

BRAIN BOOSTER

BY FUSION

ORAL HEALTH



Care Management Software

Empowering Outstanding Care Through Technology



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ORAL HEALTH



Oral health for people living in care homes is as important as any other personal care activity, such as washing and dressing and can be seen as holistic care (Bissett & Preshaw, 2011).

The ageing process can also affect fine motor skills which may impact on oral health as residents become unable to perform good oral hygiene.

Physical changes associated with ageing include receding gums, root pulp of the tooth becoming more brittle and a decrease in saliva production. These can all contribute to problems with maintaining good oral health.

The Importance of Assessment

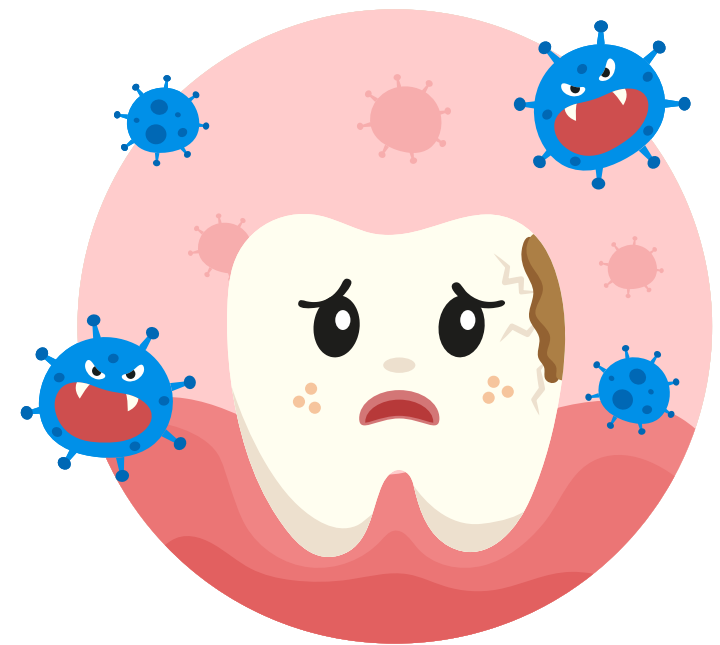
Documenting The Risk

- All residents must have an Oral Health assessment completed on moving in to the home, regardless of the length of their stay.
- The assessment provides details of what the resident current oral health is and what support they will need from care staff (if any) to maintain good oral health.
- Where family and friends are involved in ongoing care, consider involving them in the initial assessment, with the residents' permission, if it will help staff understand the resident's usual oral hygiene routine.
- Details of dentist visits or the need for dental referral must be documented and details of any current dentist captured. Concerns must be followed up once identified.
- Any care and support identified must be included in a care plan for oral health.



Understanding the impact of poor dental health

- Poor oral health may potentially have an effect on resident's general health, wellbeing and dignity.
- It can also adversely affect people's general health – for example, problems with eating and drinking can lead to malnutrition. There is also considerable evidence that links poor oral health with aspiration pneumonia, particularly in residential settings. (Ref: Skills for Care- Oral Health,2022) This is because people can inhale bacteria in dental plaque.
- Untreated dental pain or mouth infection can impact on the mood, and general health and wellbeing of people who cannot articulate their pain or distress or ask for help. (This includes, for example, residents with dementia or communication difficulties.



Over To You



Test Yourself

Ask These Questions

- Are staff aware of all resident's oral health status?
- Are all appropriate assessments completed?
- Does their care plan fully reflect support and actions needed for that individual?
- Have any referrals to dentists/MDT been made and documented on Fusion?
- Have the dental or MDT support or recommendations been included in the care plan?
- Is the resident getting the right support to maintain their oral health?
- Do staff know how to register with or contact the dentist for the resident, is the number in the Fusion contacts list?
- Do staff know when to report any oral health concerns for residents, and how to respond to a resident's changing needs and circumstances. (For example, some residents may lose their manual dexterity over time.)
- Do staff know what to do if a resident refuses oral care?



Over To You

Ensure care staff provide residents with daily support to meet their mouth care needs and preferences. This must be clearly set out in their personal care plan after assessment:

- Brushing natural teeth at least twice a day with fluoride toothpaste
- Providing daily oral care for full or partial dentures (such as brushing, rinsing the mouth, removing food debris and removing dentures overnight)
- Using the residents choice of cleaning products for dentures
- Using their choice of toothbrush, either manual or electric/battery powered
- Daily use of mouth care products prescribed by dental clinicians (for example, this may include a high fluoride toothpaste or a prescribed mouth rinse)
- Daily use of any over-the-counter products preferred by residents if possible, such as particular mouth rinses or toothpastes
- Ensuring care staff know how to recognise and respond to changes in a resident's mouth care needs
- Ensuring care staff know how to respond if a resident does not want daily mouth care or to have their dentures removed

The Importance of mouth care at the end of life

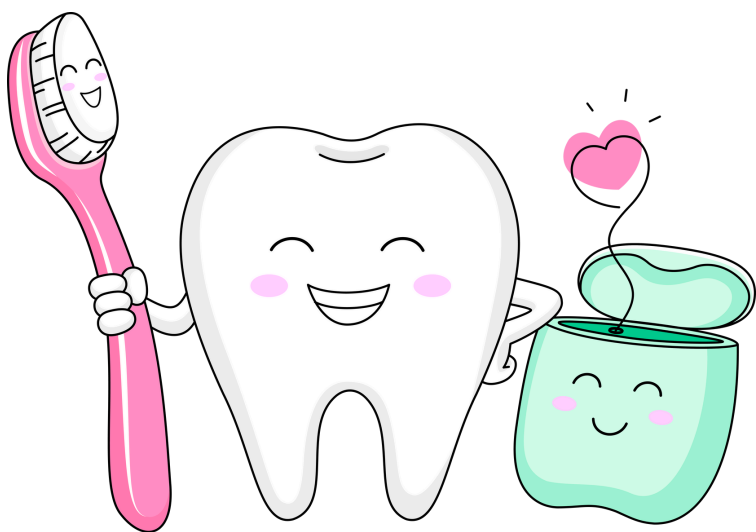


Keeping a resident's mouth moist, clean, and comfortable when they are nearing end of life is a vital part of care. Mouth care should always be carried out as long as it can be tolerated by the person:

- Explain clearly what you're going to do.
- If you need to leave dentures out of the mouth to improve mouth comfort, explain to the person being cared for and ask for consent to do this. Explain why you're doing this to family members too, as they may not have seen their relative without dentures.
- Encourage independence as much as possible, or support someone to participate in their own mouth care where they can.
- Use a small-headed soft-bristled toothbrush. A children's toothbrush is ideal.
- A mild flavoured toothpaste or a non-foaming toothpaste may be better tolerated during end of life. A pea- sized amount or a smear is sufficient.
- If toothpaste can't be tolerated, use a small amount of water on a toothbrush to remove debris and plaque. (Children's flavoured toothpaste may be preferable if a minty flavour cannot be tolerated).
- Gently clean the teeth, cleanse the gums, cheeks, tongue and palate.
- Ensure dentures are removed and cleaned thoroughly twice daily if present.
- Use a water-based lip balm as often as needed to keep the lips moist.

Never underestimate the impact of
good oral health on your residents
overall wellbeing!!

Staff will need to continue to be
vigilant when residents wish to clean
their teeth independently.



- Is the resident doing this effectively and daily as a minimum?
- Has the toothbrush been used (is it wet), is the tube of toothpaste reducing?
- Do they need someone to purchase new brush or toothpaste for them? (Brushes should be renewed 3 monthly as a minimum)
- Do they need gently prompting or reminding?
- Has the level of support needed increased since initial assessment? Is reassessment required?

IMPORTANT

- The 2019 CQC Smiling Matters report can be found on the CQC website.
- The NICE guideline (NG48) covers oral health, including dental health and daily mouth care, for adults in care homes. The aim is to maintain and improve their oral health and ensure timely access to dental treatment.