

healthwatch Warrington

Tooth & paste and beyond:

Addressing Oral Health Needs for all children in Warrington

Introduction

Oral health is a vital part of overall wellbeing, especially in childhood when habits and access to care can shape lifelong outcomes. At Healthwatch Warrington, we are committed to ensuring that every child and family in our community has access to the information, services, and support they need to maintain healthy teeth and gums.

To ensure the accuracy and consistency of the information we shared, we worked closely with the Public Health team and the Bridgewater Oral Health team. Their guidance helped us align our messaging with the latest evidence-based practices and local health priorities, ensuring that families received clear, reliable, and unified advice.

Between **September 2024 and May 2025**, we undertook a comprehensive programme of **community outreach and digital engagement** to promote oral health awareness and gather feedback from local families. Our team visited a wide range of community settings.

In parallel, we launched a digital campaign across **Facebook**, **Instagram**, **and YouTube**, reaching over **19,000 people**.

To better understand the experiences of local families, we conducted an **Oral Health Survey** with **147 respondents**. The findings highlighted both strengths and challenges in the current system:

- **88%** of children had their first dental visit by age 2.
- 60% of families reported difficulty registering with an NHS dentist.
- Only 9% of children were confirmed to be in a supervised toothbrushing programme at school.
- 31% of parents still believed rinsing after brushing was correct, indicating a need for clearer guidance.



Methodology

To assess the state of oral health among children and families in Warrington, Healthwatch Warrington implemented a mixed-methods approach that combined community outreach, digital engagement, and survey research from **September 2024** to **May 2025**.

1. Community Engagement

Healthwatch Warrington conducted **24 in-person outreach events** across a variety of community settings, including:

- · Dallam Family Hub,
- Bread & Butter Thing
- · Living Well Hub,
- Sure Start Centres
- Warrington Market

These sessions provided opportunities to share our own resources, created in partnership with Bridgewater NHS Oral Health team, to enable families to improve their overall oral health and future habits. We answered questions and connected with families in accessible, familiar environments.



2. Digital Campaign

A parallel digital campaign was

launched across:

- Facebook
- ·Instagram
- YouTube

This campaign achieved:



More than **26,000 video views** and **1,000 direct clicks** to oral health resources.

Our website also saw increased traffic, with the **Oral Health page** receiving **427 views**, and additional resources like "Taking Care of Family's Teeth" and "Children's Teeth" drawing further engagement.

These videos have also been used on PED-TV in Manchester University NHS hospitals' paediatric A&E., whose waiting rooms have a footfall of over 50,000 children per year, plus 50,000 carers and other family members.

3. Oral Health Survey

A structured survey was conducted with 147 respondents, focusing on:

- •Dental registration and access
- Appointment availability
- •Brushing habits and routines
- School-based oral health programmes
- •Knowledge and beliefs about toothpaste use

The survey included both quantitative questions and open-ended responses, allowing for statistical analysis and thematic insights.

4. Focus Group Feedback

Additional qualitative data was gathered through focus groups and informal interviews with parents, teachers, and dental professionals. These discussions provided deeper insight into:

- •Barriers to dental care
- •Experiences of families with children who have special educational needs and disabilities (SEND)
- •Confusion around oral health guidance (e.g. flavoured toothpaste, brushing techniques)





Key Findings

🎎 Respondent Overview

- Total respondents: 147
- Majority of respondents had 1 or 2 children.
- Most children were aged 0-5 years, indicating a focus on early childhood oral health.

🖺 Dental Registration

- 82% of children were registered with an NHS dentist.
- 13% were not registered.
- 5% used a private dentist.
- 60% of respondents reported issues when registering with a dentist:
 - Long waiting lists
 - Practices not accepting NHS patients
 - Being removed from lists during COVID



"We were on so many waiting lists and then never heard back."

"It was very hard to get them registered and we had to go out of the area."

"Dentist refusing to accept patients, Warrington is a nightmare."

"I had to go private as there were no NHS dentists taking on and I lost mine during COVID."

"We recently moved to Warrington and cannot find an NHS dentist and cannot afford private dental care."

m Appointment Access

- 66% rated appointment booking as Good or Very Good.
- 23% rated it as Poor or Very Poor.
- 11% didn't respond.
- Common issues included:
 - Long waits
 - Cancellations
 - Lack of after-school appointments





"My daughter has had a recurring issue with a back tooth and it took us a long time to get an after-school appointment."

"Easy to get through and make an appointment, but most appointments are cancelled, and you cannot get one for another month. Not good for Warrington school attendance!"- Talking Teeth, Widnes

"You do have to book way in advance at our dentists as capacity is always at a premium."



👶 First Dental Visit

- 88% of children had their first dental visit between 0-2 years.
- This aligns well with NHS guidance to attend by age 1.
- COVID-19 was a major barrier for delayed visits.





"From being weeks/months old, I have taken both my children to the dentist, to get them used to the environment."

"My Daughter had a 2-year gap with no dentist from 2-4 due to COVID."

"I know I should have taken him earlier but with COVID etc. It was much more delayed than planned."

"My child has currently been waiting over 18 months to see an orthodontist about braces, and he is suffering with pain."



📏 Brushing Habits

- 100% of children had their own toothbrush.
- 56% were happy to brush their teeth, 40% sometimes, and 4% were not.
- 72% of parents always supervised brushing.
- 85% knew brushing should last 2 minutes.
- 81% brushed twice daily, but 14% only once.



They always sit with the children and speak to them directly – a great service."- Birchwood Dental Practice

"Just for getting used to the dentist mainly – the staff are very good with them."

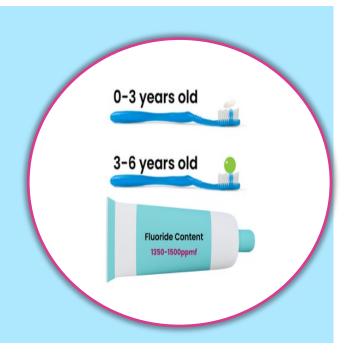
"Good to get them used to seeing a dentist and it has paid

off."



🏫 School-Based Oral Health

- Only 9% of children
 participated in a supervised
 toothbrushing programme at
 school.
- 50% of parents were unsure if their child's school offered one



🍖 Toothpaste Use

- 69% of respondents correctly stated that children should spit without rinsing after brushing.
- 31% still believed rinsing was appropriate, indicating a need for more education.





Based on the survey data, the question "Do you feel that your practice is child friendly?" received the following responses:

•Yes: 107 respondents (91%)

•**No:** 10 respondents (9%)

Among the practices mentioned, the following were most frequently cited by respondents who felt their dentist was child-friendly:

Dental Practice	Mentions
Birchwood Dental Practice	14
Museum Street Dental Practice	14
Latchford Dental Practice Ltd	13
Padgate (No1) Limited	9
Sankey Street Dental Practice	8
Clayton & Scott Dental Practice	5
Smile Clinic UK Ltd	5
The Village Dental Practice	3
Whitecross Dental Care Limited	3
Lingley Road Dental Surgery	2
A&U Dental Surgeries Ltd	2

These practices were named by the 10 respondents who indicated their dental practice was **not child friendly**.

1.Walton Road Dentist
2.My Dentist - Padgate
Lane (listed multiple times)
3.Bupa
4.Mydentist (general reference, possibly overlapping with above)



A Outreach Activities

Bread & Butter Thing: 8 events

• Living Well Hub: 5 events

Baby Zone: 3 events

• Warrington Market: 2 events

 Dallam Family Hub, Cinnamon Brow Farm Club, St Bens, The Gateway, Sure Start Centre Penketh, Sure Start Westy, Good Shepherd Play Centre: 1 event each





Social Media Engagement

• **Video Views**: 6,728

Reach: 19,454

• Reactions: 1,159

Comments: 81

Shares: 62

• Total Clicks: 1,017

YouTube Views:

• Top Tips for Tooth: 922

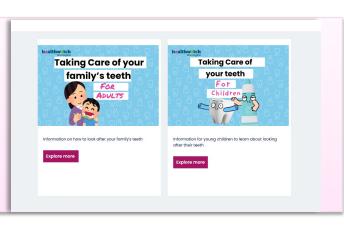
Oral Health Video: 19,529

Website Traffic

• Oral Health Page: 427 views

Taking Care of Family's Teeth:
 173 views

• Children's Teeth Page: 97 views



Outreach & Focus Groups

Feedback was received during outreach and our focus groups.

F Toothbrushing Routines

- **Challenges with Neurodiversity**: One parent shared that her 15-yearold daughter with autism has never been to the dentist due to sensory issues and a phobia of being touched.
- Pre-teen Resistance: Parents of pre-teen (11–12 years old) reported needing to constantly remind and monitor their brushing.
- **Early Habits Help**: Parents who introduced brushing early (e.g. from 4 months) found their children more receptive and enthusiastic.
- **Creative Approaches**: Turning brushing into a game and allowing children to explore toothbrushes helped build positive associations.



A parent shared the challenge of oral care for her neurodiverse daughter:

"My daughter is neurodiverse and has autism, she is now 15 and has never been to a dentist. She does not like to be touched and has a phobia of dentists and doctors."

Another parent described success with early introduction:

"I only have to ask my 4-year-old to brush her teeth and she is more than happy to do it... I started her very young and got her used to the sensations."

Creative strategies were also mentioned:

"I turned toothbrushing into a game... I always ensured that they did not mind afterwards."

Access to Dental Care

- Mixed Experiences:
 - Some parents reported no issues accessing NHS dental appointments.
 - Others, especially those with very young children (e.g. 11 months),
 struggled due to waiting lists and lack of transport.

NHS Access Barriers: One parent was even willing to give up her own NHS spot for her child but was refused.



Some parents reported smooth access:

"Never had any issues getting an appointment for my kids."

Others faced barriers:

"I can't get an NHS dentist for my daughter who is 11 months old... there is a waiting list and I have no transport."

"I am on a waiting list at our family dentist... I offered to give up my spot for her but they said no."

Oral Health Awareness & Education

- Dental Professionals' Concerns: A dental nurse noted an increase in young children needing fillings and extractions, calling for more parental education.
- Parental Uncertainty:
 - Confusion around whether flavoured toothpaste is acceptable for children.
 - Some parents turned to the NHS website for clarity.



A dental nurse raised concerns:

"I see more and more younger children coming to our surgery with issues... there needs to be more education for parents."

Parents expressed confusion:

"Are we allowed to use flavoured toothpaste for children or not? Some say yes and others say no."

A teacher highlighted early dental issues:

"It shocks me when very small children are having issues with their teeth... we're talking about children who are 3 or 4 years of age."

Neurodiversity, Autism & Sensory Needs in Oral Health

Challenges Identified:



Sensory Sensitivities:

"My daughter is neurodiverse and has autism, she is now 15 and has never been to a dentist. She does not like to be touched and has a phobia of dentists and doctors."

Tip 7: Some people may find regular toothpaste minty. Did you know that you can get alternatives*? Alternative toothpastes conbe found on teathwatch warrington.co.uk

Toothpaste Taste Sensitivity:

Some children struggle with the taste of toothpaste, which can make brushing difficult:

"It's sometimes difficult to get my little one to brush her teeth—she does not like the taste of toothpaste so it can be a battle."

Parental Confusion About Flavoured Toothpaste:

"I feel like we get mixed messages—are we allowed to use flavoured toothpaste for children or not? Some say yes and others say no. I eventually went on the NHS website to find out the guidelines."

Awareness of Oral Health

Most feel well-informed or very informed

Themes:

Importance of early education

Parental responsibility

School support

Impact of negative past experiences

Insight: Strong awareness, but personal experiences highlight the need for early and consistent education.





Tooth and Paste

Animated Videos

We had a wealth of information to share with families and children about oral health. After receiving guidance and tips from Bridgewater on maintaining good oral hygiene, we brought everything together to create our *Tooth and Paste* animated videos (Healthwatch Warrington).

We produced two videos: <u>one offering fun and engaging toothbrushing tips</u> for children, and another aimed at <u>families</u>, <u>providing more in-depth information</u>. To make the content appealing and accessible, we developed two distinctive characters who featured across all our marketing materials and on our website.



To better connect with young audiences, we chose to have children voice the characters—an approach that proved highly effective. The videos have been viewed an impressive 27,179 times across platforms including YouTube, Instagram, and Facebook.

We also used the characters in social media posts, sharing helpful hints and tips on brushing teeth. These posts have been widely shared across Warrington and received excellent feedback for being clear, engaging, and easy to understand.

Bespoke Healthwatch Warrington Marketing Materials: Wipe-Clean Tooth Cleaning Charts

As a follow-up to the success of the *Tooth and Paste* animated videos, Healthwatch Warrington developed bespoke marketing materials to further support families in establishing healthy brushing routines.

•**Product**: A Child Friendly wipe-clean tooth cleaning chart designed for daily use by children.

·Features:

- Engaging design to encourage regular brushing.
- Helpful tips and hints printed on the reverse side.
- **QR codes** linking directly to dedicated oral health pages on the Healthwatch Warrington website.

 Distribution: Over 600 charts were handed out across Warrington to young children through community events and outreach sessions.

This initiative helped reinforce oral health messages in a practical, child-friendly format and extended the reach of the digital campaign into homes and schools.



Tooth & Paste's Teeth Cleaning Chart



To better understand local views on children's oral health, **Healthwatch** Warrington used our Virtual Voices platform

(www.healthwatchwarrington.co.uk/virtual-voices) to run a short survey. This report shares the key insights gathered from that feedback.

Age Distribution:

42% aged 25-49

21% aged 50-64

16% aged 65-79

11% for 18-24 and 10% for 80+

Location: Primarily from WA postcode areas (e.g., WA1, WA4, WA5).

Insight: The largest group is working-age adults, with a good spread across

older age groups.

Access to Dental Care

42% found access easy

32% found it neutral

26% found it difficult

Barriers: Limited availability, restrictions for non-registered patients.

Insight: A quarter face challenges, indicating room for improvement in

accessibility.

Dental Practices Mentioned

Walton Road, Latchford, My Dentist (Padgate Lane), Lovely Lane, Grappenhall. **Insight:** These may be key providers or focal points for community feedback.

Routine Dental Visits

65% visit every 6-12 months

18% go every 0-6 months

Others visit less frequently or are unsure.

Insight: Majority maintain regular dental check-ups.

Supervised Toothbrushing at School

69% said their child does not participate

13% said yes

18% were unsure

Schools mentioned: Green Lane, St Andrews

Insight: Low participation suggests a potential area for public health

intervention.

Recommendations

1. Improve Access to NHS Dental Services

Issue: 60% of respondents reported difficulty registering with an NHS dentist.

Recommendations:

- To work with commissioners around the findings of this report with the view to increase NHS dental capacity in Warrington, particularly for children.
- Develop a centralised waiting list or referral system to streamline access.
- Explore mobile or outreach dental services in underserved areas.

"We were on so many waiting lists and then never heard back."

"It was very hard to get them registered, and we had to go out of the area."

2. Reduce Appointment Cancellations and Improve Booking Systems

Issue: Many families experienced long waits, cancellations, and difficulty securing after-school appointments.

Recommendations:

- Encourage practices to prioritise children's appointments and reduce cancellations.
- Promote online booking systems and reminder services.
- Offer more flexible appointment times, including after-school and weekend slots.

"Most appointments are cancelled and you cannot get one for another month."

"Appointments are always offered during school hours ... not good for Warrington school attendance!"

3. Promote Early Dental Visits

Issue: While 88% of children had their first visit by age 2, COVID caused delays for some.

Recommendations:

- Look to work with Bridgewater Oral health team to share our recommendation and findings around reinforcing NHS guidance to attend by age 1 through health visitors, nurseries, and GP practices.
- Provide targeted outreach to families with children born during the pandemic.

"Daughter had a 2-year gap with no dentist from 2-4 due to COVID."

"I know I should have taken him earlier but with COVID etc. It was much more delayed than planned."

4. Expand Supervised Toothbrushing in Schools

Issue: Only 9% of children were confirmed to be in a supervised brushing programme; 50% of parents didn't know.

Recommendations:

- Share findings and recommendations with the Bridgewater Oral Health team to expand supervised brushing schemes in nurseries and primary schools.
- Improve communication with parents about participation and benefits.

"I don't know if my child's school does this."

"We use a SEND dentist at Bath Street for my eldest who has autism and it's really good."

5. Enhance Oral Health Education

Issue: 31% of parents still believe children should rinse after brushing.

Recommendations:

- Deliver clear, consistent oral health messages through schools, GP surgeries, local media and social media.
- Provide tailored resources for families with additional needs (e.g. SEND, language barriers).
- Share findings and recommendations with Warrington Public Health.

"Really struggling, but going to look at the website and check out the tips."

"More info on oral health for SEND needs."

6. Support for Vulnerable Families

Issue: Some families reported financial barriers or lack of access due to disability or transport.

Recommendations:

- Ensure accessible dental practices for families with mobility needs.
- Consider travel support or home visits for high-need families.
- Work with community organisations to identify and support unregistered children.

"It needed to be accessible as I'm an electric wheelchair user."

"We cannot get registered anywhere and can't afford private dental care."

TOOTH CLEANING AID FEEDBACK



We asked people what they thought about our teeth cleaning charts, and the results are in:

RECEIVED A CHART



received a tooth cleaning chart

were satisfied with their chart.

"They were very good and useful; it was exciting to brush our teeth and then get to tick it off. Mummy would give us a treat at the end of the week for getting two ticks a day."



DIDN'T RECEIVE A CHART



We found that those who didn't receive a cleaning chart, said the following would encourage their children to brush their teeth

- Reward charts
- **Apps**
- **Timers**
- Songs
- Visual aids

(e.g., correct brushing technique)



- Made brushing fun and engaging
- QR codes were appreciated for their interactive
- Some used rewards (e.g., treats) as motivation
- Positive feedback on visual appeal and ease of

"We have difficulty getting our daughter to brush her teeth, and it helped remind her of the importance and gave her a little push to make sure she was brushing twice a day



TOOTH & PASTE VIDEOS

Had watched the videos

- Described as informative, engaging, and
- Children enjoyed the graphics and tips
- Some noted they were more suitable for older children

"My children loved the videos and found them really useful and gave us lots of cool tips."

KEY THEMES



 The tooth cleaning chart was well-received and effective in promoting brushing habits.

 Interactive elements like QR codes and videos enhanced engagement.

 There is strong support for broader oral health initiatives, especially early intervention and visual aids.





Quotes on Using the Tooth Cleaning Chart

"No, we did not scan the QR codes, however we have difficulty getting our daughter to brush her teeth and it helped remind her of its importance and gave her a little push to make sure she was brushing twice a day."

"They were very good and useful; it was exciting to brush our teeth and then get to tick it off. Mummy would give us a treat at the end of the week for getting two ticks a day."

"The QR codes were fun and had lots of cool videos that helped us."

"Really useful. Engaging and easy for kids to use."

"It has been a great reminder for my 2 children! I managed to download the chart. My kids have enjoyed filling in the chart as soon as they brushed their teeth."

"Loves it. I have a 3 year old grandson. We brush our teeth together as part of our morning and night-time routines. Sometimes after lunch if we want to. More is better and it's fun together!"

"They were so useful, the fun characters made it engaging and they wanted to scan the QR codes. It really helped to establish a routine!"





Quotes on the Tooth & Paste Videos

"My children loved the videos and found them really useful and gave us lots of cool tips."

"Very informative, my children loved them. The graphics were amazing."

"It was good and a reminder for my kids."

"She didn't really understand it but it was good for older kids."

"Engaging for children, very informative and fun."

"Very useful and my children enjoyed watching them."



Suggestions for Supporting Oral Health in Children

Respondents selected multiple strategies they believe would be helpful:

We asked those who fed back on the tooth cleaning charts to select the recommendations they felt would be helpful, the results are as follows:

Strategy	Votes	% of Respondents
"First Tooth, First Visit" campaign	12	80%
Distribute visual aids via schools and health visitors	11	73%
Mobile dental units/pop-up clinics in underserved areas	9	60%
Oral health packs for new parents	9	60%
SEND-specific oral health resources and training	9	60%
Centralised NHS dental waiting list with updates	7	47%
Promote specialist dental services for children with additional needs	7	47%
Increase NHS dental capacity in high-demand areas (e.g., Warrington)	6	40%

Conclusion cleaning aids

The feedback from families in Warrington highlights the value of engaging, visual tools like the Tooth Cleaning Chart in promoting better oral health habits among children. With 100% satisfaction from users and strong appreciation for interactive elements like QR codes and videos, it's clear that fun, accessible resources make a meaningful impact. Respondents also emphasised the need for inclusive, community-based support, from mobile dental units to SEND-specific resources. These insights will help Healthwatch Warrington advocate for more effective, family-friendly oral health initiatives across the borough.

Conclusion

The oral health initiative in Warrington between September 2024 and May 2025 has demonstrated both meaningful progress and ongoing challenges in supporting families and children. Through extensive community outreach and digital engagement, Healthwatch Warrington successfully raised awareness, shared resources, and gathered valuable feedback from 147 families.

Key successes include:

- High early engagement with dental care, with 88% of children attending their first dental visit by age 2.
- Strong digital reach, with over 27,000 video views and widespread engagement across social media.
- Positive reception of the *Tooth and Paste* campaign, which made oral health education accessible and engaging for children and families.

However, the findings also highlight critical areas for improvement:

- 60% of families reported difficulty registering with an NHS dentist, often due to long waiting lists or post-COVID disruptions.
- Only 9% of children were confirmed to be in supervised toothbrushing programmes at school.
- 31% of parents still believe rinsing after brushing is correct, indicating a need for clearer guidance.

Importantly, the report underlines the need to revise and strengthen support for children with additional needs, including those with neurodiversity, autism, and sensory sensitivities. Families shared challenges around sensory aversions, confusion about toothpaste options, and a lack of tailored resources. Practices like Bath Street Dental were praised for their inclusive approach, but more widespread support is needed.

To build on the progress made, future efforts should focus on:

- Expanding NHS dental access and reducing appointment barriers.
- Enhancing oral health education, especially around brushing techniques and toothpaste use.
- Increasing support for SEND families through tailored resources and accessible services.
- Promoting early dental visits and expanding school-based toothbrushing programmes.

By addressing these priorities, Warrington can ensure that every child, regardless of background or need, has the opportunity to develop strong oral health habits for life.









healthwetch

Healthwatch Warrington The GATEWAY 85-101 Sankey Street Warrington WA1 1SR

www.healthwatchwarrington.co.uk

t: 01925 246 893

e: contact@healthwatchwarrington.co.uk

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