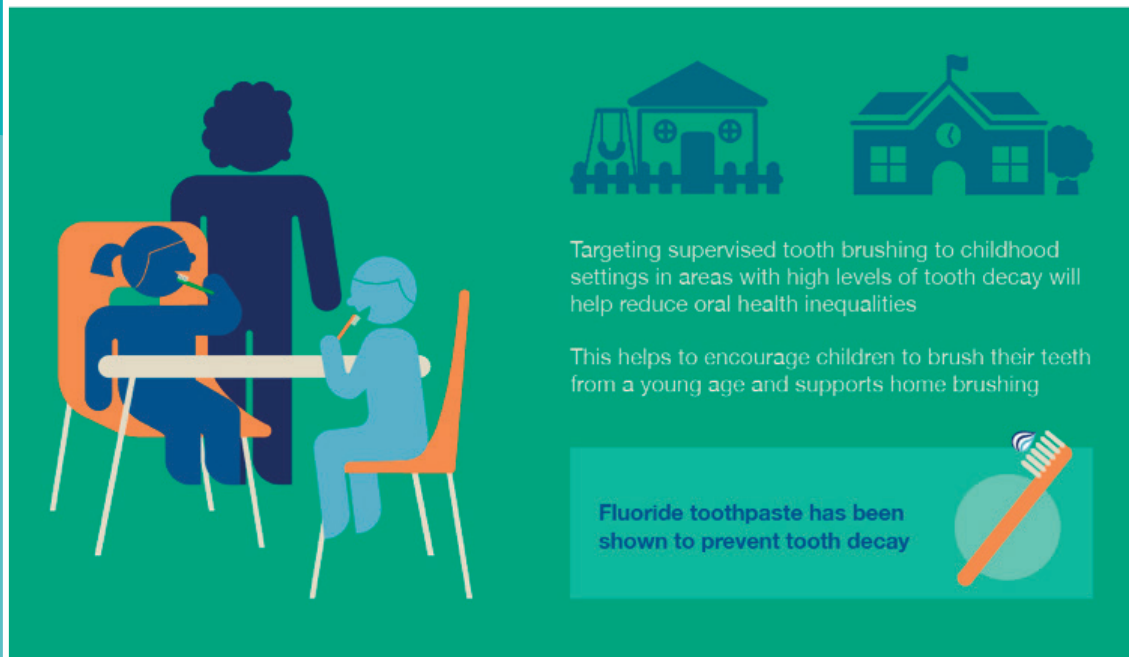
Introduction

Tooth decay is the most common oral disease affecting children and young people in England ¹. It is caused by frequent consumption of sugary foods and drinks and can affect a child's ability to sleep, eat, speak and socialise. It can also result in missed days from school. ¹ Although children's oral health has improved over the past 20 years, a recent report found that almost a quarter of five-year old children in England in 2024 had experienced tooth decay. Tooth decay was the most common reason for hospital admissions in children aged 5-9 years in 2024 ².

Children living in disadvantaged communities tend to have poorer oral health than those living in less disadvantaged areas. There is strong evidence that brushing teeth last thing at night and at least one other time during the day with a family strength fluoride toothpaste (one containing 1450 parts per million fluoride) is highly effective in preventing tooth decay. It is especially beneficial if this habit is established at an early age. These children are also less likely to brush their teeth twice a day, so establishing toothbrushing in an early years or school setting can make a big difference.

In 2014, having reviewed the evidence, both the National Institute for Health and Care Excellence (NICE) and Public Health England (PHE) published key documents recommending the commissioning of targeted supervised toothbrushing schemes.

Early years providers are responsible for promoting the good health, including oral health of children attending their setting, as set out in the Early Years Foundation Stage Strategic Framework in 2022.



What is Brilliant Brushers?

In 2016, a toolkit to support the commissioning of supervised toothbrushing programmes in early years and school settings was published by PHE. This was updated by the Office for Health Improvement and Disparities in 2025. It provides evidence-based guidance for establishing supervised toothbrushing programmes in England. The original toolkit provided the foundation for Brilliant Brushers, a local toolkit that provides a collection of useful resources to help settings implement supervised toothbrushing in targeted day nurseries and school settings across the West Midlands. If your setting has been invited to participate, it will be because of the high rates of tooth decay, levels of vulnerability or disadvantage experienced by young children and families in your area.

This toolkit contains everything a setting needs to implement a safe and effective supervised toothbrushing scheme.

It contains an agreement between the oral health improvement team and the setting. This must be signed prior to implementation of the scheme.

Brilliant Brushers is not intended to replace toothbrushing at home. Parents should be advised to brush their child's teeth twice a day at home, in addition to brushing once in the setting. There are a number of resources in the toolkit to help encourage home toothbrushing, such as a toothbrush chart and certificate. A toothbrush and toothpaste pack for home use may also be provided.

National guidance recommends that all staff involved in supervising or delivering the toothbrushing scheme, should attend training delivered by an oral health improvement practitioner. Most of the resources e.g. toothbrushes, toothpaste and toothbrush storage racks, will be provided free of charge and arrangements will be made to replace these items as required. The setting may be expected to provide some resources such as paper towels and tissues.

Quality assurance visits will be undertaken by the oral health improvement practitioner at agreed intervals. The toolkit includes a quality assurance tool that will be used during these visits, so that settings are fully aware of what is expected. The quality assurance assessment tool can be used by settings when carrying out their own internal monitoring.

We hope that staff and children enjoy taking part and parents and children see the benefits of this scheme for years to come.

Agreement

3

Brilliant Brushers – Supervised Toothbrushing Scheme Agreement

Name of Day Nursery or School

Oral health improvement staff will:

1. Provide training for staff involved in supervised toothbrushing to help ensure effective and safe delivery of the scheme. Training will include infection prevention control advice relevant to the delivery of supervised or assisted toothbrushing.
2. Provide written/electronic guidance, including quality standards to each participating setting.
3. Provide information and consent forms for the setting to use to ensure positive consent is obtained for all participating children.
4. Undertake quality assurance monitoring visits to check standards are being maintained:
 - initial quality assurance within 1-2 weeks of starting supervised or assisted toothbrushing
 - subsequently, as determined by the level of compliance at the initial quality assurance visit
 - if safe and effective standards are being followed, completed quality assurance undertaken by the nursery or school staff each term may be requested by the oral health improvement practitioner
 - annually
5. Share and discuss the outcome of the quality assurance visit, including any recommendations, with the lead person from each setting or with the person supervising or assisting brushing at the time of the visit. Provide a copy of the completed quality assurance monitoring tool. Where recommendations are urgent, a copy of the completed monitoring tool will be sent to the manager, deputy or headteacher. If standards are not being adhered to and safety is compromised, the oral health improvement practitioner reserves the right to suspend the scheme until the necessary actions have been completed at which time the scheme can recommence.
6. Provide suitable resources including: local Brilliant Brushers Toolkit to guide implementation, toothbrushes, toothpaste (that contains 1450 ppm fluoride and is free from animal derivatives), toothbrush racks and lids and resources to support and encourage home brushing.
7. Provide a pack containing a toothbrush, toothpaste and leaflet for each participating child for home use, as available.
8. Provide support and answer queries from staff within settings as required.
9. Provide information on access to dental services if required.

Day nursery and school staff will:

1. Ensure that the manager or headteacher, as well as the lead person in the setting, sign this agreement.
2. Ensure the manager or headteacher and lead person complete the risk assessment provided in appendix 03 prior to implementation.
3. Ensure that all staff involved in the delivery of supervised or assisted toothbrushing attend training, read and follow the quality standards, and infection prevention control procedures. The staff training record and quality standards record for staff should be signed to confirm this.
4. Ensure new staff involved in the scheme are trained by the oral health improvement practitioner.
5. Commit to delivery of the scheme daily.
6. Discuss any changes they wish to make with the oral health improvement practitioner.
7. Promote the scheme to parents or those with parental responsibility and ensure the information and consent form is provided for each eligible child.
8. Ensure signed information and consent forms are completed, returned and stored together in one place according to GDPR guidelines.
9. Ensure that the toothbrushing questionnaire section of the information and consent form is completed for all children requiring one to one assistance.
10. Ensure that only children that have written consent take part in the scheme.
11. Work with the oral health improvement practitioner to arrange the initial quality assurance monitoring visit for each group or class participating in the scheme.
12. Undertake their own quality assurance monitoring each term. This should be made available to the oral health improvement practitioner if requested.
13. Contact the oral health improvement practitioner if more stock is required (giving at least two weeks' notice).
14. Clean the storage systems at least weekly, with warm water and COSHH approved household detergent.
15. Check equipment on a regular basis, replace as necessary and ensure appropriate resources are used.
16. Encourage parents or those with parental responsibility to brush their child's teeth twice a day at home in addition to brushing in the setting.

Opting out of the scheme

If at any time, a decision to opt out is made by the setting, the setting lead should inform the oral health improvement practitioner immediately, so that the correct procedure can be followed. It is the responsibility of the setting to inform all parents of the decision to withdraw.

Agreement signatures

This agreement MUST be signed and dated by the oral health improvement practitioner, day nursery manager, or headteacher and nursery or school lead, before the scheme commences. By signing this agreement all parties are agreeing to deliver their respective responsibilities.

Oral Health Improvement Practitioner

Date

Day Nursery Manager or Headteacher

Day Nursery or School Supervised Toothbrushing Lead

Quality Standards



4

Quality Standards

These standards have been developed to help ensure the safe and effective delivery of supervised toothbrushing in early years and school settings.

The standards are divided into three sections:

- 01 Organisation
- 02 Implementing Supervised Toothbrushing
- 03 Infection Prevention and Control Procedures

Organisation

01

Organisation

Step 1 – Risk Assessment

A risk assessment must have been completed by the manager or headteacher and lead person and signed off by the oral health improvement practitioner prior to implementation of supervised or assisted brushing. This must be shared with all staff involved in supervising or assisting toothbrushing.

Step 2 – Quality Standards

The quality standards must be followed to ensure that toothbrushing is organised in a safe and effective way.

A quality assurance visit will be arranged to monitor implementation of the scheme against the standards, as recommended in the OHID toolkit, using the quality assurance monitoring tool in appendix 14. This visit will take place at 1-2 weeks following initial implementation and annually thereafter, unless the setting is informed otherwise. The outcome of these visits will be discussed with the lead person in the setting or with the person supervising the brushing at the time of the visit. If there are areas of concern, any necessary remedial action will be taken immediately. If these concerns cannot be addressed in the setting, the scheme will be suspended whilst appropriate action is agreed and carried out. A copy of the completed quality assurance checklist will be provided to the setting.

All settings will be expected to undertake their own quality assurance monitoring, termly and this should be available to the oral health improvement practitioner if required. The quality assurance monitoring tool (appendix 14) can be used for this.

Step 3 – Lead Person

All settings must have a named lead person who is responsible for the co-ordination of the scheme within the day nursery or school setting.

The lead person should promote the scheme and the importance of toothbrushing at home. A video may be available to parents to show how the scheme works and the role parents have at home to help their child with daily brushing. If staff have any queries that they are unable to answer, they should seek advice from the oral health improvement practitioner.

The lead person in the setting is responsible for signing the agreement and ensuring the manager or headteacher also signs it.

The lead person is responsible for distributing the Information and Consent Form and ensuring written consent is gained from all parents or those with parental responsibility, for each child before toothbrushing takes place, see appendix 06. If a parent or person with parental responsibility chooses not to consent to their child taking part in the scheme, for whatever reason, this must be respected and documented so that all staff are aware. There are 2 different consent forms, one for mainstream settings and one for children with additional needs if more support or assistance is required.

Step 4 – Staff Training

All staff involved in delivering the scheme must receive appropriate training in supervising toothbrushing and infection prevention and control procedures.

Staff must:

- Attend the training and sign the training record in appendix 01 to confirm that they have attended.
- Read the quality standards and sign appendix 02 to confirm that they have read and understood them.

"Brilliant Brushers" supervised toothbrushing toolkit should be accessible to all staff involved in delivering the scheme.

Step 5 – Daily brushing frequency (as well as brushing at home)

The scheme should be offered once a day to all children aged 3-5 years (3+SEND), in targeted day nursery settings and schools. If the setting would like to offer the scheme to younger or older children this must be discussed with the oral health improvement practitioner before commencement (this might include rising 3 year olds). All children whether in full-time or part-time provision, should be encouraged to take part.

Toothbrushing should be part of every child's daily routine. **Ideally, it should not** take place within 30 minutes of eating or drinking acidic foods or drinks, due to the risk of tooth wear. It is considered that the benefits of brushing outweigh concerns about this. Therefore, toothbrushing should be organised at a convenient time for each individual setting.

Each child taking part in the scheme should only brush once a day in the setting but toothbrushing should be encouraged at home twice a day, especially last thing at night.

If available, toothbrush packs containing a toothbrush and toothpaste will be provided for children taking part in the scheme, to take home to encourage brushing at home.

Step 6 – Participation

There are very few medical reasons why a child should not participate in a supervised toothbrushing scheme. In a specific case where a GP or dentist have advised a child not to take part in supervised or assisted toothbrushing due to infection or oral ulceration, a child's participation may be paused. Toothbrushing at home can continue as this may aid healing, unless otherwise advised.

Step 7 – Consent

Information and Consent Forms should be stored together, safely in the setting, in accordance with GDPR guidelines. The lead person will need to confirm that consent has been received for every child participating, during the quality assurance monitoring visits.

Step 8 – Storage Systems and toothbrushes

The lead person is responsible for ensuring that separate storage systems are used for each "group" or "class". Individual toothbrushes can be easily identified by a symbol or number on the toothbrush corresponding to the storage system. Alternatively, children's names or numbers can be written on individual toothbrushes using a permanent marker. The lead person must ensure the toothbrush identification record, see appendix 08 is completed for each "group" or "class" taking part.

Resources including toothbrushes, toothpaste and storage systems required to implement the scheme will be supplied as agreed with the setting. Additional resources will be provided on request.

Staff are responsible for ensuring that toothbrushes are replaced once a term, (every 3-4 months) or sooner if required, if bristles start to splay or if the toothbrush has fallen onto the floor.

Implementing Supervised Toothbrushing

02

Implementing Supervised Toothbrushing

The national supervised toothbrushing toolkit suggests two options for carrying out supervised toothbrushing:

- **Option 1 - Dry brushing** - Toothbrushing away from the sink, on a carpeted area or at a table
- **Option 2 - Wet brushing** - Toothbrushing at a sink or other identified area

Option 1 – Dry brushing – toothbrushing away from the sink, on a carpeted area or table is the preferred option for group brushing

Step 1 – Wash or sanitise hands

Staff and children (under supervision) should wash or decontaminate their hands using hand sanitiser before and after the toothbrushing session to prevent cross-infection. The eleven-stage handwashing technique included in appendix 06 should be followed. Supervisors and children should cover any cuts, abrasions or breaks in the skin with a waterproof dressing before starting the toothbrushing session. Single use disposable gloves only need to be worn if a member of staff is required to carry out individual brushing with a child who is unable to do it for themselves (for example a child with additional needs). After glove removal hands should be washed or decontaminated using hand sanitiser and gloves should be replaced if undertaking toothbrushing with another child.

Step 2 – Prepare equipment

All equipment and resources should be prepared by staff before the session commences.

Step 3 – Prepare children

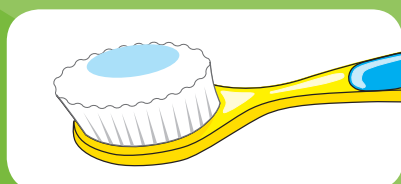
Children should be seated either at a table or on a carpeted area. Toothbrushing can then be carried out in a co-ordinated way.

Step 4 – Collect toothbrushes

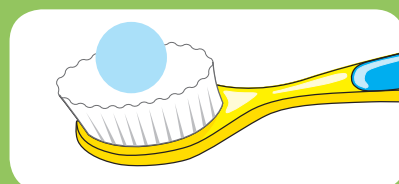
Children, under supervision, can collect their own toothbrush from the storage system or the staff member can hand them out. Each child's toothbrush should be identified from the symbol or number on the toothbrush using the identification chart included in appendix 08. Discretion should be used if a child has additional support needs.

Step 5 – Dispense toothpaste

When a tube of toothpaste is shared, the toothpaste **must not** be dispensed directly onto the toothbrush. Staff are responsible for dispensing the correct amount of toothpaste onto a clean paper/plastic plate or a paper towel for the child to load onto their own toothbrush, if they are able to. There must be sufficient space between each amount of toothpaste to prevent cross contamination. For children aged up to 3 years of age, only a smear of toothpaste should be used. For children aged 3 years and above a pea sized amount of toothpaste should be used. This is shown in the images below:



Smear for up to 3 years



Pea size for 3 years and above

Step 6 – Supervise toothbrushing

Staff should supervise the children at all times during toothbrushing encouraging them to brush their teeth independently. Remember it is important to try to make sure the toothpaste covers all surfaces of the teeth if you can. Children often find the “gentle scrub” or “circular” technique easiest to use and these methods will be demonstrated during the staff training.



Inside

Gently brush the inside where the teeth and gums meet



Top

Brush the chewing surfaces



Outside

Brush all around the outside surfaces of the teeth, where the teeth and gums meet

A toothbrush timer, song or toothbrushing app can be used to encourage the children to brush for the required time. Links to these can be found in the 'Links' section of this toolkit.

Children should be encouraged to spit out excess toothpaste into a paper towel, or tissue, but not to rinse with water during or after brushing. This helps the fluoride stay in contact with the teeth for a longer period of time. They should be discouraged from swallowing toothpaste and it should not be re-applied if swallowed.

Toothbrushes should not be rinsed under the tap during brushing.

Step 7 – Rinse toothbrushes and return to storage

Immediately after brushing, each child under supervision or the staff member should rinse the toothbrush thoroughly under cold running water. Toothpaste should not be allowed to dry on the brush. The child or staff member should then return the toothbrush to the correct place in the storage system to air dry. If water does not meet drinking water standards, DEFRA recommends boiling the water and cooling it prior to rinsing the brush after toothbrushing.

Step 8 – Wash or sanitise hands

After toothbrushing is complete, children and supervisors should wash their hands with soap and water or decontaminate with hand sanitiser. For assisted brushing, disposable gloves should be removed after brushing each child's teeth and replaced with a new pair before assisting another child.

Step 9 – Clean the toothbrushing area

All surfaces and sinks should be cleaned down using standard cleaning products, after each child has brushed.

If reusable plates are used to dispense toothpaste, they should be washed in warm water using household detergent.

The daily toothbrushing record in appendix 09 must be completed and kept in the room where toothbrushing takes place. This should identify all children participating in the programme and indicate whether a child has taken part or not. This record will also be used for monitoring purposes.

Implementing Supervised Toothbrushing

Follow implementation guidance for option 1 up to step 6.

Option 2 – Toothbrushing at the sink or other identified area for 1-1 or assisted brushing

Step 6 – Supervise or assist 1-1 toothbrushing

Staff should supervise or brush the child's teeth if providing 1-1 or assisted brushing. Encourage them to brush their teeth independently. Remember it is important to try to make sure the toothpaste covers all surfaces of the teeth if you can. Children often find the "gentle scrub" or "circular" technique easiest to use and these methods will be demonstrated during the staff training.



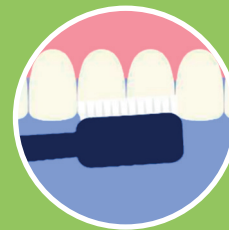
Inside

Gently brush the inside where the teeth and gums meet



Top

Brush the chewing surfaces



Outside

Brush all around the outside surfaces of the teeth, where the teeth and gums meet

Children should be encouraged to spit out excess toothpaste into a disposable dish or the sink, but not to rinse with water during or after brushing. This helps the fluoride stay in contact with the teeth for a longer period of time. They should be discouraged from swallowing toothpaste and toothpaste should not be re-applied if swallowed.

Toothbrushes should not be rinsed under the tap during brushing.

Step 7 – Rinse toothbrush and return to storage

Immediately after brushing, the child under supervision or the staff member should rinse the toothbrush thoroughly under cold running water. Toothpaste should not be allowed to dry on the brush. The child or staff member should then return the toothbrush to the correct place in the storage system to air dry. If water does not meet drinking water standards, DEFRA recommends boiling the water and cooling it prior to brushing teeth. Remember that this should only be used to rinse brushes after toothbrushing.

Step 8 – Wash or sanitise hands

After toothbrushing is complete whoever has brushed the child's teeth, should wash their hands with soap and water or decontaminate with hand sanitiser. For assisted brushing, if disposable gloves are worn, they should be removed after brushing each child's teeth and replaced with a new pair before assisting another child.

Step 9 – Clean the toothbrushing area

All surfaces and sinks should be cleaned down after each child has brushed.

If reusable plates are used to dispense toothpaste, they should be washed in warm water using household detergent.

The daily toothbrushing record in appendix 09 must be completed. This should identify all children participating in the programme and indicate whether a child has taken part or not. This record will also be used for monitoring purposes.

Infection Prevention and Control Procedures

Infection Prevention and
Control Procedures



03

Infection Prevention and Control Procedures

1. Staff and children (under supervision) should wash their hands or decontaminate their hands using hand sanitiser before and after the toothbrushing session to prevent cross-infection. The eleven-stage handwashing technique included in appendix 06 should be followed. Supervisors and children should cover any cuts, abrasions or breaks in the skin with a waterproof dressing before starting the toothbrushing session. Extra precautions might need to be taken if there is likely to be spray from toothbrushing. This might include disposable aprons and eyewear. Remember to follow your own local Infection Prevention and Control (IPC) procedures and ensure they are included in your risk assessment.
2. Each child should have their own individual toothbrush, which will be identifiable to them by the use of a symbol or number on the toothbrush handle, which will correspond with the symbol or number on the storage system. If the toothbrush is plain their name can be clearly written on the handle of the toothbrush with a permanent marker.
3. When a tube of toothpaste is shared, the toothpaste must not be dispensed directly onto the toothbrush. It should be dispensed onto a clean plastic plate, paper towel or tissue.
4. On completion of toothbrushing, toothbrushes should be rinsed thoroughly under cold running water before returning them to the correct place in the toothbrushing storage system to air dry.
5. Toothbrushes should not be washed together in the sink.
6. Toothbrushes should be stored in an appropriate storage system ensuring that they are in an upright position, not in contact with each other. If a lidded storage system is used, the lid should be placed on the rack after brushing. If a non lidded storage system is used, these should be stored in a designated toothbrushing trolley or in a clean dry cupboard at adult height.
7. Storage systems should not be placed close to toilet areas or directly beside children while they are carrying out toothbrushing.
8. After toothbrushing is complete, children and supervisors should wash their hands with soap and water or decontaminate with hand sanitiser. If single use disposable gloves have been worn, they should be removed and hands washed or decontaminated prior to assisting another child or on completion of the toothbrushing session.
9. If reusable plates are used, they should be washed in warm water using household detergent or placed into a dishwasher.
10. Any tissues or paper towels used should be disposed of in a refuse bag, immediately after brushing.
11. Once toothbrushing is finished, staff are responsible for cleaning any surfaces where toothbrushing has taken place, such as tables or sinks, using dedicated household gloves and COSHH approved household detergent.
12. The toothbrush storage system, as well as the cupboard, drawer, trolley or shelf should be cleaned with warm water and household detergent and then dried thoroughly once a week or more often if soiled. Disinfectant wipes are not recommended for cleaning storage systems. Dedicated household gloves should be worn when cleaning sinks or toothbrush storage systems.
13. Toothbrushes should not be soaked in Milton or any other cleaner or disinfectant.

Appendices

5

Appendices

- 01 Staff Training Record
- 02 Staff Quality Standards Record
- 03 Risk Assessment
- 04 Sample Parent Letter
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- 14 Quality Assurance Monitoring Tool

Staff Training Record

01

Staff Training Record

I have attended supervised toothbrushing training (please enter details below)

[illegible]

Quality Standards Record for Staff

02

Quality Standards Record for Staff

I have read and understood the quality standards for the supervised toothbrushing scheme (please enter details below)

[illegible]

Risk Assessment

03

Supervised Toothbrushing Scheme Risk Assessment

Name of setting

Please add, delete or amend any risks dependant on your individual setting

| Number | Identify Hazard | Who may be harmed? | What are the risks? | What can be done to remove or lessen the risk? | Completed by and date |
|---|--|--------------------------------------|---|--|-----------------------|
| 1. Potential hazards & managing risks whilst preparing to implement toothbrushing | | | | | |
| 1a | Cuts and abrasions to staff and children | All staff and children participating | Potential ingress and transfer of bacteria/germs | Ensure waterproof dressings are used to cover cuts and abrasions on staff and children. Ensure staff are trained and have read Infection Prevention Control guidelines (IPC). | |
| 1b | Staff & children may not wash or sanitise hands thoroughly | All staff and children participating | Transfer of bacteria/germs to children who are brushing | Ensure all staff have attended Brilliant Brushers training & read IPC guidelines in the toolkit. Children to be well supervised at all times. Regular Quality Assurance monitoring undertaken by the supervised toothbrushing lead in the setting, using the Quality Assurance Monitoring Tool. | |
| 1c | Staff not changing disposable gloves after assisting a child with toothbrushing, prior to assisting another child | All staff and children participating | Transfer of bacteria/germs to children who are brushing | Make sure all staff have received supervised toothbrushing training and have read the quality standards and IPC. Regular quality assurance monitoring undertaken by the supervised toothbrushing lead in the setting, using the Quality Assurance Monitoring Toolkit to observe changing of gloves. | |
| 1d | Staff member may not be able to wear full PPE – i.e. disposable gloves and/or apron due to behavioural and sensory needs of children | All staff and children participating | Transfer of bacteria/germs to children who are brushing and staff members | Thorough hand washing must be completed before and after assisted toothbrushing by the staff member as advised in IPC section of the toolkit. Hands must be washed between assisting each individual child with brushing to ensure no cross infection occurs. Be aware of splash and spray contamination and follow local infection prevention control procedures. | |

| Number | Identify Hazard | Who may be harmed? | What are the risks? | What can be done to remove or lessen the risk? | Completed by and date |
|---|--|--------------------------------------|--|--|-----------------------|
| 1. Potential hazards & managing risks whilst preparing to implement toothbrushing | | | | | |
| 1e | Toothpaste may spill onto the floor when lead/supervisor is dispensing paste onto a paper towel/plastic plate or when children transfer paste from paper towel to toothbrush | All staff and children participating | Children touch or ingest paste resulting in potential contamination Someone may slip on the paste | Paste is only dispensed onto paper towel or plastic plate when toothbrushing is ready to commence in a safe area (i.e. on a carpet, at a table or sink). Children are made aware of how to transfer toothpaste from the paper towel to their toothbrush (this can be supported with the use of any relevant learning aids such as symbols, Makaton, or Visual Schedules etc.). Any spillage is cleaned immediately. Children to be supervised at all times. | |
| 1f | A toothbrush may touch more than one amount of paste when transferring dispensed paste from a plastic plate to a toothbrush | Participating children | Cross contamination | Staff should ensure adequate space between each amount of dispensed toothpaste, if using a plastic plate. If necessary, staff load the toothbrush to reduce the risk of the child taking more than one amount. If children are loading the toothbrush they must be supervised at all times. | |
| 2. Potential hazards & managing risks whilst children are brushing | | | | | |
| 2a | Children picking up incorrect toothbrush | Other participating children | Transfer of bacteria/germs | Children are well supervised at all times (and where appropriate confirm to staff which is their toothbrush before removing it from the rack). Racks to be stored out of the reach of children (space is class specific) and only taken from storage area when all children have washed hands and are ready. Where necessary, staff to remove the toothbrush from rack and hand the toothbrush to the child. | |
| 2b | Toothbrushes can touch if children are too close | Other children | Spreading bacteria/germs | Ensure children are always supervised and keep sufficient space between the children whilst they are brushing. Dispose of any brushes if the toothbrush heads do touch. | |

| Number | Identify Hazard | Who may be harmed? | What are the risks? | What can be done to remove or lessen the risk? | Completed by and date |
|--|--|--------------------------------------|---|---|-----------------------|
| 2. Potential hazards & managing risks whilst children are brushing | | | | | |
| 2c | Children biting/scratching others | All staff and children participating | Bite injuries and scratches from children who are displaying unregulated behaviours | <p>Ensure that staff that are implementing the toothbrushing are aware of potential behaviours or signs that behaviour is unregulated.</p> <p>Staff to reduce biting risk by holding the toothbrush at the far end of the handle.</p> <p>If pupils are starting to display concerning behaviours, stop the toothbrushing for that session and try again when the child is more regulated.</p> <p>Follow each child's individual care plan and consider an individual risk assessment if required.</p> | |
| 2d | Spillage or droplets created when spitting out excess paste during or after brushing | All staff and children participating | Cross contamination | <p>Ensure sufficient space between children.</p> <p>Encourage children to put paper towel to mouth before spitting out.</p> <p>Staff demonstrate process before commencing brushing.</p> | |
| 2e | Children swallowing toothpaste as unable to spit out | Participating children | Over ingestion of toothpaste | Ensure a smear of toothpaste for up to 3 years and a pea size amount for 3 years and above. | |
| 2f | Children moving around whilst brushing | Participating children | Potential trip or fall Potential injury to the child's mouth | <p>Where possible children to be sat at tables to brush, if not the area used for brushing needs to be assessed for trip hazards.</p> <p>Staff should be aware of children who may move around whilst brushing and should closely supervise (holding hands is ideal but if not to be at least within touching distance).</p> <p>Children are made aware of safety precautions and supported with the use of any relevant learning aids as required.</p> | |
| 2g | Toothbrushes may drop onto the floor | Participating children | Contamination from the floor | <p>Ensure any toothbrushes which fall onto the floor are immediately discarded and replaced.</p> <p>Ensure spare stock is readily available.</p> | |
| 2h | Used paper towels/tissues | Staff and children | Cross contamination | <p>Ensure any used tissues or paper towels are disposed of immediately after brushing in a refuse bag.</p> <p>This can be supported by the use of any relevant learning aids as required.</p> | |

| Number | Identify Hazard | Who may be harmed? | What are the risks? | What can be done to remove or lessen the risk? | Completed by and date |
|---|---|--------------------------------------|---|---|-----------------------|
| 3. Potential hazards and managing risks during cleaning and storing of toothbrushes | | | | | |
| 3a | Children rinsing toothbrushes following use | All staff and children participating | Cross contamination from brushes touching sink or taps, or from children frequently touching taps | Staff closely supervise children at all times. Only one child rinses their own toothbrush at the sink at a time. This can be supported by the use of any relevant learning aids as required. If necessary staff to rinse toothbrushes. | |
| 3b | Toothbrush is not replaced in the correct place in the rack | Participating children | Cross contamination if a child uses wrong toothbrush | Staff closely supervise children at all times, and ensure each child replaces toothbrush into correct place/hole - or staff to complete this on the child's behalf. Toothbrush Identification Record should be at hand. | |
| 3c | Rack used to transfer brushes to sink for rinsing | All staff and children participating | Cross contamination to rack & brushes | Where possible children rinse their own toothbrush. This can be supported by the use of any relevant learning aids as required. Where racks are used to transfer brushes to a sink, these must be washed with warm water and household detergent before returning toothbrush to rack. Brushes MUST NOT come into contact with each other at any time, and should be placed on a clean paper towel, with adequate spacing, whilst rack is cleaned. | |
| 3d | Contamination to toothbrushes | Participating children | Cross contamination via droplets | Storage racks MUST NOT be placed directly beside where brushing takes place or beside the toilet area. Lids must be placed onto racks once all brushes have been rinsed and replaced. | |
| 3e | Toothbrushes are incorrectly handled by other children | Participating children | Cross contamination via droplets or contact spread | Children are made aware of their own number or symbol to locate their brush in the rack. This can be supported by the use of relevant learning aids as required. Staff closely supervise children. Brushes in racks are stored out of reach of children, in designated toothbrush storage trolley, shelf or a clean, dry cupboard when not in use. | |

| Number | Identify Hazard | Who may be harmed? | What are the risks? | What can be done to remove or lessen the risk? | Completed by and date |
|---|---|--------------------------------------|---------------------|---|-----------------------|
| 3. Potential hazards and managing risks during cleaning and storing of toothbrushes | | | | | |
| 3f | Contamination on surfaces following brushing session | All staff and children participating | Cross contamination | <p>All areas where brushing takes place should be easy to clean.</p> <p>All areas where brushing has taken place, including sinks, to be cleaned by staff using household detergent.</p> <p>Household gloves, dedicated for this purpose are used.</p> <p>Storage racks should be cleaned and dried weekly with warm water and household detergent.</p> | |
| 3g | Staff and children do not wash or sanitise hands following brushing | All staff and children participating | Cross contamination | <p>All staff are trained prior to starting supervised toothbrushing and have read Brilliant Brushers toolkit.</p> <p>Summary guidance poster for staff is displayed for easy reference.</p> <p>Children are supervised during handwashing or sanitising. This can be supported by the use of any relevant learning aids as required.</p> | |

4. Please include any additional risks that have not been identified.

* All cleaning products must be COSHH risk assessed.

Completed and signed by: (Manager/Headteacher and Lead Person)

Date:

Review Date (within 3 months of commencement and annually thereafter)

Sample Parent Letter

04

Insert setting details

Dear Parent or Person with Parental Responsibility,

Re: Brilliant Brushers Supervised Toothbrushing Scheme

Our day nursery/school has been selected to take part in Brilliant Brushers Supervised Toothbrushing Scheme.

Supervised toothbrushing is a simple, proven way to protect children's teeth, particularly in areas where tooth decay is common.

The Government has committed, through its 2024 election manifesto, for all children aged 3-5 (3+ SEND) in selected day nurseries and schools to take part in supervised toothbrushing from September 2025.

Staff have received training on how to deliver the scheme and resources, toothbrushes etc., will be supplied free of charge.

All children taking part will receive toothbrushing packs to encourage toothbrushing at home in addition to brushing at nursery/school.

We feel that this is a fantastic opportunity to help establish good oral hygiene habits, prevent future dental problems and helps support toothbrushing at home.

Your child can only take part in the scheme if you complete and return the consent section of the Information and Consent leaflet that will be sent home with your child.

If you would like to discuss this further, please do not hesitate to contact me.

Yours sincerely

Brilliant Brushers Information and Consent Form

05



Supervised Toothbrushing Scheme
for 3-5 year olds (3+ SEND schools)

Information and Consent Form 1

Come and join the fun

Welcome to Brilliant Brushers supervised toothbrushing scheme

Young children in this area have some of the worst rates of tooth decay in the West Midlands. Did you know that in 2024 tooth decay was the main reason for hospital admissions in children aged 5-9 years? Tooth decay causes unnecessary pain, sleepless nights and time off school, but the good news is that together we can help to prevent it.

What is Brilliant Brushers?

Brilliant Brushers is an NHS/Government funded supervised toothbrushing scheme. It is being offered to our day nursery or school.

How will it happen?

Staff have been trained and supported by an oral health improvement practitioner to supervise or assist your child with toothbrushing once a day.

Each child will be given their own easily identifiable toothbrush to use in the setting, as well as toothbrushing packs to encourage them to brush at home.

Remember that toothbrushing in your child's day nursery or school is not meant to replace toothbrushing at home.

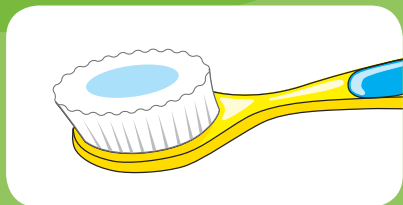
All supervised toothbrushing resources will be provided free of charge.



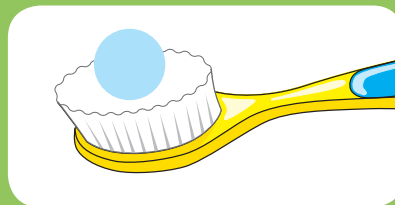
At home you can do your bit too

Brush your child's teeth at home twice a day, especially last thing at night. Fluoride in toothpaste helps prevent tooth decay and makes teeth strong and healthy. Use a family strength fluoride toothpaste, that's one with 1450 parts per million fluoride (ppm), unless your dentist has prescribed higher strength. You can find the amount of fluoride in the list of ingredients on the back of the tube or box.

For children aged up to 3 years, use a smear of *family* toothpaste on a dry toothbrush. If they are 3 years or above use a pea sized amount. Encourage them to spit out and not rinse out with water.



Smear for up to 3 years



Pea size for 3 years and above

Try to make toothbrushing fun, by using songs, apps or timers and brush together.

Instructions

Please complete the consent form below and return it to your child's day nursery or school

(Cut or tear here)

Brilliant Brushers Supervised Toothbrushing Consent

Your child can only take part in this scheme if the consent form below is completed by the parent or person with parental responsibility, and returned to the day nursery or school.

(please tick one box below)

I **would** like my child to take part in Brilliant Brushers

☐

I **would not** like my child to take part in Brilliant Brushers

☐

If not, please say why you do not want your child to take part

Name of day nursery or school

Child's Name

Room/Class/Year

Signature of parent/person
with parental responsibility

Print Name

Date

I understand that by agreeing to my child taking part in the supervised toothbrushing scheme, I am consenting to his/her data being shared with the day nursery or school.

I can choose to withdraw my child at any time by informing a member of staff.

This information will be collected and stored securely by the day nursery or school so that the staff know which children have consented to take part. It will also be used to help monitor the number of children taking part.



Supervised Toothbrushing Scheme
for 3-5 year olds (3+ SEND schools)



Information and Consent Form 2

Come and join the fun

Welcome to Brilliant Brushers supervised toothbrushing scheme

Young children in this area have some of the worst rates of tooth decay in the West Midlands. Did you know that in 2024 tooth decay was the main reason for hospital admissions in children aged 5-9 years? Tooth decay causes unnecessary pain, sleepless nights and time off school, but the good news is that together we can help to prevent it.

What is Brilliant Brushers?

Brilliant Brushers is an NHS/Government funded supervised toothbrushing scheme. It is being offered to our day nursery or school.

How will it happen?

Staff have been trained and supported by an oral health improvement practitioner to supervise or assist your child with toothbrushing once a day.

Each child will be given their own easily identifiable toothbrush to use in the setting, as well as toothbrushing packs to encourage them to brush at home.

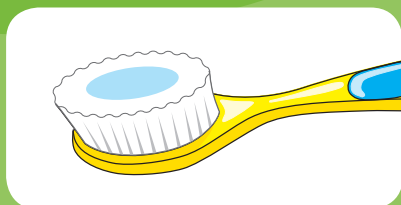
Remember that toothbrushing in your child's day nursery or school is not meant to replace toothbrushing at home.

All supervised toothbrushing resources will be provided free of charge.

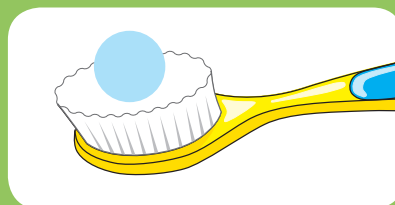
At home you can do your bit too

Brush your child's teeth at home twice a day, especially last thing at night. Fluoride in toothpaste helps prevent tooth decay and makes teeth strong and healthy. Use a family strength fluoride toothpaste, that's one with 1450 parts per million fluoride (ppm), unless your dentist has prescribed higher strength. You can find the amount of fluoride in the list of ingredients on the back of the tube or box.

For children aged up to 3 years, use a smear of *family* toothpaste on a dry toothbrush. If they are 3 years or above use a pea sized amount. Encourage them to spit out and not rinse out with water.



Smear for up to 3 years



Pea size for 3 years and above

Try to make toothbrushing fun, by using songs, apps or timers and brush together.

Instructions

Please complete the consent form below and return it to your child's day nursery or school

(Cut or tear here)

Brilliant Brushers Supervised Toothbrushing Consent

Your child can only take part in this scheme if the consent form below is completed by the parent or person with parental responsibility, and returned to the day nursery or school. It would also be helpful if you could complete the toothbrushing questionnaire, especially if your child needs support with toothbrushing.

(please tick one box below)

I **would** like my child to take part in Brilliant Brushers

☐

I **would not** like my child to take part in Brilliant Brushers

☐

If not, please say why you do not want your child to take part

Name of day nursery or school

Child's Name

Room/Class/Year

Signature of parent/person
with parental responsibility

Print Name

Date

I understand that by agreeing to my child taking part in the supervised toothbrushing scheme, I am consenting to his/her data being shared with the day nursery or school.

I can choose to withdraw my child at any time by informing a member of staff.

This information will be collected and stored securely by the day nursery or school so that the staff know which children have consented to take part. It will also be used to help monitor the number of children taking part.

Toothbrushing Questionnaire

We know that parents and carers try their best to clean their children's teeth at home but sometimes this can be quite challenging. We would like to ask you a few questions to help us support your child with toothbrushing at school.

Please complete the questions below to help the staff supervise or assist your child with toothbrushing at school.

1. Are you able to brush your child's teeth daily? (please tick one box)

Yes ☐ No ☐

2. If you answered yes to Q1, can they do it without your help? (please tick one box)

Yes ☐ No ☐

3. If you answered yes to Q1, how long do they normally brush for? (please tick one box)

Less than 2 minutes ☐ 2 minutes ☐ It varies ☐

Other, please explain ☐

4. Which toothbrush do they use? (please tick one box and provide the make of the tooth)

Child's toothbrush ☐ Electric or battery toothbrush ☐ 3-sided toothbrush ☐

Other, please say ☐

5. Which toothpaste do they use? (please tick one box and write the name of the toothpaste and any information that might be useful to us)

Child's toothpaste 0-3 ☐ Child's toothpaste 3+ ☐ Adult toothpaste ☐

Other, please say, for example, non foaming, flavourless ☐

6. Do you struggle when trying to brush your child's teeth? (please tick one box and explain)

Yes ☐ No ☐

If yes, please explain

-
7. Do you have any concerns about your child's teeth and gums? If you do, please explain, for example, bleeding gums, pain

-
8. Can you give us any tips to help us brush your child's teeth at school?

-
9. Does your child have their own dentist or have they been referred to the Community Dental Service?

Yes ☐ No ☐

If yes, what is the name of their dentist

-
10. If they have their own dentist when did they last attend? (please tick one box)

Within the last 3 months ☐ Within the last 6 months ☐

Within the last 12 months ☐ Can't remember ☐

-
11. If there is anything else you would like to tell us about your child's teeth please write this below

Best way to wash hands– NHS guidance

06

Best way to wash hands– NHS guidance

The link below contains a video and guidance on the best way to wash hands.

<https://www.nhs.uk/live-well/healthy-body/best-way-to-wash-your-hands/>



1. Wet your hands with water.



2. Apply enough soap to cover your hands.



3. Rub your hands together.



4. Use 1 hand to rub the back of the other hand and clean in between the fingers. Do the same with the other hand.



5. Rub your hands together and clean in between your fingers.



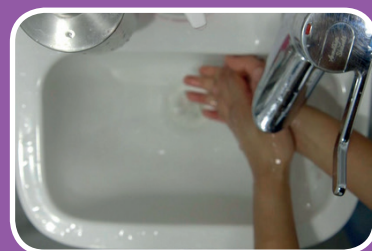
6. Rub the back of your fingers against your palms.



7. Rub your thumb using your other hand. Do the same with the other thumb.



8. Rub the tips of your fingers on the palm of your other hand. Do the same with other hand.



9. Rinse your hands with water.



10. Dry your hands completely with a disposable towel.



11. Use the disposable towel to turn off the tap.

Quick Guide to Supervised Toothbrushing for Staff

(For display in the setting)

A large, white, stylized number '07' is centered on a bright yellow background. The number has a slightly distressed or hand-painted appearance. The background is a solid yellow color with a large, irregular, lighter yellow shape behind the number, creating a layered effect.

07

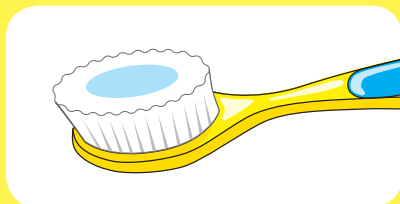


Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND schools)

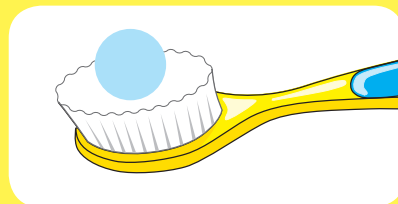


Quick Guide to Supervised Toothbrushing for Staff Toothbrushing

- all children are closely supervised when brushing their teeth
- family toothpaste containing 1450 parts per million fluoride is used unless higher strength has been prescribed by the dentist for an individual child
- the correct amount of fluoride toothpaste is used as below:



Smear for up to 3 years



Pea size for 3 years and above

- after brushing, children should be encouraged to spit out and not rinse

Infection Control

- surfaces/tables should be cleaned with household detergent prior to brushing
- staff and children (under supervision) wash hands with soap and water or decontaminate their hands using hand sanitiser before and after brushing - disposable gloves (and additional relevant PPE) can be worn for toothbrushing
- if single use disposable gloves are used these should be changed and hands should be washed or decontaminated prior to assisting another child
- toothpaste is dispensed directly onto a paper towel or plastic plate
- all disposable items should be placed in a waste bag for disposal immediately after toothbrushing
- care is taken when removing and replacing toothbrushes from the toothbrushing storage system so that they do not touch each other
- dropped toothbrushes are replaced
- household gloves are used when cleaning toothbrushing storage systems, surfaces and sinks
- toothbrushing storage systems and storage areas are cleaned at least weekly, with warm water and household detergent

Full guidance can be found in the Brilliant Brushers Toolkit.

Developed by the Healthy Smile Team, Shropshire Community Health NHS Trust 2025.

Toothbrush Identification Record

08

Toothbrush Identification Record

Please enter the colour of the rack and details of all children taking part in supervised or assisted toothbrushing.

Storage rack colour:

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Storage rack colour:

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Storage rack colour:

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Toothbrush Identification Record

Please enter the colour of the rack and details of all children taking part in supervised or assisted toothbrushing.

Storage rack colour:

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 11 | | |
| 12 | | |
| 13 | | |
| 14 | | |
| 15 | | |
| 16 | | |
| 17 | | |
| 18 | | |
| 19 | | |
| 20 | | |

Storage rack colour:

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |

| Number | Child's Name | Toothbrush Colour |
|--------|--------------|-------------------|
| 6 | | |
| 7 | | |
| 8 | | |
| 9 | | |
| 10 | | |

Daily Toothbrushing Record

Daily Toothbrushing
Record

09

Daily Toothbrushing Record

Class/Room Name

Journal Pre-proof

[illegible]

| Code | Child took part in supervised toothbrushing today | Child did not take part in supervised toothbrushing today | AC | Acclimatisation |
|-------------------------------------|---|---|---------------------------------------|----------------------------|
| <input checked="" type="checkbox"/> | | <input type="checkbox"/> X | | |
| <input type="checkbox"/> AS | Assisted/1-1 | <input type="checkbox"/> NS | <input type="checkbox"/> R | <input type="checkbox"/> A |
| | Child not normally in for session | Refused toothbrushing | Partly brushed, not all cleaned today | Child Absent |

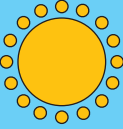

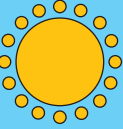

Home Toothbrushing Chart

10



Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND schools)

Toothbrushing chart

| | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|--------|---------|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Week 1 | Day |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Evening |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Week 2 | Day |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Evening |  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Remember! Brush your teeth before bed and at least one other time in the day

Use a smear of fluoride toothpaste for children up to the age of 3 and a pea sized amount for children aged 3 years and above.

Spit out toothpaste after brushing, don't rinse!

Home Toothbrushing Certificate

11



Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND schools)



Toothbrushing Certificate

I'm a Brilliant Brusher!

Well done, keep brushing!



Brilliant Brushers Top Tips

(For display in areas where parents can see it)

A large, stylized white number '12' is centered within a yellow, irregular brushstroke shape that resembles a heart or a splash. The background is a solid yellow color.

12



Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND schools)



Top Tips for Toothbrushing

- Use a family strength fluoride toothpaste (containing 1450 parts per million fluoride) unless your dentist has prescribed a higher strength
- Look at the ingredients on the box or tube of toothpaste to check how much fluoride it contains

INGREDIENTS:

Aqua, Hydrated Silica, Sorbitol, Sodium Lauryl Sulfate, Cellulose Gum, Aroma, Sodium Fluoride, Soc 77891, Trisodium Phosphate, Limonene, Polysorbate 80, CI 74260

Contains Sodium Fluoride (1450ppm Fluoride) / Innehåller natriumfluorid (1450ppm Fluoride). / S Fluoride). / Innehåller natriumfluorid (1450ppm Fluoride). / Innehåller natriumfluorid (1450ppm F

- For children aged up to 3 years, use a smear of toothpaste
- For children aged 3 years and above, use a pea size amount of toothpaste
- Spit out, don't rinse out after brushing
- Help your child to brush
- Brush last thing at night and at least one other time during the day

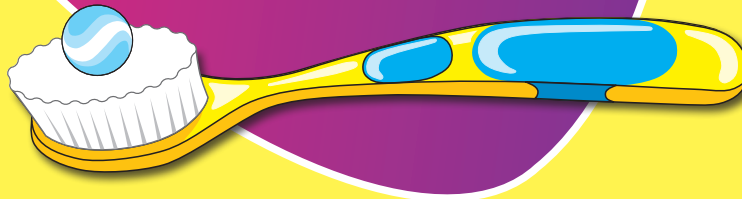
We're taking part in Brilliant Brushers

(For display in areas where parents can see it)



13

Brilliant Brushers



Supervised Toothbrushing Scheme
for 3–5 year olds (3+ SEND schools)

**We're taking part
in Brilliant Brushers**



Quality Assurance Monitoring Tool

14

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

Making Toothbrushing Fun



6

Making Toothbrushing Fun

Try to make toothbrushing fun, by playing songs, using apps or timers whilst toothbrushing is taking place.

Here are some of our favourites:



Hey Duggee – Toothbrushing song

Join Duggee and the Squirrels for 2 minutes of toothbrushing with this catchy song, but remember not to wet the toothbrush before applying toothpaste.



Sesame Street – Healthy teeth, Healthy me

Join Elmo and his friends and get brushy brush brushing!



Brush DJ – NHS Toothbrushing App

Brush for 2 minutes whilst listening to music of your choice!



Super Simple Songs – Brush your teeth

Sing along with 3 smiley monsters who brush morning and night.

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7

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Acknowledgements



Acknowledgements

This toolkit has been developed by the Healthy Smile Team, Shropshire Community Dental Service and is based on the following guidance:

- Public Health England, **Improving Oral Health**: A toolkit to support commissioning of supervised toothbrushing programmes in early years and school settings. (2016)

and

- Public Health England, COVID-19: guidance for supervised toothbrushing programmes in early years and school settings. (2020)

We would like to thank the following for their support in the development of this toolkit so that it can be used across the West Midlands and beyond if required:

- colleagues from Public Health England
- Shropshire and Staffordshire Local Dental Network
- oral health improvement colleagues from across the West Midlands
- day nurseries and schools in Shropshire and Telford & Wrekin

Organisations may re-use or adapt this toolkit as appropriate with the approval of the local Consultant in Dental Public Health and provided that the Healthy Smile Team, Shropshire Community Health NHS Trust are informed of any adaptations and acknowledged as the originators of the toolkit.

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Revised September 2025

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