



Quality **Child**Care

For Registered Home-Based Providers

LEARNING TO GROW ★ WINDWARD COMMUNITY COLLEGE

Vol. II, No. 2

10 Hallmarks of Quality Child Care

- ★ Build trusting relationships
- ★ Provide consistent care
- ★ Support children's health
- ★ Provide a safe environment
- ★ Provide positive guidance
- ★ Provide a languagerich environment
- ★ Foster curiosity and development through play
- ★ Individualize care and learning activities
- ★ Partner with parents
- ★ Pursue personal and professional growth

This Month's Hallmark of Quality Child Care Support Children's Health

Child Care Providers' Role in Children's Oral Health

ral health is an integral part of general health and can directly influence a child's quality of life. According to the Washington Times, Hawaii has more dentists per capita than any other state except Massachusetts, but children here have among the worst dental health in the country. With dental caries (cavities) being the most prevalent chronic disease among children, even exceeding asthma, the improvement of dental health among Hawaii's children is a public health priority. Caries, when left untreated, have been linked with negative effects on general health and wellbeing. These health consequences include:

- chewing difficulties affecting young children's body weight and growth,
- · changes in behavior due to pain or low self-esteem,
- reduced self-expression and communication, and
- decrease in school performance.

Additionally, the cost of treating oral health problems later in life can create a significant financial and social burden on patients.

The American Academy of Pediatric Dentistry recommends that children under the age of eight are assisted with brushing their teeth two to three times per day after meals and before sleeping. Since children are spending

so many hours per day eating and sleeping while in child care away from their own homes, family child care providers play an important role in ensuring children's good oral health by including tooth and gum care as one of their daily routines.

This newsletter describes some common oral health concerns that affect young children, in particular infants and toddlers, and gives you recommendations to promote oral hygiene in your program as well as tips that you can share with families.



November 2015







Baby Bottle Tooth Decay

Tooth decay in infants and very young children is often referred to as baby bottle tooth decay—a major cause of dental cavities in young children that can also cause serious damage to permanent teeth later. Baby bottle tooth decay happens when sweetened liquids or those with natural sugars (like milk, formula, and fruit juice) cling to an infant or toddler's teeth for a long time. Bacteria in the mouth thrive on this sugar and make acids that attack the teeth. Giving an infant or toddler a sugary drink at nap time is particularly harmful because the flow of saliva decreases during sleep.

Some people may think that since the baby teeth are going to fall out eventually, it won't make a difference if they need to be pulled out early due to decay, but baby teeth are necessary for chewing, speaking, and smiling. They also serve as placeholders for the adult teeth. If baby bottle tooth decay is left untreated, pain and infection can result. Severely decayed teeth may need to be removed. If teeth are infected or lost too early due to baby bottle tooth decay, the child may develop poor eating habits, speech problems, or crooked and damaged adult teeth.

You can help stave off baby bottle tooth decay by implementing a few steps in your program to promote good oral hygiene at an early age.

Providers can help by:

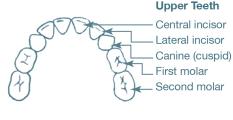
- Wiping the baby's gums with a clean gauze pad or washcloth after each feeding.
- Begin brushing the child's teeth, without toothpaste, when his or her first tooth comes in.
- Clean and massage gums in areas without teeth.



Recommend to parents that they:

- Floss daily once all the baby teeth have come in.
- Make sure their child is getting enough fluoride, which helps lessen cavities. Since our local water supply does not contain fluoride, they should ask their dentist or doctor if they need to use a supplement.
- Schedule regular dental visits by their child's first birthday. Dentists also offer special sealant coatings, which can help prevent tooth decay in children.

PRIMARY TEETH



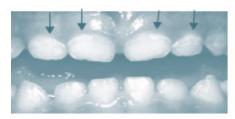
Lower Teeth
Second molar
First molar
Canine (cuspid)
Lateral incisor
Central incisor

Age Teeth Come In

8-12 months 9-13 months 16-22 months 13-19 months 25-33 months

Age Teeth Come In

23-31 months 14-18 months 17-23 months 10-16 months 6-10 months







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Other ways that parents and providers can work together to promote good oral hygiene in young children:

- Don't fill bottles with sugar water and soft drinks. Bottles are for milk, water, formula, and special electrolyte-containing solutions when the child has diarrhea.
- Never allow children to fall asleep with a bottle containing anything but water.
- It's never too late to break bad habits. If the child drinks sweetened liquids from the bottle and/or sleeps with a bottle, parents and providers can work together to break the habit by:
 - o Gradually diluting the bottle contents with water over 2 to 3 weeks.
 - o Once that period is over, fill the bottle only with water.
- Become familiar with the normal appearance of the child's gums and teeth so that problems can be identified if they occur.
- Check the child's gums and teeth about once a month by lifting the lip to look for decay on the outside and inside surfaces of the teeth.
- Limit or avoid sugary foods, juices, candy (especially sticky gummy candy. If the children eat these foods, have them rinse their mouth or brush their teeth after eating to wash away the sugar.



 When the child reaches 2 years old, encourage him to brush his own teeth but don't expect him to be able to clean all his teeth thoroughly without adult assistance.
 Help him brush with no more than a pea sized amount of toothpaste on his own softbristled tooth brush especially designed for toddlers' small mouths and delicate gums.
 Follow up and brush his teeth again, if necessary, to make sure they're clean.



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Citations:

Casamassimo P, Holt K, eds. (2014). *Bright Futures in Practice: Oral Health—Pocket Guide* (2nd ed.). Washington, DC: National Maternal and Child Oral Health Resource Center.

Hawaii Department of Health, Family Health Services Division. (October 2014). *Health Status of Children in Hawaii: 2011/12 National Survey of Children's Health.* http://health.hawaii.gov/about/files/2013/06/health-status-of-children-in-hawaii-report.pdf [Retrieved on-line 9/10/15].

WebMD, "What is Baby Bottle Tooth Decay?" http://www.webmd.com/oral-health/guide/what-is-baby-bottle-tooth-decay [Retrieved online 9/24/15].

Reflection Sheet and Award Book

- To receive the award book for this month, fill out your caregiver's reflection sheet and return it to the Learning to Grow program in the postage paid envelope by the deadline posted.
- Indicate on Question #8 if you would like to receive free technical assistance or support related to a child care issue.
- Update your address or contact information if any changes have taken place.



REMINDER: Registered QCC Participants can use their participation in the program to fulfill the relicensing requirement of "increased knowledge." Ask your DHS Licensing Social Worker about the requirements today.

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