Oral Health in Schools for pupils with Learning Disabilities and Special Educational Needs











Contents Using this guide and the importance of oral health 1 **Building oral health into the curriculum** 2 THE SMILE PROJECT case study 3 **Key messages and toothbrushing in schools** 5 **Toothbrushing chart** Tips for toothbrushing at home 6 Oral desensitisation 7 **Oral desensitisation techniques** 8 Food and drink 9 Food diary record sheet 10 Food and drink policy in school 11 **Celebrating birthdays at school** 12 **Strategies for mealtimes 13** Visiting the dentist 14 Picture story of dental appointment 15 Oral health resources 16-17

This guidance has been produced by the Buckinghamshire Oral Health Improvement team. It aims to support schools with pupils with learning disabilities or special educational needs promote good oral health, whilst complementing Ofsted requirements.

Using this guide and the importance of oral health

Teeth are very important (even milk teeth)

Although milk teeth are temporary they are just as important as adult teeth because they aid speech, allow children to eat a varied healthy diet, give them confidence in their appearance and hold the space for the adult teeth.

Studies have shown that poor oral health can increase the risk of certain diseases such as heart disease, stroke, lung disease, dementia and diabetes, as well as contributing to obesity. It is therefore important that the mouth is cared for from early age.

This guide looks at developing activities, such as toothbrushing, desensitisation and food tasting, so that oral health can be fully integrated across the school curriculum. Oral health can become part of a variety of lessons, facilitating child-led learning with some directed learning through activities, including art and songs.

Every school aims to enable each pupil to achieve their best, in a supportive and caring environment that recognises and meets the needs of that individual. It is particularly important for pupils with a learning disability to develop skills and attitudes that will be of benefit to them as they grow older, such as the ability to communicate orally at a high level, perseverance, cooperation, taking responsibility for their own learning, the ability to work independently, and confidence to find solutions when faced with problems.

Personal, Social, Emotional and Well-being (PSEWB) Key Skill targets two important areas of development, supporting pupils 'Towards Self help' and 'Towards Self Advocacy'. Self Help focuses on engagement with personal care tasks such as eating, drinking, bathing and oral hygiene, whereas Self Advocacy looks at a pupil's awareness, attachment and enjoyment. Both are important for good oral health.

Pupils with learning Disabilities are most likely to learn through the repetition offered in routines. The Life Skills curriculum aims to provide opportunities for pupils to develop their understanding of healthy lifestyles by enabling them to:

- learn about the need for personal hygiene, take part in and maintain personal hygiene routines
- consider their diet, fitness and daily routines as part of a healthy lifestyle.

Looking after their mouth is an important life skill for students with learning disabilities to develop.

Focusing on oral health allows the pupils to:

- Learn key skills which will sustain them throughout their lives
- Feel positive about themselves
- Become as independent as possible in their daily lives
- Develop confidence and responsibility by making real choices concerning their lives at school and in other areas of their lives
- Understand the importance of adopting healthy, active lifestyles.



Building oral health into the curriculum

Making oral health a school project will help those pupils who find toothbrushing and visiting the dentist quite stressful. It will also help overcome common issues that therapists encounter such as frequent requests for chewing aids, advice on saliva management and programmes for managing hands in the mouth.

Oral health can be built into various parts of the curriculum. Some examples of things to try:

- Feeling different toothbrushes
- Tasting different toothpastes and a variety of foods
- Identifying the colours of toothbrushes or foods
- Naming things used to clean our teeth
- Working through an alphabet of healthy food

Introducing oral health into a lesson plan for an individual might include:

Area of Learning	Learning Objective	Area of Provision	Resources	Vocabulary
PSEWB	To pass 2 items linked to teeth cleaning on request	Table and chair in room	Mug of water, tooth- brush, toothpaste, grey spittoon, cloth/ towel	Hold, hand, tooth- brush, toothpaste, teeth, mouth, water
Physical development	To start to be independent in self-care routines e.g. cleaning teeth	Table and chair in room	Mug of water, tooth- brush, toothpaste, grey spittoon, cloth/ towel	Hold, hand, tooth- brush, toothpaste, teeth, mouth, water, spit
Understanding the world	To operate the flip top of a tube of toothpaste	Table and chair in room	Flip top tube of toothpaste	Toothpaste, lid, tube, flip, nail, finger, thumb

Daily living skills

The Life Skills curriculum aims to provide opportunities for pupils to develop their independence. Shopping, cooking and healthy eating activities will enable pupils to:

- Make drinks and snacks
- Prepare a shopping list
- Prepare food and cooking
- Plan for a balanced diet
- Follow instructions and recipes
- Understand health and safety in the kitchen
- Go shopping
- Learn about and use money
- Plan for and use public transport
- Consider their personal safety
- Take acceptable risks



Older pupils could be helped to find healthy foods on a shopping trip, using a pictorial shopping list. These could be shared with each other at snack time.

Case study: Comments from the Oral Health Champion at Heritage House School, Chesham, Bucks, HP5 3BP

THE SMILE PROJECT

The Heritage House SMILE award was achieved through team effort including the school senior leadership, teachers, therapists, school nurse, parents and of course, our amazing students! This is how we did it.....

Oral Hygiene

Our commitment: We encouraged and support tooth brushing in school every day. We encouraged **reluctant brushers** through desensitisation, supported the development of more independent brushing skills in our **supported brushers** and celebrated **independent brushers**.

Our resources: Parents received a **SMILE award pack** with information on **oral hygiene and healthy eating**, an **oral sensory programme** from the OTs and an **oral motor programme** from the Speech Therapists. Teachers received a copy of the same pack. Students received a **toothbrush**, **toothpaste**, a **chewy T bar and a drawstring bag** with their name. Each class was provided with a variety of **sensory balls and vibrating toys** for the oral sensory programme.

Our activities: We got everyone in the mood by **decorating** our entrance hall and doing art projects with support from our Creative Arts Department and the students' class art work. Every morning the students would gather and we would play the "**Popcorn Song**" on YOUTUBE. We used this Marker Music as a means of preparing our students for the Sensory element of our programme. Thereafter we attempted a few elements from the motor programme and use the T bars to practise chewing. At this stage we got toothbrushes and toothpaste and sang our **Tooth Brushing Song** while the students brushed their teeth.

We also had a regular weekly tooth brushing session where **all the classes** came together to practise in the hall. We had a few **early morning training sessions** where the team met to ask questions and share their thoughts on the project. We organised **assemblies** where the students could invite parents to see their programme and receive encouragement and training. We also arranged to have **dentist role play sessions** where the students were able to look in each other's mouths and dress up as dentists. We then used the pictures from these sessions to create our own **Heritage House School Social Story** for visiting the dentist.

Healthy Eating

Our commitment: We encouraged healthy eating in school by **offering healthy menu options** for school dinners. We educated staff and parents about **healthy snack** options. We encouraged our students who were **picky eaters** to touch, smell, taste and eat a range of fruit, vegetables, cheese and cereals.

Our resources: We had Communicate in Print **tick sheets** that students and staff could use to document whether a student was able to smell, touch, taste or eat a healthy food presented at snack- time. We provided the classes with ideas for exploring healthy eating in the classroom through **activities** such as messy food play, making food creatures and food art.

Our activities: We organised assemblies that included parents where we put on **displays of healthy snacks**. We asked parents to consider their **children's lunch boxes** and replace high sugar snacks with low sugar options instead. We offered students a range of these **healthy snacks to try in school** and we used a desensitisation approach for our picky eaters. We encouraged food messy play and tasting while playing.

Therapy and SMILE

Although the foundation of this project was in "Health", we were delighted to witness how the school embraced the activities and committed to improving these basic self-care skills in our students. We were able to embed desensitisation techniques, an oral sensory programme and an oral motor programme. These programmes had a profound impact on our students' ability to tolerate and participate in tooth brushing. We also noticed a decrease in the amount of mouthing and orally seeking behaviours in school. Students eating and drinking skills showed some improvement and we noticed a number of students who became more verbal during the project. While most of these improvements were anecdotal, we did gather evidence to support improved tooth brushing, increased tolerance to sensory input and improvement of oral motor skills.

Key Messages

Three ways to prevent dental disease

- Brush children's teeth twice a day with fluoride toothpaste.
- Keep sugary foods and drinks to mealtimes only.
- Visit the dentist regularly.



Toothbrushing

For children **aged 3 years** and above use a pea-sized amount of toothpaste containing **1,350 – 1,500ppm** which is the amount found in standard adult toothpaste. Encourage spitting out after brushing, rather than rinsing with water, this will allow the fluoride to work more effectively.



You can find details of the Fluoride content on the side of the toothpaste packet

Toothbrushing in schools

The aim of toothbrushing in school is to promote brushing in a relaxed and supportive way and it is hoped that the young people will gain confidence and become more independent as they do this more regularly. Brushing in schools should be in addition to the brushing that goes on at home.

Ideally it will be a daily activity, with a set process repeated each time, to wake up the face, improve general mouth awareness/ desensitise, an oral-motor/ speech exercise and then brush the teeth whilst listening to a lively piece of music.

The use of a toothbrushing song helps children to identify toothbrushing with these sounds (these can be shared with parents so that it could be reinforced at home).



You might like to use a song to encourage brushing:

Toothbrushing Song

Sung to the tune of 'Twinkle, twinkle little star'

Here's my toothpaste, here's my brush
I won't hurry, I won't rush,
Working hard to keep teeth clean,
Front and back and in-between,
When I brush for quite a while,
I will have a happy smile.

A toothbrushing chart can also be useful to encourage children to brush at home, an example chart can be found on the following page.

Toothbrushing Chart

Please mark when you brush your teeth each day \checkmark



Mark the sheet twice a day when you brush your teeth in the morning and at night	Week 1	Week 2	Week 3	Week 4
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Fill in the chart when you brush your teeth and bring back your completed page to school

Tips for toothbrushing at home

Try to brush in a relaxed and supportive way

It doesn't matter at what time of day this happens but it is important to make sure that the teeth are clean before bed.

Tooth brushing does not necessarily have to take place in a bathroom and it may be more comfortable sitting in a wheelchair or on a high-backed chair. Remember to support the head if needed.

A systematic approach is encouraged when tooth brushing to ensure that all surfaces of the teeth and gums are brushed. Electric toothbrushes (if tolerated) are ideal as the larger handles are often easier to hold and the teeth can be cleaned more efficiently, these are suitable from the age of 8 years old.

If the taste of ordinary toothpaste is too strong a low foaming, no taste toothpaste might be useful such as OraNurse, available from www.dentocare.co.uk.



- It sometimes takes 2 people to support toothbrushing one to distract, hold hands or encourage whilst the other brushes the teeth.
- Try using a mouth prop or finger shield as most people find it easier to bite down on something than keeping their mouth open by themselves (never put your fingers between the teeth). 2 toothbrushes taped together back to back make an effective mouth prop.



A specialized brush such as a Dr Barman's Superbrush toothbrush may help as it
is designed to clean several tooth surfaces at once. Both products are available
from www.dentocare.co.uk...



- Distractions such as listening to music or having the T.V. on may help. An App called "Brush with Jackson" can make brushing more fun (www.rosiesplaytime.com)
- Try brushing different parts of the mouth in short sessions through the day.
- Brushing teeth in the bath may be easier.

Gum disease

Effective daily brushing of the teeth and gums helps to keep them healthy. If there is not good oral hygiene the state of the mouth can change quickly. Bleeding when brushing indicates unhealthy gums and should not be ignored; continue to brush the area gently but thoroughly, using a soft bristled toothbrush with a small head, focusing around the gum margin.

Visit a dentist regularly

It is best to see a dentist for individual help and advice. Dentists will be able to suggest suitable products such as those containing Chlorhexidine Gluconate e.g. Corsodyl or prescribe other treatment such as a higher dose Fluoride toothpaste e.g. Duraphat, where necessary depending on age. Please follow the dentist's advice and use according to the manufacturer's instructions.



Oral desensitisation

The mouth is the most sensitive area of the body and babies use this to learn about different textures. This stage of exploring is also important in helping the child to develop control of their mouth (oral motor control) i.e. the ability to suck, blow, chew etc.

The child's ability to move the tongue and lips to be able to feed and speak well depends on having enough sensitivity in and around their mouth.

When a child is sensitive to touch it is not uncommon for the area within and around the mouth to cause the most problems. This can result in frustration for parents at meal times and when brushing teeth.

When the mouth area is overly sensitive:

- Massage around the mouth and cheeks to help to desensitise the area
- Introduce a small toothbrush gradually
- The use of mouth toys such as blowing instruments or using a straw can develop muscle tone and mouth function (<u>www.talktools.com</u>)



Things to think about when starting to help a child become more tolerant to textures in their mouth:

- Control of muscles in the mouth begin with sucking and are followed by blowing, biting, crunching and then chewing. Think about this order when presenting oral activities to a child e.g. if the child has good sucking skills then choose an activity that focuses on the next stage i.e. blowing.
- Aim to carry out activities on a daily basis as this will help to maximize the child's ability to develop tolerance to sensations in their mouth.
- Exploring textures with hands is important once the child has begun to tolerate and explore different textures with their mouth.
- Experimenting with different temperatures will improve sensory awareness too.

Oral desensitisation techniques



Figure 1: Move hands symmetrically towards the mouth.

Next encourage the child to apply pressure to the roof of their mouth and gums by using their finger or a soft, round object. Gentle hand over hand assistance may be required.



Figure 2: Introduce the child's finger to their mouth by placing the pad of their finger onto their lip.



Figure 3: Introduce their finger into the mouth by rolling the finger to the inside the lip.



Figure 4: Massage the gums concentrating on one part of the mouth at a time.

Start using this method when the child is brushing their teeth.

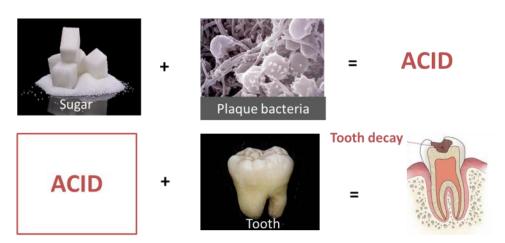
Encourage the child to hold the toothbrush and brush their tongue, teeth, inside of the cheeks and roof of the mouth. An electric toothbrush may be used to provide additional sensory input. Please use a very soft brush. Once the child is coping well with touch to their face and the inside of their mouth you can introduce other activities, which follow the order of oral motor development.

The Speech and language therapist can suggest strategies that will help a child to decrease their tactile sensitivity, increase awareness of the mouth structure, improve tongue movements and increase the ability and willingness to brush teeth at a comfortable pace.

Food and Drink

It is important to focus on healthy eating including a review of snacks brought into or provided by the school, and empowering pupils to make healthy choices. The aim is to promote a positive and healthy attitude towards nutrition which takes account of medical complexity and individual diversity.

The risk of tooth decay increases with the number of times that teeth are exposed to sugar each day (in both food and drink). It is therefore best to limit foods and drinks containing sugar to main mealtimes, this allows time between meals for saliva to help get rid of the acid and minimise the damage caused



Some guidance about food, drinks and snacks:

- If a snack is given in-between main meals, choose a sugar free one (such as fresh fruit, raw vegetables, crackers, cheese, bread or other non-sugary foods).
- Make healthy choices easy for each child by having fresh fruit and vegetables readily available.
- Water and milk are the only drinks recommend between meals. Fruit juice and fruit squash (including sugar free versions) are acidic so should be given at mealtimes only and diluted with water.
- Be aware that in dried fruit, the sugar has been altered and can cause decay, so please keep these to mealtimes only.
- Try not to give sweets as treats or rewards.

Foods can be trialled and tasted in class as part of a healthy eating lesson (please ensure that no child is allergic to any ingredients). If a child liked a particular food a note can be sent home to the parents suggesting this might be a suitable snack to send into school for snack time in future.

A template to record the foods tried is on the next page

However the nutritional and hydration needs of these students vary and may not always fit healthy eating recommendations. Where this is the case the aim is to promote a positive and healthy attitude towards nutrition which takes account of medical complexity and individual diversity (especially in cases of dysphagia and PEG feeding). It is about reviewing the whole eating experience and looking at ways to improve the environment, to promote sitting down, taking their time and encouraging the social enjoyment that comes from eating with others.

Food diary record sheet

Week commencing Target food	Touch	Lick	Nibble	Eat
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

School food and drink policy

A school food and drink policy helps schools set out their approach to food and drink provision and it's ethos to food and eating well throughout the school day, ensuring it is inclusive for all pupils. A policy can cover:

- The food and drink provided for meals, snacks and drinks and food and drinks from home
- How the cultural, religious and special dietary requirements, including managing allergies and intolerances are catered for.
- Food safety and hygiene
- The eating environment and social aspects of mealtimes
- Communicating with children and families

A multi-disciplinary approach

Schools should ideally develop a healthy eating policy in consultation with a variety of relevant professionals, these might include the school nurse, dietician, specialist speech and language therapist, occupational therapist and paediatrician, this multi-disciplinary approach will:

- Outline programmes that ensure all students are able to eat and drink safely, and staff are trained in following these recommendations
- Develop sensory and motor skills needed to enjoy a wide variety of tastes and textures
- Improve tactile awareness of hands and mouth and different food tastes and textures
- Ensure vigilant monitoring of weight in vulnerable students
- Provide advice on appropriate dietary choices
- Provide medical insight and intervention when necessary
- Move students toward independent eating where possible

Key considerations for pupils with special dietary requirements:

Schools must work in partnership with parents and carers to improve the variety of food and drinks enjoyed by children, school should:

- As far as is possible, all food served will follow healthy eating principles to ensure that students are getting a nutritious and balanced diet
- As far as is possible, all medical and dietary needs are met within these principles
- A suitable, attractive environment is provided in which food is eaten
- A tooth friendly snack option should always be available and encouragement given to make a healthy choice
- Staff are aware of individual students hydration needs and ensure that these are met
- When high sugar supplements are provided (e.g. complain / ensure etc.) techniques to minimise
 the impact on oral health will be utilised including using a straw, providing water to flush the
 mouth, using savoury versions if acceptable
- Up-to-date records of student's medical and dietary needs are maintained and staff are aware of these.

Celebrating Birthdays at School

Birthdays are a very exciting time for young children and it is always nice to share this fun day with their friends at nursery and school. However, for most children this will not be their only celebration as they will also celebrate at home and at their party.

It is important that they are made to feel special on their birthday and there are lots of ways you can do this without involving foods. You can use birthday hats, badges, and the giving of special privileges for the day, you can also have a candle that the birthday child blows out while everyone sings "Happy Birthday" to them.

What's the maximum amount of sugar we can have?







*Added sugars: These are free sugars that have been added by a food manufacturer, cook or consumer to a food and include those sugars naturally found in fruit juice, honey and syrups. It doesn't include sugars naturally found in milk and milk products and intact fruit and veg.

Look out for some of the words on the label used by food manufacturers to describe free sugars: cane sugar, honey, brown sugar, high fructose corn syrup, fruit concentrate, corn syrup, fructose, sucrose, glucose, nectars and crystalline sucrose.

There are lots of other non-food related treats you or parents can provide for children: Stickers, Pencil, eraser or stationery items, Providing a book for the class, A picture for classmates to colour.

It is good to have a written celebratory foods policy so that parents know what is expected of them and understand the rules, the following is an example of some policy wording you could use.

When it is your child's birthday we will make that day very special for them by awarding special privileges, we have a birthday hat and sash/badge that they can wear if they wish and a special birthday chair that they are allowed to sit in during that day. They will also be invited to choose that day's story and lead any group sessions we are doing. In order to comply with our healthy eating ethos and to limit the amount of sugar we are feeding our children, we ask that you do not send in sweet foods and drinks to school or nursery.

There will be occasions when children do have sweets or sweet foods, to limit the damage these can do to their teeth it is best to give them at the end of a main mealtime and be aware of the quantity you are giving them. Whether you are celebrating a child's birthday or planning a Christmas or Eid celebration, an open day or a school fete, it is good practice to ensure the food and activities you offer reflect the healthy ethos of your setting.

Information sheet for parents

Strategies for mealtimes

Children with special needs can take longer to learn how to eat independently and eating a meal can be particularly challenging for children who have disabilities.

Take the pressure off

- √ Talk to your child during mealtimes (But not just about food)
- ✓ Make it a fun and relaxed time
- X Don't constantly urge your child to eat

Encourage your child verbally and non-verbally

- ✓ Use positive words
- √ Smile
- ✓ Praise your child
- X Try no to talk about what your child cannot do in front of them

Learn your child's signals

- ⇒ More
- ⇒ Stop
- \Rightarrow Like
- ⇒ Dislike









Demonstrate eating and messy play

- ✓ Show your child that getting messy is fun
- ✓ Get messy with your child
- ✓ Sit at the same level so that they can see you having fun
- X Don't expect them to know how to explore food by themselves



Josh you're sitting very nicely, good boy for trying lettuce





Visiting the Dentist

A child should visit the dentist regularly. They should have a check-up at least once a year. Treatment is free under the NHS for all children. The dentist will help give advice on how best to care for an individual's mouth and will be able to offer some treatments that are designed to help prevent tooth decay.

To find an NHS dentist in your area visit: www.nhs.uk and type 'find a dentist' in the search box. If you require a dentist in an emergency or out of hours call 111

It may be possible to arrange for a pre-appointment visit to familiarise the child or young person with the dental environment. This will also allow for the dental team to gain awareness of the person's communication needs, interaction styles, and difficulties. It will be important for a familiar person and their favourite item to be there with them during the appointment.

Buckinghamshire Priority Dental Service (BPDS) provide a comprehensive treatment service for those adults and children who cannot, by virtue of their special needs, access dentistry in General Dental Practice.

A referral can be made by a dental or non dental professional, further information and referral forms can be obtained from: www.cnwl.nhs.uk/service/buckinghamshire-priority-dental-service/

If you notice any changes or a student appears to be in pain always urge the parents to seek professional advice from a dentist.

Many pupils find visiting the dentist quite stressful. It might be useful to have dress up areas in the classroom with dental clothes, mirrors, models of teeth etc. so that young people can play with these and they get used to seeing and touching them.

Ideas to try:

- Looking at their own teeth in a mirror.
- Counting the teeth on a model
- Using a picture story of going to the dentist (see example on the next page)
- Role play going to the dentist or sitting in the waiting room.

Get the pupils to help make a display to promote regular visits to the dentist and put it up in the entrance hall as a visual reminder to parents.

Reading a story or sharing experiences can help overcome aversion to going to a dental surgery.

The following picture story can be used to explain what will happen when they attend the dentist and explore the pupil's feelings attached to the visit. It can also be used to discuss coping strategies at each stage of the appointment.

Going to the Dentist



A dentist is a doctor who makes sure my teeth are healthy. A dentist has lots of interesting tools they use. I can ask questions about the tools used. The dental nurse helps the dentist





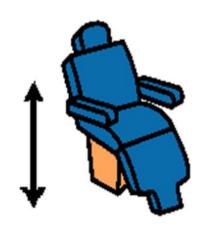
When we get to the dentist, first we will wait in the waiting room. The dentist waiting room has interesting magazines to look at while I wait for my name to be called.



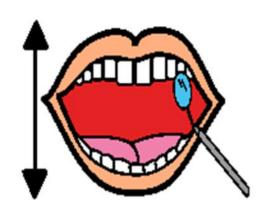
When my name is called we will walk to a smaller room with a very special chair. The dentist will say "hello" I can say, "hello" too.



The dentist chair is really fun. The chair goes up and down. When I can sit in the chair, the dentist will make the chair go up.



The dentist will ask me to open wide and I will open my mouth. The dentist will use a little mirror to look in my mouth.



Oral health resources

Oral Health

Oral Health Foundation is a charity dedicated to raising public awareness of dental and oral health and promoting good dental health practices. www.dentalhealth.org

NHS Live well provides information on oral health, tooth brushing and finding a local NHS dentist.

www.nhs.uk/livewell/dentalhealth There is also a section on children with a learning disability http://www.nhs.uk/Livewell/Childrenwithalearningdisability/Pages/eating-tips-special-needs.aspx

Nottingham Oral Health offer a comprehensive website with oral health information for all ages. www.nottinghamoralhealth.com

British Society for Disability and Oral Health: oral care information for patients and their carers including links to disability organisations and other groups which have web based information on oral and dental care

http://www.bsdh.org/index.php/oral-health-resources

Easy Health website has resources on oral health, healthy eating and going to the dentist. Resources include leaflets and videos www.easyhealth.org.uk

National Institute of Dental and Craniofacial Research provides information on specific conditions and oral care https://catalog.nidcr.nih.gov/OrderPublications/default.aspx#3 and there is also information on oral conditions for children with additional needs www.nidcr.nih.gov/oralhealth/
OralHealthInformation/ChildrensOralHealth/OralConditionsChildrenSpecialNeeds.htm

The National Autistic Society has information on dental care and further links www.autism.org.uk/
professionals/health-workers/dentists-info.aspx

The British Society for Paediatric Dentistry has a resource for parents with autistic children http://bspd.co.uk/Portals/0/BSPD%20Advice%20for%20parents%20of%20children%20with%20autism%20Jan%2017.pdf

Toothbrushing

Supervised toothbrushing is a toolkit from Public Health England, to support early years settings in delivering a supervised toothbrushing programme www.gov.uk/government/publications/improving-oral-health-supervised-tooth-brushing-programme-toolkit

Dental buddy this programme helps you explore oral health in the classroom covering early years and key stage 1 and 2. It also provides information on brushing in nurseries and schools.

www.dentalbuddy.org

Colgate Bright Smiles Bright Futures it gives teachers, children and families the tools they need to make good oral health a permanent part of their lives. With focus on prevention, the programme builds self esteem and teaches good oral health practices to create lifelong habits. www.colgate.co.uk/app/
BrightSmilesBrightFutures/UK/Program-Materials/For-Teachers.cvsp

Oral health resources

Healthy Eating

First Steps Nutrition provides clear free resources to help you find out about healthy meals and snacks for young children and feel confident about portions and portion sizes as your child grows.

www.firststepsnutrition.org

Eat Better Start Better offer voluntary food standards for Early Years settings, offering suggestions on menus, snacks and portion sizes. www.childrensfoodtrust.org.uk/childrens-food-trust/early-years/

The Dairy Council provides information on milk, cheese and other diary products, and educational information for children. www.milk.co.uk

Eatwell Guide makes healthy eating easier to understand by showing the types and portions of foods we need to have for a healthy and well balanced diet. www.nhs.uk/Livewell/Goodfood/Pages/the-eatwell-guide

Food a Fact of Life provides a wealth of free resources about healthy eating, cooking, food and farming for children and young people aged 3 to 18 years. www.foodafactoflife.org.uk

Tesco Eat Happy Project free activities for parents, teachers and youth leaders to help our children build a healthier, happier relationship with food. www.eathappyproject.com

NHS Change for Life tips, healthy recipes and the Be Food Smart app to find out how much sugar, saturated fat and salt is in everyday food www.nhs.uk/Change4Life/

The Caroline Walker Trust, a food charity, recommends a number of helpful aids to eating that parents of children with learning disabilities may find useful for their child. http://www.cwt.org.uk/

Further information is available in

Oral Health in Early Years Settings

And

Oral Health in Care Home Settings

