

# A whole school approach to improving oral health



## Oral health: The issue at a local and national level

A healthy mouth, teeth and gums, or oral health, is an important part of good overall health, wellbeing, and quality of life. The World Health Organisation [WHO] defines oral health as *“a state of being free from chronic mouth and facial pain, oral and throat cancer, oral infection and sores, periodontal (gum) disease, tooth decay, tooth loss, and other diseases and disorders that limit an individual’s capacity in biting, chewing, smiling, speaking, and psychosocial well-being.”*

It is well recognised that oral health is an important part of general health and wellbeing. Whilst there have been welcome improvements in the oral health of children in England, significant inequalities remain. Tooth decay is still the most common oral disease affecting children and young people (CYP), yet it is largely preventable.

While children’s oral health has seen an improvement over the past 20 years significant inequalities remain.

The National Dental Epidemiology Programme (NDEP) for England: oral health survey of 5-year-old children 2024<sup>1</sup> found that the national prevalence of children with enamel and/or dentinal decay was 26.9%. Regionally, this ranged from 23.3% in the East of England to 36.8% in the North West.

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<sup>1</sup> [Oral health survey of 5-year-old schoolchildren 2024 - GOV.UK](#)

Overall, 22.4% of 5-year-old schoolchildren in England in this survey had experienced dentinal decay in their primary dentition. This was lower than the finding of the previous survey of 5-year-old schoolchildren in 2022, where 23.7% of the surveyed children had experience of dentinal decay. Among the 22.4% of children with experience of dentinal decay, each child had on average 3.5 teeth with decay experience (at age 5 years, children normally have twenty primary teeth).

There was wide variation in both prevalence and severity of experience of dentinal decay by geographical area. At a regional level, 5-year-old schoolchildren living in the North West were most likely to have experienced dentinal decay (28.7%).

In Tameside 27.6% of 5-year-old children are affected by tooth decay, with an average of 3.8 teeth affected.

Children living in the most deprived areas of the country were more than twice as likely to have experienced dentinal decay (32.2%) as those living in the least deprived areas (13.6%). There were also disparities in the percentage of those who had experienced dentinal decay by ethnic group, which was significantly higher in the Other ethnic group (45.4%) and the Asian or Asian British ethnic group (37.7%).

Poor oral health starts in early infancy. The National Dental Epidemiology Programme for England: oral health survey of 3-year-old children 2020<sup>2</sup> found that 10.7% already had experience of dental decay despite having had their back teeth for just 1 or 2 years. Among the 10.7% of children with experience of dental decay, each had on average three affected teeth. Children living in the most deprived areas of the country were almost three times as likely to have experience of dental decay (16.6%) as those living in the least deprived areas (5.9%). There was also variation in prevalence of experience of dental decay by ethnic group and this was significantly higher in the Other ethnic group (20.9%) and the Asian and Asian British ethnic group (18.4%) than other groups.

In Tameside 17% of Tameside's 3-year-old children have experienced tooth decay with 2.2 teeth affected again this is higher than the national average of 10.7% and the Northwest of 13.7%.

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<sup>2</sup> [Oral health survey of 3-year-old children 2020 - GOV.UK](https://www.gov.uk/government/statistics/oral-health-survey-of-3-year-old-children-2020)

Tooth decay remains the most common reason for hospital admissions in children aged between 5 and 9 years<sup>3</sup>. In the fiscal year ending 2024 there were 49,112 episodes of tooth extractions in NHS hospitals in England for 0 to 19 year olds.

There were 30,587 episodes of tooth extractions with a primary diagnosis of tooth decay for 0 to 19-year-olds. This represents 62% of all tooth extractions for this age group.

The decay-related tooth extraction episode rate for children and young people living in the most deprived communities was 3.5 times that of those living in the most affluent communities. In Tameside 245 children underwent a procedure to remove teeth under general anaesthetic, 165 of these were where caries was the primary diagnosis and 60 were aged 5-9.

Dental treatment under general anaesthesia (GA), presents a small but real risk of life-threatening complications for children. Extraction of teeth with general anaesthetic is often a child's first introduction to dental care and can lead to fear and anxiety with lifetime consequences. Tooth extractions under GA are not only potentially avoidable for most children but also costly.

The costs to the NHS of hospital admissions for tooth extractions in children aged 0 to 19 years have been estimated based on the latest NHS national cost collection data. The costs were £74.8 million for all tooth extractions and £45.8 million for decay-related tooth extractions in the fiscal year ending 2024. This is an increase compared with the costs in the previous fiscal year ending 2023 and is due to an increase in both non-carious tooth extractions and NHS unit costs for all tooth extraction procedures (there was a 17.5%-unit cost increase for the most common tooth extraction procedure).

In England oral diseases place significant costs on society and the NHS for what are preventable diseases. In 2023-24<sup>4</sup> 3.1 billion was spent on primary care NHS dentistry.

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<sup>3</sup> [Hospital tooth extractions in 0- to 19-year-olds 2024 - GOV.UK](#)

<sup>4</sup> [Investigation into the NHS dental recovery plan](#)

## **The Impact of poor oral health**

Poor oral health can have a negative impact throughout life. It can affect children's and young people's ability to sleep, eat, speak, play, and socialise with other children. Other impacts include pain, infections, poor diet, and impaired nutrition and growth.

Poor oral health also has wider impacts at school and for families. Disturbed sleep due to toothache often leads to late attendance at school and missed classroom learning. It also leads to parents having to take time off work to look after a child or to take for dental appointments and treatment. Oral health is an integral part of overall health. When children are not healthy, this affects their ability to learn, thrive and develop. Good oral health can contribute to school readiness. To benefit fully from education, children need to enter school ready to learn, to be healthy and prepared emotionally, behaviourally, and socially. School readiness ensures that all children can participate fully in all school activities to be successful at school. Oral health is therefore an important aspect of overall health status and critical to children's school readiness.

Levels of overweight and obesity among school children in Tameside remains high. The Government's National Child Measurement Programme (NCMP) for England, 2023/24 school year<sup>5</sup>, found that 23% of reception children aged 4-5 years were overweight and obese. In year 6 children aged 10-11 this increased to 37.9%. Tameside is worse than the England average of 22.1% in reception children and 35.8% for pupils in year 6.

Trends in childhood obesity continue into adolescence and adult life impacting on our long-term health and healthy life expectancy. Obesity and dental decay are associated with the frequent consumption of high-sugar foods and drinks. Children and young people consume up to three times more sugar than the recommended levels, placing them at greater risk of developing obesity and dental decay, as well as other chronic conditions such as Type 2 diabetes. Children who are underweight or overweight and very overweight are more likely to experience dental decay than those of a healthy weight. There is an association between children's weight and both the prevalence and severity of dental decay. In 2015, Public Health England

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<sup>5</sup> [National Child Measurement Programme, England, 2023/24 School Year - GOV.UK](https://www.gov.uk/government/statistics/national-child-measurement-programme-2023-24)

(PHE) published an evidence summary on childhood obesity and dental decay<sup>6</sup> based on a review of the literature and local authority data.

In 2020 the British Society of Paediatric Dentistry published a position statement - Obesity and Dental Decay in Children<sup>7</sup> It supports the government paper Advancing our Health: Prevention in the 2020s and the Childhood Obesity Plan. It called for further education and national public health policies to support the obesity agenda. It also endorsed a co-ordinated approach to clearer food labelling and further sugar reduction amongst food and drink products frequently consumed by children. The promotion of national campaigns which aim to educate and support families in reducing sugar intake in their children (Kind to Teeth & Better Health: Healthier Families)

## **A Whole School Approach to Better Oral Health**

Schools have a significant role in defining habits and helping their pupils make healthier choices. We must ensure that schools are equipping children with the knowledge they need to lead healthy lifestyles and creating environments which encourage their pupils to eat healthily and be physically active.

We want our schools in Tameside to create a culture and ethos around healthy eating, which promotes good oral health and support pupils. The promotion of good health including oral health is a requirement of the Early Years Foundation Stage (EYFS) Statutory Framework (2021)<sup>8</sup>

Promote a 'whole school' approach to oral health by:

- Ensuring, wherever possible, that all school policies and procedures promote and protect oral health (for example, policies on diet and nutrition, health and safety and anti-bullying should include oral health).

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<sup>6</sup> [Caries obesity Evidence SummaryOCT2015FINAL.pdf](#)

<sup>7</sup> [Obesity and Dental Health Final PS Final Dec 2020.pdf](#)

<sup>8</sup> [Early years foundation stage \(EYFS\) statutory framework - GOV.UK](#)

- Making plain drinking water available for free and encouraging children to bring refillable water bottles to school<sup>9</sup>.
- Providing a choice of sugar-free food, drinks (water and milk) and snacks (for example, fresh fruit). These should also be provided in any vending machines.
- Displaying and promoting evidence-based, age-appropriate oral health information for parents, carers, and children. This should be relevant to local needs and include details on the use of fluoride toothpaste and how to access local NHS dental services.
- Promoting and displaying information to support National Oral Health Campaigns. These may include National Smile Month sponsored by the Oral Health Foundation, Better Health Top Tips for Teeth and Food Active GULP (Give Up Loving Pop) and Kind to Teeth Campaigns which aims to raise awareness of the risks associated with the consumption of sugary drinks in young children and promote milk and water.
- Ensuring opportunities are found in the curriculum to teach the importance of maintaining good oral health and highlighting how it links with appearance and self-esteem. This should use age-appropriate information, adapted to meet local needs, and based on the 'advice for patients' in Delivering Better Oral Health (2024).
- Identify school staff who could be trained to become oral health champions whose role it is to promote and protect pupil's oral health.
- Provide opportunities for staff to talk with parents or carers about, and involve them in, improving their children's oral health. For example, opportunities might arise at parent-teacher evenings, open days or by encouraging parents and carers to get involved in developing the school food and drinks policy.

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<sup>9</sup> [School food standards: resources for schools - GOV.UK](#)

- Support and encourage participation in commissioned, evidence-based oral health programmes in particular supervised tooth brushing schemes for primary schools in areas where children are at substantial risk of poor oral health<sup>10</sup>.
- Support staff health and well-being and have information displayed to promote to the wider school community.

## Healthy Teeth, Happy Smiles Early Years Oral Health Resource Kit



If you are teaching about the importance of good oral health within the early years curriculum you may wish to loan our free resource box. Resources include a large toothbrushing demonstration puppet (dragon/monkey), dental role play costume, jumbo teeth / toothbrush, books, oral health activities and information for to send home for families. Each child 3-5yrs also receives a free oral health pack to take home.

<sup>10</sup> [Improving oral health: supervised toothbrushing programme toolkit - GOV.UK](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/444444/Improving_oral_health_supervised_toothbrushing_programme_toolkit.pdf)

For more information or to reserve a kit email [lynn.callaghan@tameside.gov.uk](mailto:lynn.callaghan@tameside.gov.uk) or [deena.lees@tameside.gov.uk](mailto:deena.lees@tameside.gov.uk)

If you would like a local dentist to visit your school to talk to the children about how to look after their teeth, please contact RamzanMohammed [team@mydentalbuddy.com](mailto:team@mydentalbuddy.com)

## Super Smiles - Supervised Toothbrushing Scheme for 3-5-year-old children



We also offer a free supervised toothbrushing scheme to all local nurseries and reception classes. Evidence tells us that brushing teeth each day at school/nursery over a two-year period is effective for preventing tooth decay and can establish life-long behaviour to promote good oral health. The scheme is fully funded by public health, and we will supply all the resources required. Staff training will also be provided. Further information is available below:

[Improving oral health: supervised toothbrushing programme toolkit - GOV.UK](#)

[Supervised toothbrushing for children to prevent tooth decay - GOV.UK](#)

[HOME | Supervised Toothbrushing Toolkit](#)

To sign up to the scheme or for more information contact:  
[lynn.callaghan@tameside.gov.uk](mailto:lynn.callaghan@tameside.gov.uk)

# Oral Health in the classroom: Downloads

[Downloads and Resources | Oral Health Foundation \(dentalhealth.org\)](https://www.dentalhealth.org/)

## ***Early Years' Education (3 – 5 years) units:***

- Why do we have teeth? (Presentation)
- Why do we have teeth? (Lesson plan & activities)
- First Visit to the Dentist (Presentation)
- First Visit to the Dentist (Lesson plan & activities)
- Food and Drink (Presentation)
- Food and Drink (Lesson plan & activities)
- [www.e-bug.eu/ey-oral-hygiene](http://www.e-bug.eu/ey-oral-hygiene)

## ***Key Stage One (6 – 8 years) units:***

- Diet & Snacking (Presentation)
- Diet & Snacking (Lesson plan & activities)
- Our Smile (Presentation)
- Our Smile (Lesson plan & activities)
- Types of Teeth (Presentation)
- Types of Teeth (Lesson plan & activities)

## ***Key Stage Two (9 - 11 years) units:***

- Anatomy of Teeth (Presentation)
- Anatomy of Teeth (Lesson plan & activities)
- Looking after our Teeth (Presentation)
- Looking after our Teeth (Lesson plan & activities)
- Sugar & our Teeth (Presentation)
- Sugar & our Teeth (Lesson plan & activities)


## Key Stage Three (12 - 15 years)

BRIGHT dental health lesson pack

### Other useful downloads:

- [Dental Buddy Tips & Glossary](#) - a full glossary of words used in Dental Buddy
- [All About Teeth](#) - background information all about teeth including anatomy and types of teeth, how to clean teeth, and snacking.

### Links to additional material:

- Tameside Council Oral Health
- Be Well Tameside: NHS Health Checks and Lifestyle support
- GROW
- Children's Nutrition Team - Tameside MBC
- Delivering better oral health: an evidence-based toolkit for prevention - GOV.UK
- School Zone | Campaigns | Campaign Resource Centre
- Better Health Start for Life Top Tips For Teeth | Campaigns | Campaign Resource Centre
- Bright Smiles, Bright Futures | Colgate® Professional
- BSPD KidsVids: Dr Ranj and Super Tooth
- GULP KS2 KS3 Toolkits
- Food Active | Kind to Teeth
- Teeth Team
- Brush DJ App
- Oral Health Foundation
- The Tooth Brushing Song  | Toddler Learning | Songs for Kids | Hey Duggee
- Simple Songs Brushing Teeth
- All About Healthy Teeth PowerPoint (teacher made) - Twinkl
- Wrigley Oral Healthcare Program | School Resources
- Teeth – KS2 Science curriculum - BBC Bitesize

- Better Health: Healthier Families
- Sugar Smart
- Resources - Save Kids from Sugar
- Food A Fact Of Life
- Oral Health Townscape
- Children's Oral Health - elearning for healthcare
- Help for early years providers: Oral health
- Live Well - NHS
- Supervised Toothbrushing Programme – Greater Manchester Training Hub
- Oral Health Training for Early Years Practitioners – Greater Manchester Training Hub
- GM Integrated Care Health Services and information
- GM Urgent Dental Care

The Oral Health Service also offers local schools and early years setting access to staff training, advice, and information. To discuss how to promote better oral health with children and families you support contact:

Lynn Callaghan [lynn.callaghan@tameside.gov.uk](mailto:lynn.callaghan@tameside.gov.uk)