

## ORAL HEALTH POLICY

<b>Policy Number</b>	P-Q2-B003	<b>Version Number</b>	1.00
<b>Drafted by</b>	Director of Education	<b>Approved Date:</b> <b>Review Date:</b>	May 2025 May 2026
<b>Responsibility</b>	The Board of Bubup Womindjeka Family and Children's Centre Association (Inc.)		
<b>Related Service Policies</b>	<ul style="list-style-type: none"> <li>Food Safety Policy</li> <li>Hygiene Policy</li> </ul>	<ul style="list-style-type: none"> <li>Nutrition and Active Play Policy</li> <li>Anaphylaxis Policy</li> </ul>	
<b>Legislation and Standards</b>	<p>Relevant legislation and standards include but are not limited to:</p> <ul style="list-style-type: none"> <li>Education and Care Services National Law Act 2010: Sections 168, 301(3)(d), 323</li> <li>Education and Care Services National Regulations 2011: <ul style="list-style-type: none"> <li>Part 4.1-Educational program and practice, 73 Educational programs – Regulation 73</li> <li>Part 4.2-Children's Health and Safety, Division 1 – Health, Safety and wellbeing of Children – Regulations 77, 78, 79, 80</li> <li>Part 4.7-Leadership and service management, Division 2 – Policies and procedures – Regulation 168 (2) (a) (i)</li> </ul> </li> <li>National Quality Standard 2011: Quality Areas 2, 6 &amp; 7</li> <li>Australian Dietary Guidelines. National Health and Medical Research Council, 2013</li> <li>Get Up and Grow. Healthy Eating and Physical Activity for Early Childhood. Australian Government Department of Health and Ageing, 2009.</li> <li>Belonging, Being, and Becoming. The Early Years Framework for Australia. Australian Government Department of Education, Employment and Workplace Relations, 2009.</li> <li>Victorian Early Years Learning and Development Framework, for all Children from Birth to Eight Years. Department of Education and Training, 2016.</li> <li>Guide to the National Quality Standard. Australian Children's Education &amp; Care Quality Authority, 2017.</li> </ul>		
<b>Sources</b>	<ul style="list-style-type: none"> <li>Australian Research Centre for Population Oral Health 2011</li> <li>Prevention and Population Health Branch</li> <li>Australian Health Policy Institute</li> <li>Nutrition Australia Victorian Division</li> <li>Get Up and Grow Healthy Eating and Physical Activity for Early Childhood</li> <li>Australian Dietary Guidelines</li> <li>Australian Dental Journal</li> <li>Infant Feeding Guidelines</li> </ul>		

### AUTHORISATION

This policy was adopted by the Bubup Womindjeka Family and Children's Centre Board of Governance on November 19<sup>th</sup> 2020.

### PURPOSE

The educators and staff at Bubup Womindjeka acknowledge the importance of oral health behaviours that contribute to overall health and wellbeing.

This policy confirms our commitment to:

- create environments that support good oral health and general health
- encourage children to make healthy food and drink choices

The educators, staff and management will be able to acknowledge the importance of oral health behaviours that contribute to overall health and wellbeing.

## PRINCIPLES

Bubup Womindjeka Family and Children's Centre is committed to:

- Creating environments that support good oral health and general health
- Encouraging children to make healthy food and drink choices

As a health promoting service it is recognised that every member of Bubup Womindjeka impacts on children's health and can promote the oral health of children, educators, staff and families through learning, policies, creating a safe and healthy physical and social environment, and developing community links and partnerships. All members of the service including educators, staff, children, families and volunteers will be given a chance to review the policy, and will be supported in its implementation.

## SCOPE

This policy applies to the Approved Provider, Persons with Management or Control, Nominated Supervisor, Person in day-to-day Charge, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Bubup Womindjeka Family and Children's Centre.

## DEFINITIONS

The terms defined in this section relate specifically to this policy.

**Oral Health:** Eating, speaking and socialising without discomfort or embarrassment.

**Health Eating:** Eating a wide variety of foods from the five food groups each day. These are:

- Fruit
- Vegetables and legumes/beans
- Grain (cereal) foods, mostly wholegrain
- Milk, yoghurt, cheese, and alternatives
- Lean meat, poultry, fish, eggs, tofu, nuts and seeds and legumes/beans

Health eating also means eating in a way that is socially and culturally appropriate, having regular meals and snacks and eating food to satisfy hunger, appetite and energy needs.

**“Sometimes” foods and drink:** Sometimes foods are high in fat, sugar and salt or a combination of these. They typically have very little nutritional value and are often processed and packaged. \*Refer to appendix I.

## BACKGROUND AND IMPLEMENTATION

Oral health behaviours have a major influence on children's health and wellbeing and a direct impact on their growth and development. Early childhood education and care services play an important role in promoting young children's oral health. This is a time when lifelong oral health behaviours are being formed.

Oral health is essential for children's overall health and wellbeing. Oral diseases can negatively affect individuals through pain, discomfort, general health and quality of life. The main oral health condition experienced by children is tooth decay, affecting over half of all Australian children, making it five times more prevalent than asthma. Tooth decay is Australia's most prevalent health problem despite being preventable.

## ROLE RESPONSIBILITIES

### **The Approved Provider (Board of Governance) is responsible for:**

The Bubup Womindjeka Family and Children's Centre Board is the Approved Provider and has ultimate responsibility for the management and control of the service.

The Board delegates operational responsibility and day to day management of the service to the Nominated Supervisor and monitors the performance of the organisation, including responsibilities contained in this policy, through regular reporting and by ensuring appropriate resources are available to carry out the organisation's functions.

### **The Nominated Supervisor and Persons in Day to Day charge are responsible for:**

- The development and implementing of the whole service policy.
- Providing the certified supervisors, educators, other staff, volunteers, students and parents with information about policy requirements.
- Ensure any sponsorship, advertisements or marketing of food and drinks are consistent with the service's healthy eating and oral health policies. Fundraising activities reflect the oral health policy and promote healthy lifestyle messages.
- Support educators to access a range of resources to increase their capacity to promote oral health initiatives for children.
- Provide educators, staff and families with information, ideas and practical strategies on a regular basis to support oral health in the service and at home.
- Ensure oral health information is provided as part of an orientation of new staff including provision of the oral health policy.
- Work with local health professionals, services and other organisations to support educators and staff to deliver and promote oral health initiatives.

### **Educators and other staff are responsible for:**

- Ensure sometimes foods and sweetened drinks (juices, cordial and soft drinks) are not provided by the service and are discouraged from being sent in from home.
- Ensure safe drinking water (preferably tap water) is available indoors and outdoors at all times and it accessible to all children. Children are encouraged to drink water regularly. Only tap water or plain milk is provided.
- Ensure children undertake oral hygiene practices in the service where appropriate.
- Act as role models for children and are encouraged to bring foods and drinks that are in line with the service's healthy eating and oral health policies.
- Ensure oral health practices from diverse cultural practices and traditional beliefs are respected and valued within the service.
- Ensure children have opportunities to learn about, and develop skills for oral health through the educational program/s.
- Discuss with children about age appropriate tooth brushing and why it is important.
- Assist the Nominated Supervisor and act as a key partner in developing and supporting oral health initiatives.
- Acting on behalf of and assist the Nominated Supervisor and provide families with information, ideas and practical strategies on a regular basis to support oral health throughout the service and also at home.
- Acting on behalf of and assist the Nominated Supervisor and provide families with information on oral hygiene and where to access public dental services.
- Ensure families' experiences and interested are drawn upon to support oral health initiatives.
- Ensure families' and children from culturally diverse backgrounds are consulted to ensure cultural values and expectation about oral health are respected.

### **Parents/guardians are responsible for:**

- Communicating regularly with the service in relation to their child's oral hygiene and discuss any concerns.
- Providing input to the development and implementation of this policy collaboration with the Nominated Supervisor, educators and children.

- Assist the service in implementing certain procedures and practices within the oral health policy at home, where applicable.
- Encourage and educate children around oral health hygiene at home.

**Volunteers and students, while at the service are responsible for:**

- Following this policy and its procedures.

## EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Nominated Supervisor will:

- Regularly seek feedback from everyone affected by the policy regarding its effectiveness
- Monitor the implementation, compliance, complaints and incidents in relation to this policy
- Keep the policy up to date with current legislation, research, policy and best practice
- Revise the policy and procedures as part of the service's policy review cycle, or as required
- Notify parents/guardians at least 14 days before making any changes to this policy or its procedures.

### Relevant Forms/Documents

Attachment 1: Appendix 1 – Additional Information

### Version History

Date	Version	Author/s	Details
November 2020	1.00	Director of Education	New policy
February 2022	1.00	Director of Education	Police reviewed and no changes made.
February 2023	1.00	Director of Education	Policy reviewed and no changes made.
May 2024	1.00	Director of Education	Policy reviewed and no changes made.
May 2025	1.00	Director of Education	Policy reviewed and no changes made.

## APPENDIX I – ADDITIONAL INFORMATION

- Breast milk is best for babies and is not associated with an increased risk of dental decay.
- A cup can be introduced at around six months, to teach infants the skill of sipping drinks from a cup.
- Put an infant to bed without a bottle or take the bottle away when the infant has finished feeding. Don't let the infant keep sucking on the bottle.
- Use an appropriate fluoride toothpaste (e.g. child's toothpaste) over the age of 18 months.
- Children should have an oral health assessment by the age of two.
- Brush teeth and along the gum line twice a day with a soft brush.
- Drink plenty of tap water (fluoridated if available).
- Limit sugary foods and drinks.
- Choose healthy snacks – fruits and vegetables.
- Pregnant women should have their oral health assessed and treatment needs addressed