



Lancashire
Children and Young People's
Trust



Smile 4 Life

Programme Workbook

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Foreword

As the Chair of the Lancashire Children's Trust we believe that there is nothing more important than ensuring that we give our children and young people the best chances in life. Their health and well being are critical to this and ensuring that they are fit, well and able to take part means that we need to do everything possible to prevent problems in later life. Our evidence shows that the dental health of children and young people in Lancashire is generally worse than the national average. We therefore agreed that improving the oral health of children and young people in Lancashire must be included in the 'Lancashire's Children and Young People's Plan 2009 – 2012'.

To make sure that we can make change happen, collaborative working across the local authority and NHS has been vital in ensuring that oral health is an integral part of the broader inequality concerns across Lancashire.

It is not about doing more of the same, it is about taking our knowledge information and services to children and young people and their parents or carers wherever they are. We need to give them the help and support that they need to change their lifestyle and protect themselves for the future. Creating good habits in oral health now through the **Smile4Life** programme will potentially have a lasting effect for generations to come.

The children and young people of Lancashire deserve the best, and ever effort and opportunity will be taken to ensure that they are listened to so that we can make a positive difference in their lives and in their futures.

Helen Denton, Executive Director for Children and Young People

A handwritten signature in black ink that reads "Helen Denton". The signature is written in a cursive style with a large, sweeping initial 'H'.

Smile4Life is a huge programme which is all about reducing the high levels of tooth decay that children have in Lancashire. It's also about laying solid foundations for good oral health throughout life.

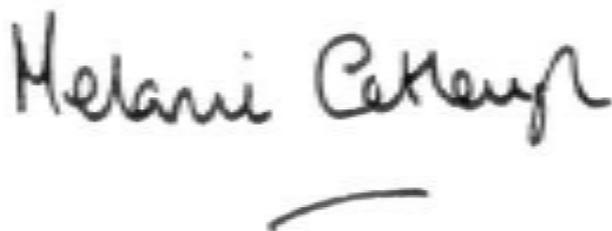
You have been given this workbook, because you are an important part of a large team working across Lancashire, helping to improve oral health through **Smile4Life**.

This work book is one of a number of tools developed as part of the **Smile4Life** programme. It will help to make sure that everyone is spreading important messages in the same way. It will also assist you to create an environment that helps children and young people have good oral and general health.

The workbook will help you to work towards gaining four awards for your place of work. We'd like you to keep using your workbook over the next few years, because **Smile4Life** needs you and your organisation to keep developing ways of improving oral health.

We hope you enjoy using the workbook and that it helps you make a real difference to children's and young people's oral and general health across the whole of Lancashire.

Melanie Catleugh and Eric Rooney, Consultants in Dental Public Health

A handwritten signature in black ink that reads "Melanie Catleugh". Below the signature is a short horizontal line.A stylized handwritten signature in black ink, likely belonging to Eric Rooney.



Smile 4 Life

Chapter 1

Programme Structure

Why does good oral health matter?

Good oral health is important to help children eat, talk, smile and feel confident. However, although the incidence of tooth decay in the UK has decreased dramatically since the 1970s due to the introduction and use of fluoride toothpastes, it still remains a significant problem.

Young children are learning all the time from what they see as well as what they are taught. Undertaking activities that improve oral health, such as snacking on fruit and vegetables, enables lifetime habits to be established at an early age.

What is Smile4Life?

Smile4Life is a programme that has been developed to support co-ordinated activity with the aim of:

Reducing dental caries (tooth decay) in children and laying solid foundations for good oral health throughout life

Improving oral health must be seen as the responsibility of everyone who has a role in the development of children and young people. This includes people working at all levels in both the NHS and non-NHS organisations such as childcare, education, social services and the voluntary sector.

In addition, many of the factors associated with poor oral health are common to other conditions affecting children and young people such as obesity. There are also other diseases which occur in adulthood that share common risks with tooth decay or other oral conditions such as diabetes and heart disease and these include smoking and binge drinking. Therefore integrating oral health with general health increases the opportunity for wider health influences. This also allows oral health improvement to be addressed more effectively and in a more sustained way.

The **Smile4Life** programme has therefore been compiled to support **everyone** who has a role in the development of children and young people to:

- **Ensure environments minimise the risks for children getting tooth decay and support behaviours which will promote good oral and general health**
- **Ensure evidence-based self care behaviours are adopted which will prevent tooth decay. This will be achieved through the delivery of consistent oral health information and improvement activities**
- **Ensure children and young people have access to appropriate and accessible NHS dental services for prevention and, if necessary, treatment**

What is the Smile4Life Programme?

The most effective way in improving oral health is for everyone to adopt the following four evidence-based practices:

- **Healthy Eating and Drinking**
- **Regular Toothbrushing**
- **Adopting a Healthier Lifestyle**
- **Visiting a Dentist Regularly**

The **Smile4Life** programme has therefore been developed, in partnership with nursery staff and in consultation with children and young people, to enable all practitioners in Early Years Foundation Stage settings to demonstrate and be recognised for interventions they undertake that:

- Support healthy eating and drinking in the places where children and young people spend the majority of their time. These interventions should be underpinned by the **main** message to reduce consumption of both the amount and frequency of sugar-sweetened food and drinks and will be measured against:
 - Keeping all foods and drinks containing sugar to mealtimes
 - Snacking on fruit and/or vegetables between meals
 - Drinking only milk and water between meals
- Encourage regular toothbrushing with family fluoride toothpaste and disseminate the following information:
 - Brush twice a day including last thing at night
 - Use a smear (under 3 years) or a pea-sized (over 3 years) amount of family fluoride toothpaste (containing no less than 1000 parts per million Fluoride)
 - Supervise brushing until at least 7 years of age
 - Spit don't rinse after brushing
- Encourage the adoption of a healthy lifestyle, such as keeping active, and disseminate the following information:
 - Do not smoke or use any form of tobacco
 - Keep alcohol consumption to recommended levels
- Facilitate access to NHS dental services and disseminate the following information:
 - Children should visit a dentist from birth
 - Children should be seen at regular intervals of between 3 and 12 months
 - Ask your dentist about fluoride varnish
 - Young people and adults should be seen at regular intervals as determined by their dentist
 - For help in accessing an NHS dentist for routine or urgent care call your local NHS dental helpline number

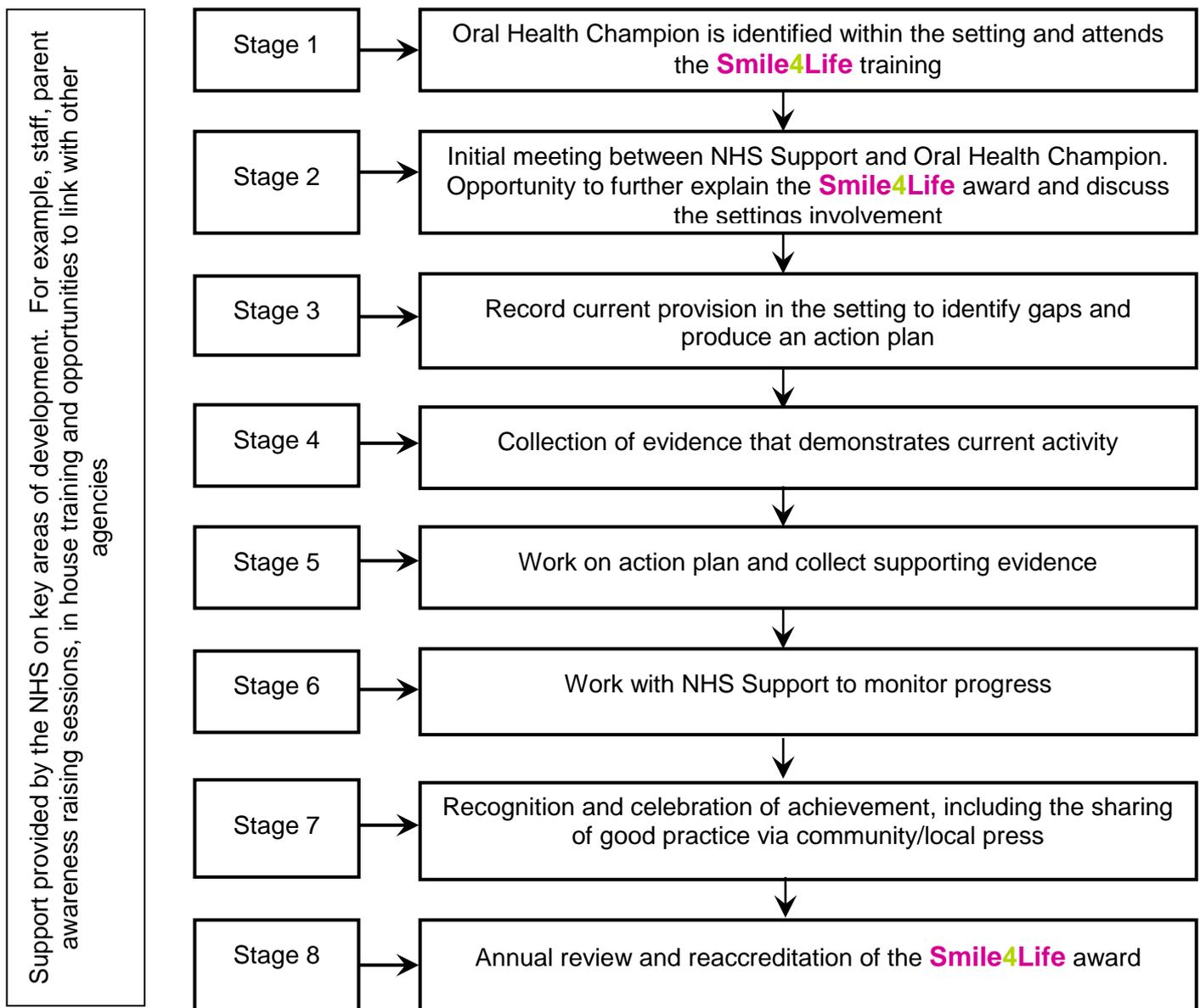
What is the Smile4Life Award?

On successful completion of the **Smile4Life** programme, settings will be awarded with a certificate that can be used to demonstrate the settings commitment to providing an environment that supports both oral and general health for the children and young people in their care. However, to ensure the setting is also recognised for its achievement along the way, a certificate will be awarded for successful completion of each of the four teeth covered within this workbook.

Why work towards the Smile4Life Award?

Your role as a child carer is very important, as many children spend significant amounts of time in an early years setting. Children learn best when they are healthy, safe and secure, when their individual needs are met and when they have positive relationships with the adults caring for them. Child carers are also well placed to offer support to parents to enable them make healthier food choices and provide oral health care in the home. Child carers also have access to children during the period that dental disease can first appear enabling early intervention.

What is the process to achieve the Smile4Life Award?



What are the criteria to achieve the Smile4Life Award?

The criteria for achieving the **Smile4Life** Award have been developed to recognise and reward good practice that is already in place as well as support the implementation of activities to address any gaps in current provision. Therefore, with support from your NHS Support, the programme is primarily about working towards achievements within the four evidence-based practices described above. However, in recognition of the current need to collect evidence for the OFSTED Standards, and to reduce any unnecessary duplication of evidence collection, we have aligned the criteria for the **Smile4Life** Programme with these standards.

In addition, there is no stipulation to undertake the **Smile4Life** Programme in the order set out in the Programme Workbook. Therefore, your setting can choose the tooth in which you want to concentrate on first and can be one in which you already excel and/or already have evidence to support the oral health improvement activities already undertaken.

Why have an Action Plan?

An action plan, that puts the child at the centre of the process, provides the opportunity for the setting to state their commitment to the children in their care and provides information about approaches in the setting to the four oral health practices discussed above.

- It provides evidence for OFSTED and the EYFS standards
- Enables easy continuation of good work/future plans in the event of someone leaving the setting
- Everyone has a chance to agree on best practice for their individual setting
- It helps everyone make the 'healthier choices, easier choices'
- It can be updated as new information becomes available

Staff and parent/carer involvement

It is important to involve everybody in the setting, including parents, so that ideas can be shared and different points of view expressed. The best way to make sure that recommendations and advice provided by the setting are followed on at home is by encouraging parents/carers to support staff in writing the action plan.

Suggestions

Involving parents/carers can sometimes be difficult. Therefore listed below are a few **suggestions** for other ways of getting them involved:

- During a child's induction visit, make sure that the parents/carers are aware of how committed the setting is in providing healthy food and support practices that lead to oral health and a healthy lifestyle
- Talk to the parent/carer about their child's eating habits and oral health and explain the settings ethos about healthy living
- Ask parents/carers about any special dietary requirements their child has before the child attends the setting. Parents/carers of children who are on special diets or have food allergies are responsible for providing the setting with information about the food choices available to the child
- Display menus, including snacks, on notice boards to help parents see a balanced diet
- Display information on oral health improvement activities including information on how to access an NHS dentist
- Display information on how to adopt a healthy lifestyle including information on how to access support to stop smoking etc.
- Hold an oral health/healthy eating open evening
- Inform parents/carers of what their child has eaten that day and whether they have eaten well
- Ask if parents/carers would like to be involved with the staff and children in growing and eating fruit and vegetables
- Inform parents/carers of oral health related activities such as 'fruit tasting week' and send home ideas of how parents/carers can support these activities both in the setting and at home
- Invite parents/carers to have lunch in the setting with the children

What is your role as the setting-based Oral Health Champion?

As Oral Health Champions, you will support the:

- Dissemination of oral health updates and support to colleagues
- Implementation and promotion of a **Smile4Life** environment by focussing on the four teeth
- Collection of current oral health improvement activity evidence
- Identification of any gaps in current oral health improvement activity
- Development of an action plan to address any gaps found
- Mapping of the local environment to identify local support links i.e. dental teams, stop smoking services etc.

What help is available to you as an Oral Health Champion?

NHS Support

Your named NHS Support will train and support you to:

- Implement the **Smile4Life** programme
- Undertake and complete a mapping exercise
- Collect evidence of current oral health improvement activity that supports the 4 teeth
- Develop an action plan to address any gaps in current Oral Health Improvement activity

What further help is available?

Although this workbook will guide you through the development of your action plan, it is recognised that some **further information, resources and activity** ideas may be required on each of the four oral health areas described above. Therefore, within Chapter 3 of this workbook, links to these are available and cover the following:

- **Tooth 1 – Encourage Healthy Eating and Drinking**

Breastfeeding and Weaning	A Healthy Diet
Menu Planning	Snacks and Drinks
Celebrations and Rewards	Allergies

- **Tooth 2 – Encourage Regular Toothbrushing**

Fluoride Toothpaste	Toothbrushing
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- **Tooth 3 - Adopting a Healthier Lifestyle**

Not Smoking	Drinking Sensibly
Being Active	

- **Tooth 4 - Visiting a Dentist Regularly**

Accessing an NHS dentist	Dealing with a Dental Emergency
Fluoride Varnish	

What support is available?

In addition to the help described above, support may also be available from your local dental or oral health improvement team. For further information on what support is available, please contact your NHS Support.



Smile
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Chapter 2

Support Mapping and Signposting

This chapter has been developed to enable settings to establish what support is available in their local communities.

By working through this chapter, an opportunity is given to signpost people accessing the setting to all appropriate services in the locality as well as providing local knowledge relating to the access of these services. For example, local amenities such as dental practices, settings providing stop smoking support, libraries, schools linked to the setting, Children Centre's etc., bus routes, train stations and where free parking is available.

Signposting people to local services can be done by:

- Enabling access to the internet within the setting
- Developing a community map
- Including current access information such as telephone numbers and web addresses as part of relevant displays
- Raising awareness during group sessions
- Inviting external agencies to the setting

Inserting this information on to a community map can also be helpful in visualising complex overlapping sources of data such as levels of deprivation, dental morbidity and dental practice location. Sophisticated software is not needed to undertake community mapping. A simple paper street map of the local area and coloured markers is sufficient.

Example:



Key: Stop Smoking Service	◆	Library	◆
Pharmacist	◆	Primary School	◆
Dental Practice	◆	Secondary School	◆

(This is intended for guidance only and not a reflection of a real location)

Understanding the expressed needs of the children, young people and their families accessing the setting

Getting local knowledge and/or the expressed needs from the children, young people and families can also be advantageous. However, caution has to be applied to ensure that unrealistic expectations are not raised. A member of your local oral health/dental team should support you in the development of appropriate questionnaires for this activity.



**Smile
4 Life**

Chapter 3

**Evidence to Support the
Awards**

This chapter asks you to identify what activities are currently taking place in the setting as well as collect evidence that supports the dissemination of the messages contained within the four teeth shown below:

- **Tooth 1 - Encourage Healthy Eating and Drinking**
 - Keep all foods and drinks containing sugar to mealtimes
 - Snack on fruit and/or vegetables between meals
 - Drink only milk and water between meals
- **Tooth 2 - Encourage Regular Toothbrushing**
 - Brush teeth twice a day including last thing at night
 - Use a smear (under 3 years) or a pea-sized (over 3 years) amount of family fluoride toothpaste
 - Supervise brushing until at least 7 years of age
 - Spit don't rinse after brushing
- **Tooth 3 - Adopting a Healthier Lifestyle**
 - Do not smoke or use any form of tobacco
 - Keep alcohol consumption to recommended levels
- **Tooth 4 - Visiting a Dentist Regularly**
 - Children should visit a dentist from birth
 - Children should be seen regularly at intervals of between 3 and 12 months
 - Young people and adults should be seen at regular intervals as determined by their dentist
 - For help accessing a NHS dentist for routine or emergency care call your local NHS dental helpline number

Working through this chapter will enable identification of any gaps in current provision that you may wish to address as part of the **Smile4Life** programme.

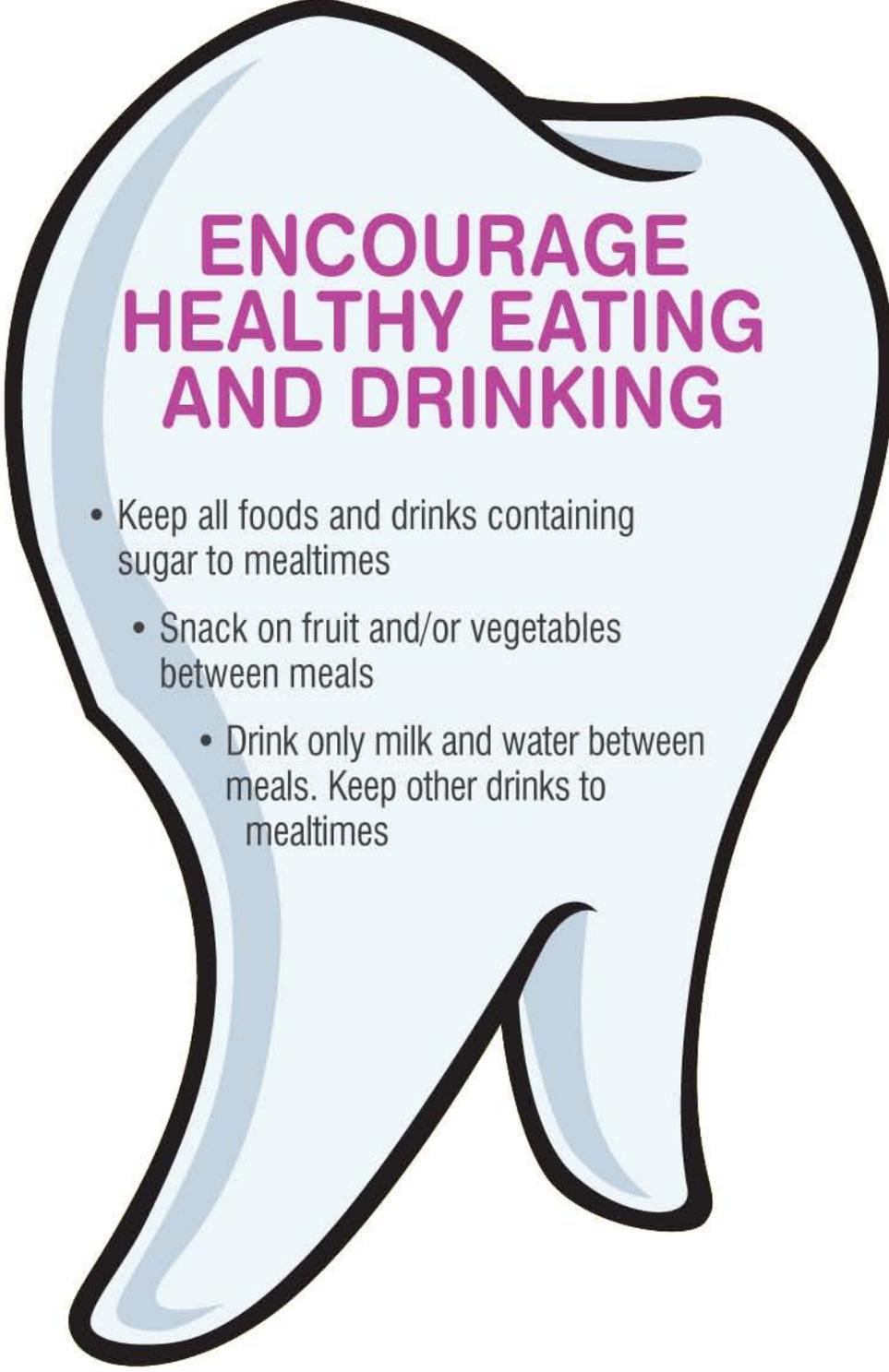
As already stated, it is not essential to undertake the **Smile4Life** Programme in the order set out in the Programme Workbook. Therefore, your setting can choose the tooth you want to concentrate on first. This can be one you have evidence to support the oral health improvement activities already undertaken.

To support Early Years settings, guidance on the type of evidence required to achieve a **Smile4Life Award** is given. The wording of this guidance is open to local interpretation. The evidence you have obtained, therefore, may not match the guidance directly but may still be sufficient to meet the required evidence to achieve a **Smile4Life Award**. Your setting may not be able to collate all the suggested evidence initially but your NHS Support will guide you on what they will consider sufficient evidence based on their knowledge of your setting. The aim of the Programme is to embed as much of the guidance into the daily activity of your setting as possible.

Please note that one piece of evidence may be sufficient to address different messages across the four teeth.

To help you prepare your evidence, links to information, resources and activity ideas are provided at the beginning of each section

Tooth 1:



ENCOURAGE HEALTHY EATING AND DRINKING

- Keep all foods and drinks containing sugar to mealtimes
- Snack on fruit and/or vegetables between meals
- Drink only milk and water between meals. Keep other drinks to mealtimes

Information, Resources and Activity Ideas to support the Tooth 1 Award

When accessing this page on the website, clicking on the links below will take you directly to the document.

[A Healthy Diet Supporting Information](#)

[An example vegetarian menu for 1 – 4 year olds in childcare \(Sample Menus\)](#)

[At a glance – Packed Lunch Information and Guidelines for Parents](#)

[Bottle, Beaker or Cup \(Snacks and Drinks Supporting Information\)](#)

[Breastfeeding and Weaning Supporting Information](#)

[Bump to Birth and Beyond Programme: Oral Health in Pregnant Mothers and Babies](#)

[Bump to Birth and Beyond Programme: Oral Health Session Plan](#)

[Can sweets be used for rewards? \(Celebrations and Rewards Supporting Information\)](#)

[Celebrations and Rewards Supporting Information](#)

[Common Festivals and Celebrations Throughout the Year](#)

[Dealing with Allergies Supporting Information](#)

[Democratic Snack Time \(Classroom Activities and Parent Evening Suggestions\)](#)

[Design a Lunchbox \(Classroom Activities and Parent Evening Suggestions\)](#)

[Design a Meal \(Classroom Activities and Parent Evening Suggestions\)](#)

[Design a Menu \(Classroom Activities and Parent Evening Suggestions\)](#)

[Design a Snack \(Classroom Activities and Parent Evening Suggestions\)](#)

[Developing a Food Policy Supporting Information](#)

[Food Related Customs \(Prompt Sheet\)](#)

[Guidance for food and drink provision in Early Years settings](#)

[Healthy Start Parent Information Sheet](#)

[Hidden Sugars? \(Prompt Sheet\)](#)

[How can water be provided? \(Snacks and Drinks Supporting Information\)](#)

[How Much Sugar? \(Snacks and Drinks Supporting Information\)](#)

[Key Characteristics of Foods within each of the 5 Food Groups \(Prompt Sheets\)](#)

[Learning through Growing Projects in the Early Years Foundation Stage](#)

[Listening to Children \(Menu Planning Supporting Information\)](#)

[Menu Planning Supporting Information](#)

[Ready, Steady, Cook \(Classroom Activities and Parent Evening Suggestions\)](#)

[Sample Letter to Parents](#)

[Sample Menus](#)

[Smile4Life Healthy Eating and Drinking Display](#)

[Snacks and Drinks Supporting Information](#)

[Special Diets Supporting Information](#)

[Sugar on Labels \(Classroom Activities and Parent Evening Suggestions\)](#)

[Tasting and Testing Template](#)

[The Eat Well Plate in the Classroom: Foundation Curriculum Learning Outcomes](#)

[The Pre-School Eat Well Game \(<http://www.foodafactoflife.org.uk/index.aspx> and <http://www.foodafactoflife.org.uk/Sheet.aspx?siteId=17§ionId=93&contentId=349>\)](#)

[Welfare Food Scheme – Nursery Milk Guide](#)

[What are non-milk extrinsic sugars? \(A Healthy Diet Supporting Information\)](#)

[What's Cooking?](#)

[5-a-Day Supporting Information](#)

Evidence to Support the Tooth 1 Award

This section offers **guidance** on the **type** of evidence required to demonstrate implementation of **Tooth 1: Healthy Eating and Drinking**.

The setting can provide evidence that:

A named person responsible for promoting healthy eating and drinking (including breastfeeding and weaning where appropriate) has been identified and is supported by the Oral Health Champion (if a different person) and the settings manager. This person can be identified by staff and parents

Suggested evidence:

- Inclusion on a notice board
- A parent/staff newsletter
- Inclusion on the settings website
- Inclusion in the settings induction pack
- A list of responsibilities is in place specific to this role
- The manager supports attendance at appropriate training which can be evidenced by, for example:
 - Description of the course
 - Certificate of attendance/date of training etc
 - An outcome of a Personal Development Appraisal

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The named person provides progress reports and relevant Smile4Life information to staff and the NHS Support

Suggested evidence:

- **Smile4Life** Healthy Eating and Drinking is a regular agenda item at staff meetings which can be evidenced by minutes, reports etc.
- Information received via any relevant training is disseminated to staff and can be evidenced by minutes, reports etc.
- Awareness raising in relation to relevant media campaigns can be evidenced within the setting by, for example, staff meeting minutes, posters etc.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

There is an up to date whole setting healthy eating policy being implemented that includes drinks, snacks and celebrations which has been developed in consultation with staff, parents/carers and children

Suggested evidence:

- Whole setting healthy eating policy can be seen to be implemented by, for example, observation by the NHS Support of:
 - Snack/meal menus being displayed and regularly updated as appropriate
 - The eating environment being welcoming
 - The setting promoting independence, offering choice and encouraging positive social interaction between children and adults
- Evidence of consultation with parents and children can be provided such as parental questionnaires, child tasting session feedback sheets; suggestion box, newsletters, democratic snack-time (see supporting information) etc. and the information received has been used to inform reviews of the policy
- Evidence of the promotion of the whole setting healthy eating policy with parents/carers can be provided such as within an induction pack, parent evenings etc.
- The policy contains additional actions which can be monitored against, for example:
 - The number of times consistent messages/information re: healthy eating is given to parents/carers over a given period
 - The number of times questionnaires are given out to parents/carers re: healthy eating and drinking in the home

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting have developed a map/signposting tool highlighting where current relevant support is available, for example an infant feeding information service, links to local food forums, growing projects and community gardens

Suggested evidence:

- NHS infant feeding co-ordinator (or similar) can be readily identified by members or staff and parents
- Demonstration of signposting to:
 - Specialist services in relation to infant feeding
 - Local food forums where available
 - Growing projects and community gardens where available
- Demonstration of how the setting actively supports parents in accessing:
 - Specialist services in relation to infant feeding
 - Local food forums where available
 - Growing projects and community gardens where available

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The Smile4Life resources are being displayed and integrated into health and lifestyle campaigns throughout the year, in the setting and other settings linked to the setting

Suggested evidence:

- Development of a staff **Smile4Life** information/resources sharing file
- An annual display board topic plan
- Information on how to access the website is included in parent/staff newsletter
- **Smile4Life** literature provided in the induction pack/session
- Observation by the NHS Support on **Smile4Life** resources being used continuously/thematically throughout the year
- Observation by the NHS Support of how consistent messages and activities linking healthy eating and drinking to oral health are disseminated/implemented throughout the setting on a regular basis

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Smile4Life/Change4Life is embedded into all relevant activities

Suggested evidence:

- Development of a **Smile4Life** /Change4Life annual activity plan which includes, for example, guess the veg display, sugar display, parent information sessions etc.
- Observation by the NHS Support of activities being undertaken throughout the year that:
 - Are underpinned by **Smile4Life**/Change4Life evidence-based messages
 - Will positively impact/improve oral health and, where possible, support a change in behaviour

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

If the setting cares for babies, it supports and promotes the uptake and continuation of breastfeeding

Suggested evidence:

- Provision of appropriate facilities for breastfeeding women
- Provision of an environment and resources that promote and support breastfeeding
- An up to date breastfeeding and weaning policy has been developed using best practice guidance and can be seen to be implemented by, for example, observation by the NHS Support of:
 - An evidence-based resource list that promotes breastfeeding being disseminated to all pregnant women accessing the setting
 - An in-house breastfeeding support group/peer support group or signposts to the nearest group
 - An environment that is breastfeeding baby friendly
- Delivery of 'Bump to Birth and Beyond' or similar programme
- Collation of breastfeeding statistics i.e. the number/percentage of mothers initiating breastfeeding

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Information on appropriate bottle feeding is given to parents on an individual basis if they choose to bottle feed

Suggested evidence:

- Dissemination of appropriate information to parents choosing or not able to breastfeed especially in relation to oral health

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

All children and families are given the opportunity to:

- **Be involved in the planning and delivery of healthy eating, drinking and oral health activities especially in the context of a balanced diet**
- **Learn about different types of food in the context of a balanced diet and where it comes from**

Suggested evidence:

- The setting delivers regular weaning sessions using external relevant partners as appropriate or signposts parents to weaning sessions undertaken by external relevant partners
- Cooking sessions/practical food skills training (underpinned by oral health guidance) is delivered at regular intervals or parents are signposted to local cooking sessions/groups/training (underpinned by oral health guidance) where available
- Documentary evidence of the opportunities that will be offered to children and their families to learn about different types of food in the context of a balanced diet, and where it comes from
- Evidence of consultation with parents can be provided e.g. parental questionnaires, parent forums etc.
- Evidence of consultation with children, for example, by using the **Smile4Life** Democratic Snack Time guidance on the **Smile4Life** website
- Information relating to a balanced diet is displayed in a prominent position with sufficient relevant **Smile4Life** “take home” literature available
- An evidence-based resource list that promotes healthy eating/balanced diet
- Can demonstrate how the “Eat Well Plate” is used across the curriculum
- Can demonstrate how 5-A-Day is promoted within the setting
- Promotion and recording of the number of recipe cards (with fruit or vegetables as ingredients) that are disseminated to people accessing the setting
- Documentary evidence of how pretend food and/or examples of real food and food packaging is used in displays
- Parents are signposted to community gardens/allotments (where available)
- Documentary evidence of the opportunities that are being taken to show food/snacks in a natural state
- Use of the **Smile4Life** Celebration Food and Drink Prompt Sheet
- Can demonstrate how cultural aspects of food are included in the curriculum and linked with theme days
- A sugar display that highlights the sugar content of popular foods and drinks; foods and drinks considered to be “healthy”
- Food growing activities

- Where applicable can demonstrate how food grown in the garden is cooked for theme days/birthdays
- Visit to local shop(s) to purchase food items and learn about the background to food production
- The HENRY Programme is being implemented where available
- Demonstration of how birthdays are celebrated without detriment to oral health
- Demonstration of how children are rewarded without detriment to oral health
- Interactive sessions are delivered to support healthy food choices
- An activity plan is in place for developing cooking, tasting and growing skills and enjoying food
- Can demonstrate how parents are encouraged to get involved in cooking and growing activities e.g. stir-fry day, British food fortnight, harvest festival etc.
- Can demonstrate how food is used to celebrate and bring people together

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting provides a welcoming eating environment and routines that promote independence, offer choice and encourage positive social interaction between children and adults

Suggested evidence:

- The setting encourages adults to act as role models e.g. staff sitting with children when eating snacks/meals and eating/drinking healthily within the setting
- Can demonstrate how unhealthy eating/drinking practice amongst staff is actively discouraged in front of children
- Seating areas can be seen to encourage socialising during opportunistic visits to the setting at snack/meal times
- Can demonstrate how the setting supports the development of good eating habits
- Can demonstrate that children eating packed lunches can sit with those having setting provided meals
- Evidence of involving children in setting tables, preparing food, serving food, pouring drinks and clearing away such as photographs, children describing the experience etc.
- Evidence of choice being offered at snack and meal times i.e. displayed menu
- Evidence to support water provision throughout the day
- The development and implementation of daily routine plans in consultation with staff and parents
- Demonstration of how the setting deals with children's variable eating patterns i.e. 'fussy eaters'/food refusal
- Uneaten food is returned in the lunchbox so that parents know what has not been eaten
- Suitable provision is made to enable children to eat provided meals and participate in lunchtime activities
- A policy is in place for children with food allergies and all staff are made aware of those children with food allergies

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting ensures healthier food and drink options are available and promoted at snack and mealtimes including. the provision of sugar-free snacks and milk and water only between meals

Suggested evidence:

- Healthy snack/meal menus are displayed in a prominent position
- All menus can be shown to be aligned to *Guidance for food and drink provision in Early Years settings* and the setting can show how this is monitored and who is responsible for doing it
- Can demonstrate how children are encouraged to make balanced eating choices and how this is monitored
- External agencies provide snacks and/or drinks for their groups that are in line with the whole setting approach food policy
- Evidence of advice given to parents/carers about what snacks/drinks are allowed to be brought in where applicable
- Only sugar-free snacks are provided
- A choice of fresh fruit and/or vegetables is provided at snack and meal times
- Demonstration of how 5-a-Day contributes to snack provision
- Demonstration of how each curriculum area contributes to learning about food
- Only milk and/or water is provided between meals
- Water is provided throughout the day and encouraged
- Drinks are provided in free-flow (not valved) or open cups
- Clear water bottles are used for outside play/activities
- Procedures are in place for regular review of menus in consultation with staff, parents and children
- The Free Nursery Milk Scheme has been accessed
- Where applicable, the setting can demonstrate how balanced eating lunchboxes are encouraged

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting provides practical opportunities for all children and families to prepare, cook and eat a variety of healthy foods

Suggested evidence:

- Demonstration of food preparation/cooking activities with children and their families
- Demonstration that food prepared as part of these activities is eaten at an appropriate time, i.e. mealtimes or meal making session, unless the recipes/ingredients are sugar-free
- Documentary evidence of the opportunities children and their families are given to prepare, cook and eat a variety of healthy foods

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting provides opportunities for all children to discuss their food preferences

Suggested evidence:

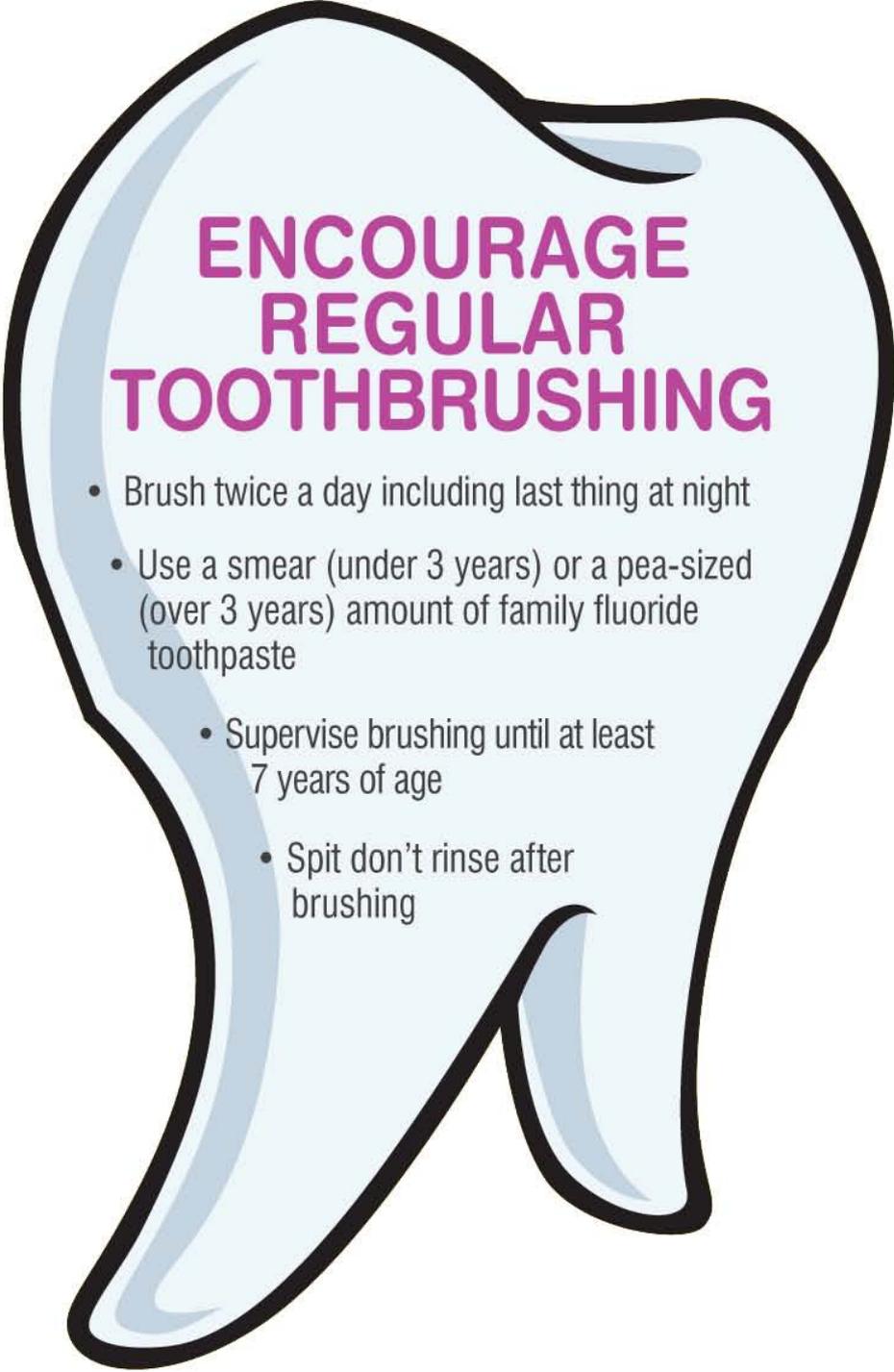
- Can demonstrate how children are involved in taster sessions and menu development, for example, through the use of the Smile4Life Tasting Session Templates
- Documentary evidence of the use of the Smile4Life Democratic Snack Time guidance
- Documentary evidence of how staff have discussed children's likes/dislikes during snack and meal times

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Tooth 2:



ENCOURAGE REGULAR TOOTHBRUSHING

- Brush twice a day including last thing at night
- Use a smear (under 3 years) or a pea-sized (over 3 years) amount of family fluoride toothpaste
 - Supervise brushing until at least 7 years of age
 - Spit don't rinse after brushing

Information, Resources and Activity Ideas to support the Tooth 2 Award

When accessing this page on the website, clicking on the links below will take you directly to the document.

[How carers can help increase exposure to fluoride in children \(Increasing Exposure to Fluoride Supporting Information\)](#)

[Oral Health in Childhood Supporting Information](#)

[Sample Toothbrushing Policy](#)

[Setting Based Toothbrushing Best Practice Guidance](#)

[Setting Based Toothbrushing \(Prompt Sheet\)](#)

[Smile4Life Toothbrushing Display](#)

[Too much of a rush to brush? Poster](#)

[Toothpaste – Parent Information \(Prompt Sheet\)](#)

[Top Tips for Brushing \(Bump to Birth and Beyond: Oral Health in Pregnant Mothers and Babies Leaflet\)](#)

Evidence to Support the Tooth 2 Award

This section offers **guidance** on the **type** of evidence required to demonstrate implementation of **Tooth 2: Regular Toothbrushing**

It is recognised that not every setting will be doing a setting-based toothbrushing scheme. However, any toothbrushing activity undertaken in the setting must be carried out in accordance with the **Smile4Life** Setting-Based Toothbrushing Guidance and/or recognised locally accredited training.

Cross-infection control training is MANDATORY.

The setting can provide evidence that:

A named person/team responsible for promoting regular toothbrushing, overseeing all aspects of toothbrushing in the setting has been identified and is supported by the Oral Health Champion (if a different person) and the settings manager. This person can be identified by other members of staff and parents

Suggested evidence:

- Inclusion on a notice board
- A parent/staff newsletter
- Inclusion on the settings website
- Inclusion in the settings induction pack
- A list of responsibilities is in place specific to this role
- The manager supports attendance at appropriate training which can be evidenced e.g.:
 - Description of the course
 - Certificate of attendance/date of training etc
 - An outcome of a Personal Development Appraisal

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The training needs of the workforce with regards to toothbrushing and/or implementation of setting-based toothbrushing schemes are identified

Suggested evidence:

- Staff access training that is delivered, or is recognised as appropriate, by the NHS Support and can be evidenced e.g.:
 - Description of the course
 - Certificate of attendance/date of training etc
- Number of staff attending appropriate training is recorded

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The named person provides progress reports and relevant toothbrushing information to staff and the NHS Support

Suggested evidence:

- **Smile4Life** Toothbrushing is a regular agenda item at staff meetings which can be evidenced by minutes, reports etc.
- Information received via any relevant training is disseminated to staff and can be evidenced by minutes, reports etc.
- Awareness raising in relation to relevant media campaigns can be evidenced within the setting e.g. staff meeting minutes, posters etc.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Where applicable, an up to date toothbrushing protocol has been developed using evidence-based/best practice guidance and is being implemented

Suggested evidence:

- The setting maintains standards set out in the best practice guidance
- Best practice guidance is being implemented e.g. observation by the NHS Support
- Evidence of consultation with parents and children can be provided such as parental questionnaires, suggestion box, newsletters etc. and the information received has been used to inform reviews of the protocol
- Evidence of the promotion of toothbrushing with parents/carers can be provided such as within an induction pack, parent evenings etc.
- The policy contains additional actions which can be monitored against, e.g.:
 - The number of times consistent messages/information re: toothbrushing is given to parents/carers over a given period
 - The number of times questionnaires/toothbrush and paste packs/toothbrushing charts are given out to parents/carers to encourage toothbrushing in the home

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting offers suitable facilities for parents to brush their childrens' teeth

Suggested evidence:

- The setting provides appropriate facilities, such as designated toothbrushing sinks, to enable parents to brush their childrens' teeth in the setting
 - The setting only uses, and adheres strictly to the **Smile4Life** Setting Based Toothbrushing Guidance
 - The 'Infection Prevention and Control' guidance within the **Smile4Life** Setting Based Toothbrushing Guidance is made available to staff, parents and carers and is strictly adhered to by all staff
 - Can provide evidence of how the setting promotes the 'Too Rushed to Brush' scheme e.g. via displays, posters, parent communication etc.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Consistent messages and activities linked to increasing exposure to fluoride are disseminated/implemented throughout the setting

Suggested evidence:

- Consistent evidence based information with regards to toothbrushing and increasing exposure to fluoride is provided to parents, carers and children e.g. via notice boards, displays, newsletters, parent forums
- Only resources and guidance available on the **Smile4Life** Website are used
- Can provide evidence, such as questionnaires given out to parents and carers, of how toothbrushing at home is encouraged
- Where applicable, promotion of a setting-based toothbrushing scheme can be seen in the setting or in induction/toothbrushing packs sent home

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting gives all children and families the opportunity to learn about effective toothbrushing and, where applicable, be involved in the delivery of toothbrushing activities

Suggested evidence:

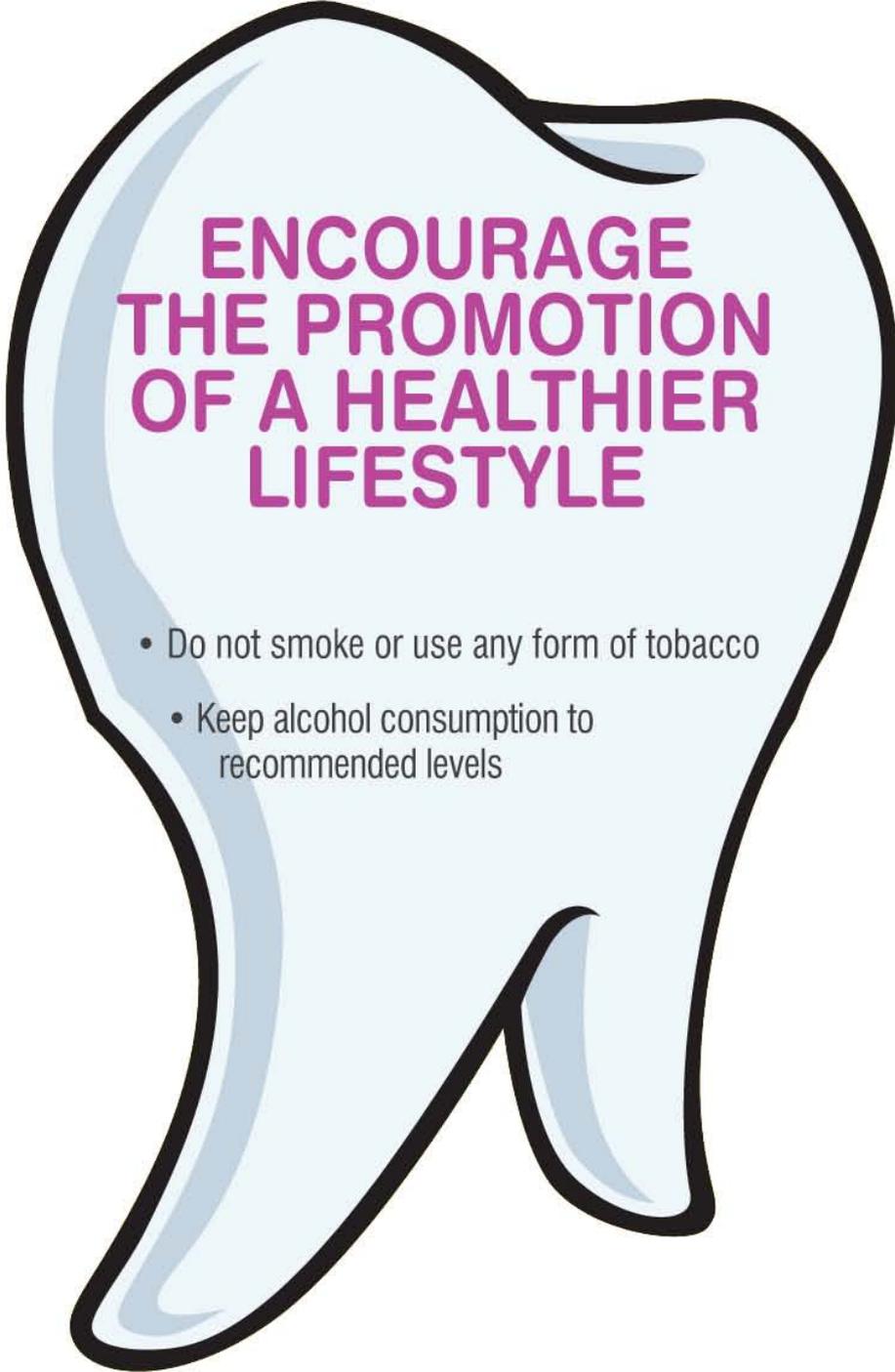
- Development and implementation of a plan that ensures all children and their families are provided with regular opportunities to learn about effective toothbrushing
- Consultation with parents/carers and children such as providing parent forums, questionnaires etc.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Tooth 3:



ENCOURAGE THE PROMOTION OF A HEALTHIER LIFESTYLE

- Do not smoke or use any form of tobacco
- Keep alcohol consumption to recommended levels

Information, Resources and Activity Ideas to support the Tooth 3 Award

When accessing this page on the website, clicking on the links below will take you directly to the document.

[Detecting Mouth Cancer – How to Reduce Your Risks Leaflet](#)

[Mouth Cancer Display](#)

[NHS Level 2 Stop Smoking Training Information](#)

[Oral Cancer Supporting Information](#)

[Paan, Bidi and Shisha](#)

[Smoke Free Homes Parent Information](#)

[Smoking Facts at a Glance](#)

[Smoking and Disease Facts at a Glance](#)

[Stop Smoking Brief Intervention Supporting Information](#)

[Stop Smoking Tools](#)

[What's in a cigarette? Prompt Sheet](#)

[Alcohol Support](#)

[Binge Drinking: The Effects](#)

[Sensible Drinking Tools](#)

[Smile4Life Sensible Drinking Display](#)

[Social Drinking: The Hidden Risks](#)

[The Effects of Alcohol](#)

[Units of Alcohol – Prompt Sheet](#)

Evidence to Support the Tooth 3 Award

This section offers **guidance** on the **type** of evidence required to demonstrate implementation of **Tooth 3: Healthier Lifestyles**

The setting can provide evidence that:

A named person/team responsible for overseeing all aspects of smoking cessation, sensible drinking and drug misuse within the setting has been identified and is supported by the Oral Health Champion (if a different person) and the settings manager. This person can be identified by staff and parents

Suggested evidence:

- Inclusion on a notice board
- A parent/staff newsletter
- Inclusion on the settings website
- Inclusion in the settings induction pack
- A list of responsibilities is in place specific to this role
- The manager supports attendance at appropriate training which can be evidenced by, for example:
 - Description of the course
 - Certificate of attendance/date of training etc
 - An outcome of a Personal Development Appraisal

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The training needs of the workforce in:

- **Brief intervention stop smoking support**
- **Intermediate level stop smoking support have been identified and addressed**

Suggested evidence:

- Appropriate training has been accessed and can be evidenced by, for example:
 - Description of the course
 - Certificate of attendance/date of training etc
- Number of staff attending brief intervention training is recorded
- Number of staff attending intermediate/Level 2 training is recorded
- Staff trained to Intermediate/Level 2 provide in-house smoking cessation support
- Number of people who have quit with support from the setting is recorded

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The named person provides progress reports on the use of Healthier Lifestyle information

Suggested evidence:

- Healthier Lifestyles is a standing agenda item at staff meetings which can be evidenced by minutes, reports etc.
- Information received via any relevant training is disseminated to staff and can be evidenced by minutes, reports etc.
- Awareness raising in relation to relevant media campaigns can be evidenced within the setting e.g. staff meeting minutes, posters etc.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting have developed a map/signposting tool highlighting where current relevant support is available, for example Stop Smoking Services and Drug and Alcohol Services etc.

Suggested evidence:

- Named person has identified relevant personnel within the Stop Smoking and Drug and Alcohol services and obtained contact details and disseminated details to staff
- Can demonstrate how they actively signpost or refer parents to access specialist services that can give professional advice on smoking cessation, sensible drinking and drug misuse
- A monitoring tool is used to establish how many people are signposted or referred to smoking cessation services and alcohol and drug misuse support services.

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The Smile4Life website and resources are being used and integrated into healthy lifestyle campaigns throughout the year, in the setting and associated settings

Suggested evidence:

- Development of a staff **Smile4Life** information/resources sharing file
- Development of a staff training file
- An annual display board topic plan
- Information on how to access the website is included in parent/staff newsletter
- **Smile4Life** literature provided in the induction pack/session
- Observation by the NHS Support on **Smile4Life** resources being used continuously/thematically throughout the year
- Observation by the NHS Support of how consistent messages and activities linking smoking, alcohol and drug misuse to oral health are disseminated/implemented throughout the setting on a regular basis

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Consistent messages and activities linking tobacco, alcohol and drug misuse to oral/general health are disseminated/implemented throughout the setting

Suggested evidence:

- Use and promotion of national smoking cessation, sensible drinking and alcohol misuse campaigns
- Participation in the Smoke Free Homes Programme or similar
- Demonstration of how the national/local campaigns are embedded into appropriate activities
- Provision of regular, consistent information with regards to tobacco, alcohol and drug misuse and oral/general health e.g. via notice boards, displays, newsletters, parent forums
- Demonstration of how information regarding prevention/cessation of tobacco use is disseminated to parents/carers including signposting parents to Stop Smoking Services
- Demonstration of signposting parents to appropriate alcohol and drug misuse services
- Facilities that encourage smoking are removed
- Mouth cancer awareness raising activities are undertaken throughout the year using evidence-based/ **Smile4Life** displays and information
- Use of socio-demographic data to inform activities in relation to smoking cessation, sensible drinking and drug misuse
- Case studies obtained from parents on how 7 Steps or similar campaigns are being implemented in the home
- Support groups are set up and hosted by the setting
- Demonstration of how the setting actively works with smokers ready to quit
- An agreed minimal distance surrounding the setting has been established as a non-smoking area for both staff and people accessing the setting
- Sensible drinking recommendations for parents/carers are promoted
- Provision of free sensible drinking aids e.g. glasses that measure units of alcohol
- Evidence of actively working with alcohol misuse parents

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Tooth 4:

VISIT A DENTIST REGULARLY

- Children should visit a dentist from birth
- Children should be seen regularly at intervals of between 3 and 12 months
 - Ask your dentist about fluoride varnish
 - Young people and adults should be seen at regular intervals as determined by their dentist
- For help in accessing an NHS dentist for routine or emergency care call your local PCT dental number

Information, Resources and Activity Ideas to support the Tooth 4 Award

When accessing this page on the website, clicking on the links below will take you directly to the document.

[Dealing with Dental Trauma Prompt Sheet](#)

[Fluoride Varnish Supporting Information](#)

[Visiting the Dentist Display](#)

[Visiting the Dentist Supporting Information](#)

[What is the cost of NHS dentistry?](#)

Evidence to Support the Tooth 4 Award

This section offers **guidance** on the **type** of evidence required to demonstrate implementation of **Tooth 4: Visiting A Dentist Regularly**

The setting can provide evidence that:

A named person responsible for promoting access to NHS dentistry has been identified and is supported by the Oral Health Champion (if a different person) and the settings manager. This person can be identified by staff and parents

Suggested evidence:

- Inclusion on a notice board
- A parent/staff newsletter
- Inclusion on the settings website
- Inclusion in the settings induction pack
- A list of responsibilities is in place specific to this role
- The manager supports attendance at appropriate training which can be evidenced e.g.:
 - Description of the course
 - Certificate of attendance/date of training etc
 - An outcome of a Personal Development Appraisal

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

A clear pathway is in place for dealing with dental trauma that includes a relevant dental helpline number and/or links with a local dental team for clinical support

Suggested evidence:

- All staff are aware of the dental trauma care pathway and how and when it needs to be implemented
- The resource poster 'Dealing with Dental Trauma' is utilised from the **Smile4Life** website and is displayed in appropriate places
- The named person identifies the relevant help line number and inserts onto the poster
- Staff, parents and carers are made aware of the pathway and what to do in the event of a dental trauma
- Details of each child's dentist is obtained
- The named person disseminates information regarding dental trauma via meetings, newsletters regarding the information on dental trauma
- Risk assessment with regards dental trauma is undertaken for each physical activity

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting have developed a map/signposting tool highlighting where local NHS dental services can be accessed

Suggested evidence:

- Information on how to access a NHS dentist is displayed and promoted to staff, parents and carers
- Demonstration of how the setting supports parents in accessing NHS dentistry
- **Smile4Life** literature promoting visiting a NHS dentist is displayed in a prominent position in the setting
- Demonstration of how the setting actively supports children and families not accessing dental care regularly

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting promotes fluoride varnish and encourages parents to ask their dentist about application for their children

Suggested evidence:

- **Smile4Life** literature promoting fluoride varnish is displayed in a prominent position in the setting
- The named person is advised by the NHS Support of what fluoride varnish is and encourages parents and carers to ask for fluoride varnish application when visiting the dentist, e.g. via leaflets, newsletters, notice boards, meetings and through discussions with parents
- Monitoring parents who have requested fluoride varnish and/or had fluoride varnish applied
- The setting actively supports children of irregular dental care attenders to access NHS dentistry for fluoride varnish application

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Consistent messages and activities with regards to accessing NHS dentistry are disseminated/implemented throughout the setting

Suggested evidence:

- The NHS Support can observe regular consistent messages/information and activities being provided to parents and staff regarding accessing NHS dentistry
- Information is provided via notice boards, newsletters, parent forums
- Positive role play with regards visiting the dentist is undertaken in the setting
- Demonstration of how the setting encourages adults as role models e.g. staff talking positively about visiting a dentist with children

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting ensures that all parents have access to information relating to NHS dentistry such as:

- **Cost**
- **What treatment can be expected from a NHS dentist**
- **Who is exempt from NHS dentistry charges**
- **The need to access NHS dentistry regularly**
- **The appropriate length of time between recall**

Suggested evidence:

- **Smile4Life**/Department of Health/NHS Choices literature relating to NHS dentistry such as cost; what treatment can be expected from a NHS dentist; who is exempt from NHS dentistry charges; the need to access a dentist regularly as advised is:
 - Displayed in a prominent position within the setting
 - Is readily available in hard copies for dissemination to parents and staff

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

The setting provides opportunities for children to role play visiting a dental practice

Suggested evidence:

- Positive role play with regards visiting the dentist is undertaken regularly in the setting
- Visits to the local dental practice are arranged and undertaken

Actual Evidence:

Signed by: NHS Support

Signed by: Oral Health Champion

Action Plan – Issues that will be considered in the future

The setting recognises that it is currently unable to deliver change in all areas that it wishes to develop. The following therefore identifies actions for the future:

In the next 2 years we will:

-
-
-

In the next 5 years we will:

-
-
-

Ideas include:

- Install additional mains fed water coolers
 - Participate in a fluoride varnish application scheme
 - Hosting a Stop Smoking Service within the setting
 - Accessing First Aid for Teeth Training for all staff
-

Signed:

Date:



Smile
4 Life

Chapter 4

Programme Management

Recognition and celebration of achievement

Through the implementation of this **Smile4Life** Programme, Early Years Foundation Stage settings will build on the activities they currently undertake that improve both oral and general health.

Settings need to be recognised for the good work and level of care they provide in addressing health concerns such as high levels of tooth decay and childhood obesity.

The **Smile4Life** programme has therefore incorporated within its monitoring system a method of extracting examples of good practice so that they can be celebrated and shared via community and local press.

These examples of good practice will also be used to further develop the **Smile4Life** programme by incorporating activities and resources that have been developed by settings for settings.

Implementation Review

On successful completion of the **Smile4Life** award, settings will need to demonstrate continued or enhanced **Smile4Life** activities. Continued support from the NHS Support will be available to help settings address any barriers they encounter throughout the following year in achieving their activities.

Settings will be contacted at least every six months by their NHS Support to review progress and offer further required support. However, settings can contact their NHS Support if they require support before this review.

Acknowledgements

The **Smile4Life** Programme has been created through the combined efforts and perseverance of a number of individuals, organisations and Early Years Foundation Stage settings that share a desire to ensure that children and young people can experience improved oral and general health and can lay the solid foundations required for oral and general health throughout life.

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