

# Oral Health Self-Assessment

## Purpose

The Oral Health Self-Assessment & Action Plan Tools are intended to help your program identify strengths and opportunities for growth related to early childhood oral health practices and policies.

## Rationale

Cavities spread from young children's baby teeth to their adult teeth, leading to a lifetime of oral health issues. According to the CDC, poor oral health impacts more than just a child's smile. Children with oral health issues are three times more likely to miss school. Young children with tooth pain may also have challenges within the classroom including being distracted by the pain which makes it hard for them to focus, follow directions, and learn. Finally, a child that is suffering with tooth pain may be cranky and/or withdrawn. This can make them a less than ideal playmate with other children.

You have an important role in helping children develop healthy habits that can last a lifetime. The Self-Assessment and Action Plan tools focus on key components that indicate program-wide use of high-quality oral health practices and policies, including implementation of the five basics of oral health from the supplemental curriculum, Cavity Free Kids (CFK). In addition, the Self-Assessment and Action Plan can be submitted as evidence for programs seeking a quality rating through Colorado Shines under indicator 3.3.

## Overview of the Self-Assessment & Action Plan

As an early childhood professional, it is important to have knowledge about oral health and engage with families on how they can support their children's oral health at home. This Self-Assessment tool looks closely at elements that contribute to high-quality policies and practices in early childhood oral health. There are three main categories in the self-assessment tool:

- Commitment to Oral Health
- Education, Practice and Environment
- Family Engagement

Use the Self-Assessment and Action Plan Tools to determine how your program can increase the quality and consistency of early childhood oral health policies and practices.

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## Self-Assessment Instructions

Follow these instructions as you complete the Self-Assessment and Action Plan, and then submit this information as part of your Colorado Shines Quality Rating.

Gather and review all documents containing your program's policies and procedures specific to oral health (i.e., family handbooks, staff training, policy and procedure documents, and other handouts).

Assess your program's current status by marking the box that best matches your practices. Record your score in the right-hand column according to the provided point guidelines. Use the notes column to detail how your program does or does not fully meet specific practices. At the end of each section, reflect in the notes section on your areas of strength, opportunities for growth, and ideas for improvement.

3. Upon completion of the Self-Assessment, continue to complete the scoring rubric. The rubric provides a structured way to assess the quality and comprehensiveness of an early childhood program's oral health practices and policies, helping to identify strengths, areas for improvement, and demonstrate growth over time.

4. Once you have completed the scoring rubric, continue the Action Plan at the end of this document. Use SMART Goals to ensure success. Remember, these goals can be added to your program's overall Quality Improvement Plan.

5. Submit the Oral Health Self-Assessment (pages 3-9) and the Oral Health Action Plan (pages 12-13) as evidence to earn points toward your Colorado Shines Quality Rating.

- Indicator 3.3 Continuous quality improvement in one or more strategy area: Health Promotion

6. Communicate the results of your Self-Assessment and Action Plan with the program's staff, coaches, consultants, and families to ensure open communication and accountability.

# Oral Health Self-Assessment

Program Name: \_\_\_\_\_

Date: \_\_\_\_\_

Person completing the assessment: \_\_\_\_\_

Role: \_\_\_\_\_

## Section 1: Commitment to Oral Health

Develop clear written policies and procedures and foster a supportive culture.

<p><b>1.1 The program has written policies that support oral health best practices including the following topics:</b></p> <ul style="list-style-type: none"> <li>• Limiting sugar-sweetened beverages, candy, and other foods high in added sugar</li> <li>• Practices to encourage and promote children’s oral health</li> <li>• Planned and informal oral health education for children</li> <li>• Staff professional development on children’s oral health</li> <li>• Education for families on children’s oral health</li> <li>• How to identify and handle injuries to the mouth</li> <li>• The recommendation that children start receiving oral health care by 12 months</li> <li>• Children in the program have annual oral health screenings</li> <li>• The program provides referrals when additional treatment is needed</li> <li>• Fluoride varnish is encouraged for every child</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> None (0 Points)</li> <li><input type="checkbox"/> 1 - 4 Topics (1 Point)</li> <li><input type="checkbox"/> 5 - 8 Topics (2 Points)</li> <li><input type="checkbox"/> 9 - 10 Topics (3 Points)</li> </ul> <p><b>Score:</b></p>
<p><b>1.2 The program has a clearly written toothbrushing procedure including the following topics:</b></p> <ul style="list-style-type: none"> <li>• How often toothbrushing occurs for each age group</li> <li>• Toothbrushes provided are age appropriate</li> <li>• Toothbrushes are labeled for each child</li> <li>• Toothbrushes are replaced every 6 months</li> <li>• Toothbrushes are appropriately stored (standing up, not touching each, air dried)</li> <li>• How fluoride toothpaste is provided to children</li> <li>• Guidelines for assisting children with toothbrushing as needed</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> None (0 Points)</li> <li><input type="checkbox"/> 1 - 2 Topics (1 Point)</li> <li><input type="checkbox"/> 3 - 4 Topics (2 Points)</li> <li><input type="checkbox"/> 5 - 7 Topics (3 Points)</li> </ul> <p><b>Score:</b></p>

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**1.3 The program has a clearly written oral health screening and referral policy and procedures in place that:**

- Identifies a qualified screener to conduct oral health screening and referral
- Outlines logistical needs, such as location, materials, etc.
- Indicates necessary forms to be completed (e.g., parental consent, referral form, etc.)
- Supports screening and referral in the child and family's home language
- Ensures referral and follow-up if a need is identified

- None (0 Points)
- 1 - 2 Topics (1 Point)
- 3 - 4 Topics (2 Points)
- 5 or more Topics (3 Points)

**Score:**

**Total Score for Section 1:** \_\_\_\_\_ / 9

Notes:

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### Section 2: Education, Practice, and Environment

Build the awareness, knowledge, and skills needed to ensure program-wide efforts to create an oral health-friendly environment and support best practices.

<p><b>2.1 Program staff have received training in Cavity Free Kids (CFK) or other reliable and valid oral health curriculum</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not Yet (0 Points)</li> <li><input type="checkbox"/> Some staff are trained (1 Point)</li> <li><input type="checkbox"/> All staff are trained upon hire (2 Points)</li> <li><input type="checkbox"/> All staff are trained upon hire and at least once every three years (3 Points)</li> </ul> <p><b>Score:</b></p>
<p><b>2.2 The program limits snacks with added sugar and offers them</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> One time per month or more (0 Points)</li> <li><input type="checkbox"/> One time every few months (1 Point)</li> <li><input type="checkbox"/> 1 - 2 times per year (2 Points)</li> <li><input type="checkbox"/> Never (3 Points)</li> </ul> <p><b>Score:</b></p>
<p><b>2.3 The program offers fresh fruits and/or vegetables with meals and snacks</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Never (0 Points)</li> <li><input type="checkbox"/> 1 - 2 times per week (1 Point)</li> <li><input type="checkbox"/> 3 - 4 times per week (2 Points)</li> <li><input type="checkbox"/> Daily (3 Points)</li> </ul> <p><b>Score:</b></p>

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<p><b>2.4 The program embeds activities that help children understand how to care for their teeth and why it is important</b></p>	<p> <input type="checkbox"/> Not yet (0 Points)  <input type="checkbox"/> 1 - 5 times a year (1 Point)  <input type="checkbox"/> 6 - 11 times per year (2 Points)  <input type="checkbox"/> At least once a month (3 Points)         </p> <p><b>Score:</b></p>
<p><b>2.5 Staff talk to children about the importance of oral health</b></p>	<p> <input type="checkbox"/> Not yet (0 Points)  <input type="checkbox"/> Sometimes (1 Point)  <input type="checkbox"/> Often (2 Points)  <input type="checkbox"/> Anytime they see an opportunity (3 Points)         </p> <p><b>Score:</b></p>
<p><b>2.6 The program offers planned oral health education for children</b></p>	<p> <input type="checkbox"/> Not yet (0 Points)  <input type="checkbox"/> In some classrooms (1 Point)  <input type="checkbox"/> In most classrooms (2 Points)  <input type="checkbox"/> In all classrooms (3 Points)         </p> <p><b>Score:</b></p>
<p><b>2.7 The following topics are included in planned oral health education for children:</b></p> <ul style="list-style-type: none"> <li>• The importance of healthy baby teeth</li> <li>• What causes cavities</li> <li>• How foods and beverages impact oral health</li> <li>• Drinking water for thirst</li> <li>• What foods are tooth healthy</li> <li>• The importance of brushing and flossing</li> <li>• Using water to swish after meals</li> <li>• How fluoride promotes oral health</li> <li>• What to expect at the dentist</li> <li>• The importance of regular dentist visits</li> </ul>	<p> <input type="checkbox"/> None/No planned oral health ed. (0 Points)  <input type="checkbox"/> 1 - 4 Topics (1 Point)  <input type="checkbox"/> 5 - 8 Topics (2 Points)  <input type="checkbox"/> 9 - 10 Topics (3 Points)         </p> <p><b>Score:</b></p>

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2.8 Children in the program participate in daily toothbrushing

- Not yet (0 Points)
- In some classrooms (1 Point)
- In most classrooms (2 Points)
- In all classrooms, including infants with teeth (3 Points)

Score:

Total Score for Section 2: \_\_\_\_\_ / 24

Notes:

## Oral Health Self-Assessment

### Section 3: Family Engagement

Build strong relationships, communicate regularly, and share relevant local resources and services between staff and family.

<p><b>3.1 The program provides families with up-to-date oral health materials and resources</b></p>	<p> <input type="checkbox"/> Not yet (0 Points)  <input type="checkbox"/> Only upon request (1 Point)  <input type="checkbox"/> Available for staff and families (2 Points)  <input type="checkbox"/> Actively distributed to all staff and families (3 Points)         </p> <p><b>Score:</b></p>
<p><b>3.2 Families are offered education (training, demonstrations, etc.) on children’s oral health</b></p>	<p> <input type="checkbox"/> Not yet (0 Points)  <input type="checkbox"/> 1 time per year (1 Point)  <input type="checkbox"/> 2 – 3 times per year (2 Points)  <input type="checkbox"/> 4 times per year (3 Points)         </p> <p><b>Score:</b></p>
<p><b>3.3 The following topics are included in the oral health education for families:</b></p> <ul style="list-style-type: none"> <li>• The importance of healthy baby teeth including avoiding sharing saliva</li> <li>• How the use of bottles and sippy cups can impact oral health</li> <li>• What causes cavities (plaque and tooth decay)</li> <li>• Choosing water first for thirst</li> <li>• The importance of limiting sugar-sweetened beverages, candy, and other foods high in added sugar</li> <li>• How foods and beverages impact oral health</li> <li>• The importance of brushing and flossing</li> <li>• Using water to swish after meals</li> <li>• How fluoride promotes oral health</li> <li>• Practices for positive, supervised tooth brushing</li> <li>• The importance of regular dentist visits</li> <li>• The importance of follow-up treatment if recommended</li> <li>• Program polices related to oral health</li> </ul>	<p> <input type="checkbox"/> None (0 Points)  <input type="checkbox"/> 1 – 5 Topics (1 Point)  <input type="checkbox"/> 6 – 10 Topics (2 Points)  <input type="checkbox"/> 11 – 13 Topics (3 Points)         </p> <p><b>Score:</b></p>



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<p><b>3.4 The program provides families resources for free or reduced dental care</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet (0 Points)</li> <li><input type="checkbox"/> Only upon request (1 point)</li> <li><input type="checkbox"/> Available for staff and families (2 Points)</li> <li><input type="checkbox"/> Actively distributed to all staff and families (3 Points)</li> </ul> <p><b>Score:</b></p>
<p><b>3.5 The program requests feedback from families through existing program surveys regarding oral health activities, routines, and resources</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet (0 Points)</li> <li><input type="checkbox"/> Family surveys are collected and:             <ul style="list-style-type: none"> <li><input type="checkbox"/> there is at least one questions on oral health (1 Point)</li> <li><input type="checkbox"/> there are several questions on oral health (2 Points)</li> <li><input type="checkbox"/> and responses are analyzed to improve oral health activities, routines, and resources (3 Points)</li> </ul> </li> </ul> <p><b>Score:</b></p>

**Total Score for Section 3: \_\_\_\_ / 15**

Notes:

## Oral Health Self-Assessment

### Overall Score

Total Score for Section 1: Commitment to Oral Health \_\_\_\_\_ / 9

Total Score for Section 2: Education, Practice, and Environment \_\_\_\_\_ / 24

Total Score for Section 3: Family Engagement \_\_\_\_\_ / 15

Total Score Achieved: \_\_\_\_\_ / 48

### Scoring Key

- **Exemplary (43-48 points):** The program demonstrates a comprehensive and proactive approach to oral health.
- **Proficient (35-42 points):** The program has established solid oral health policies and practices with minor areas for improvement.
- **Developing (24-34 points):** The program is in the process of developing its oral health policies and practices but has several areas needing attention.
- **Beginning (0-23 points):** The program has not yet begun or is in the early stages of establishing and implementing oral health policies and practices, with a need for significant development.

## Action Plan Instructions

The Action Plan is a vital component of your program's commitment to improving early childhood oral health practices and policies.

Follow these steps to complete your Action Plan effectively:

- Thoroughly review the scores and notes from your Self-Assessment. Pay close attention to the areas where your program did not fully meet specific practices.
- Based on your Self-Assessment results, identify at least one goal for each of the three main sections:
  - Commitment to Oral Health
  - Education, Practice, and Environment
  - Family Engagement
- Ensure each goal addresses the specific needs and areas for improvement highlighted in your Self-Assessment.
  - For each identified goal, use the SMART criteria to create clear and actionable objectives:
    - **Specific:** Clearly define the goal and the area it addresses.
    - **Measurable:** Determine how you will measure progress and success.
    - **Achievable:** Ensure the goal is realistic and attainable.
    - **Relevant:** Align the goal with your program's overall mission and priorities.
    - **Time-bound:** Set a clear timeline for achieving the goal.
- Outline the specific steps and actions required to achieve each goal. Include details such as:
  - Who will be responsible for each action step.
  - The resources needed (e.g., materials, training, time).
  - The timeline for completing each action step.
- Complete the Action Plan template with all the required information. Make sure to include your SMART goals, action steps, responsible parties, resources, and timelines.
- Submit the Oral Health Action Plan along with your Self-Assessment as evidence for earning points toward your Colorado Shines Quality Rating under Indicator 3.3.
- Establish a system for regularly monitoring and reviewing progress toward each goal. This could include periodic check-ins, progress reports, and adjustments to the plan as needed.

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## Action Plan

Program Name: \_\_\_\_\_ Date: \_\_\_\_\_

Section	Goal(s)	Who is responsible?	What resources are needed?	Timeline
(Sample) Commitment to Oral Health	(Sample) The program will ensure that all toothbrushes in every classroom are replaced every 6 months. Replacing toothbrushes regularly is essential for maintaining proper hygiene and supporting the overall health of the children in the program.	(Sample) The replacement of toothbrushes will be tracked through a log maintained by the classroom staff, documenting the date of replacement and the number of toothbrushes replaced.	(Sample) Program Administration will establish a partnership with a local dentist to secure free toothbrushes, and the program will include the cost of additional toothbrushing supplies in the annual and monthly budgets.	(Sample) All toothbrushes will be replaced every 6 months, with the first replacement cycle completed within 6 months of implementing toothbrushing. Staff will include toothbrush supplies on the monthly supply list, and the program will review the supply status monthly to ensure timely replenishment.
Commitment to Oral Health				
Education, Practice, and Environment				
Family Engagement				