



Oral health for adults in care homes



**Humber and
North Yorkshire**
Integrated Care Board (ICB)



Humber and North Yorkshire
Health and Care Partnership



**Why oral health is
important, NICE guidance
and CQC requirements**

Oral health is important.

Good oral health means:

Less pain and discomfort

Ability to speak and smile

Can eat a range of foods

Keep hydrated

Dignity and confidence

Reduced risk of infection

Improved healing

Reduced risk to general health as poor oral health is associated with other health conditions such as diabetes and pneumonia



Who's responsible for mouth care?



All care staff have a duty of care to provide mouth care if the person is unable to clean their own mouth



Mouth care is an important part of personal care - a clean mouth is essential

All care staff should be able to:

- Deliver mouth care and ensure your individuals are receiving the correct advice and support.
- Keep accurate records
- Help individuals to access routine, urgent and emergency dental care.

This may be a prompt or reminder if the individual is independent or requires assistance if they are unable to clean their own mouth.

Summary

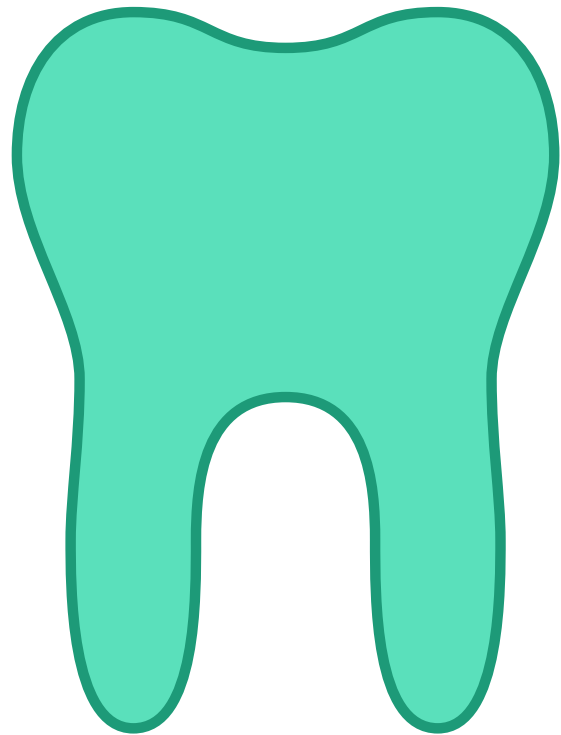
Why oral health is important.

Oral Health is important for general health.

The NICE guidance should be followed.

CQC will inspect on oral health and want evidence that staff are trained and following the NICE guidance.

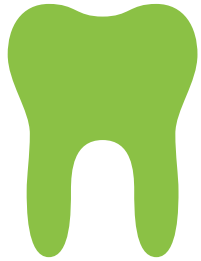
Good oral health helps individuals maintain their health and wellbeing



The causes of dental diseases

Summary

The causes of dental diseases



Gum disease is caused by
plaque



Tooth decay is caused by
sugary foods and drinks
interacting with plaque



Both tooth decay and gum
disease are preventable
through regular daily mouth
care and dietary measures

Knowing the cause of dental diseases will help you to care for your residents.

Prevention



Summary

Prevention – key messages for oral health

Brush teeth and gums twice a day.

Use a fluoride toothpaste containing 1350 - 1500ppm

The brush at bedtime is the most important

Clean all surfaces to remove plaque and food

Spit but do not rinse with water at the end of two minutes brushing

Mouthwash may be used at a separate time to brushing

Toothbrushing, diet and dental visits are the main steps towards good oral health, but may need some adaptations for older people

How to assess the mouth, plan and record mouth care

Start with an oral health assessment

This is a systematic way of asking questions and examining the mouth to make a person-centred care plan

Assess the mouth care needs of all individuals as soon as they start living in a care home, regardless of the length or purpose of their stay

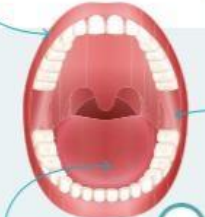
Use an Oral Health Assessment tool such as the one in the NICE guidance

Oral health assessment tool

Resident: _____ Completed by: _____ Date: _____

Scores – You can circle individual words as well as giving a score in each category (* if 1 or 2 scored for any category please organise for a dentist to examine the resident)
0 = healthy 1 = changes* 2 = unhealthy*

Lips:	Dental pain:	Natural teeth Yes/No:
Smooth, pink, moist 0	No behavioural, verbal, or physical signs of dental pain 0	No decayed or broken teeth or roots 0
Dry, chapped, or red at corners 1	There are verbal and/or behavioural signs of pain such as pulling at face, chewing lips, not eating, aggression 1	1–3 decayed or broken teeth or roots or very worn down teeth 1
Swelling or lump, white, red or ulcerated patch; bleeding or ulcerated at corners 2	There are physical pain signs (swelling of cheek or gum, broken teeth, ulcers), as well as verbal and/or behavioural signs (pulling at face, not eating, aggression) 2	4+ decayed or broken teeth or roots, or very worn down teeth, or less than 4 teeth 2
Oral cleanliness:	Dentures Yes/No:	
Clean and no food particles or tartar in mouth or dentures 0	No broken areas or teeth, dentures regularly worn, and named 0	
Food particles, tartar or plaque in 1–2 areas of the mouth or on small area of dentures or halitosis (bad breath) 1	1 broken area or tooth or dentures only worn for 1–2 hours daily, or dentures not named, or loose 1	
Food particles, tartar or plaque in most areas of the mouth or on most of dentures or severe halitosis (bad breath) 2	More than 1 broken area or tooth, denture missing or not worn, loose and needs denture adhesive, or not named 2	
Saliva:	Tongue:	Gums and tissues:
Moist tissues, watery and free flowing saliva 0	Normal, moist roughness, pink 0	Pink, moist, smooth, no bleeding 0
Dry, sticky tissues, little saliva present, resident thinks they have a dry mouth 1	Patchy, fissured, red, coated 1	Dry, shiny, rough, red, swollen, 1 ulcer or sore spot under dentures 1
Tissues parched and red, little or no saliva present, saliva is thick, resident thinks they have a dry mouth 2	Patch that is red and/or white, ulcerated, swollen 2	Swollen, bleeding, ulcers, white/red patches, generalised redness under dentures 2



Organise for resident to have a dental examination by a dentist
 Resident and/or family or guardian refuses dental treatment
 Complete oral hygiene care plan and start oral hygiene care interventions for resident
 Review this resident's oral health again on date: _____

TOTAL: _____
SCORE: 16 _____

With kind permission of the Australian Institute of Health and Welfare (AIHW). Source: AIHW Caring for oral health in Australian residential care (2009). Modified from Kayser-Jones et al. (1995) by Chalmers (2004).

Person Centered Care - Likes and dislikes



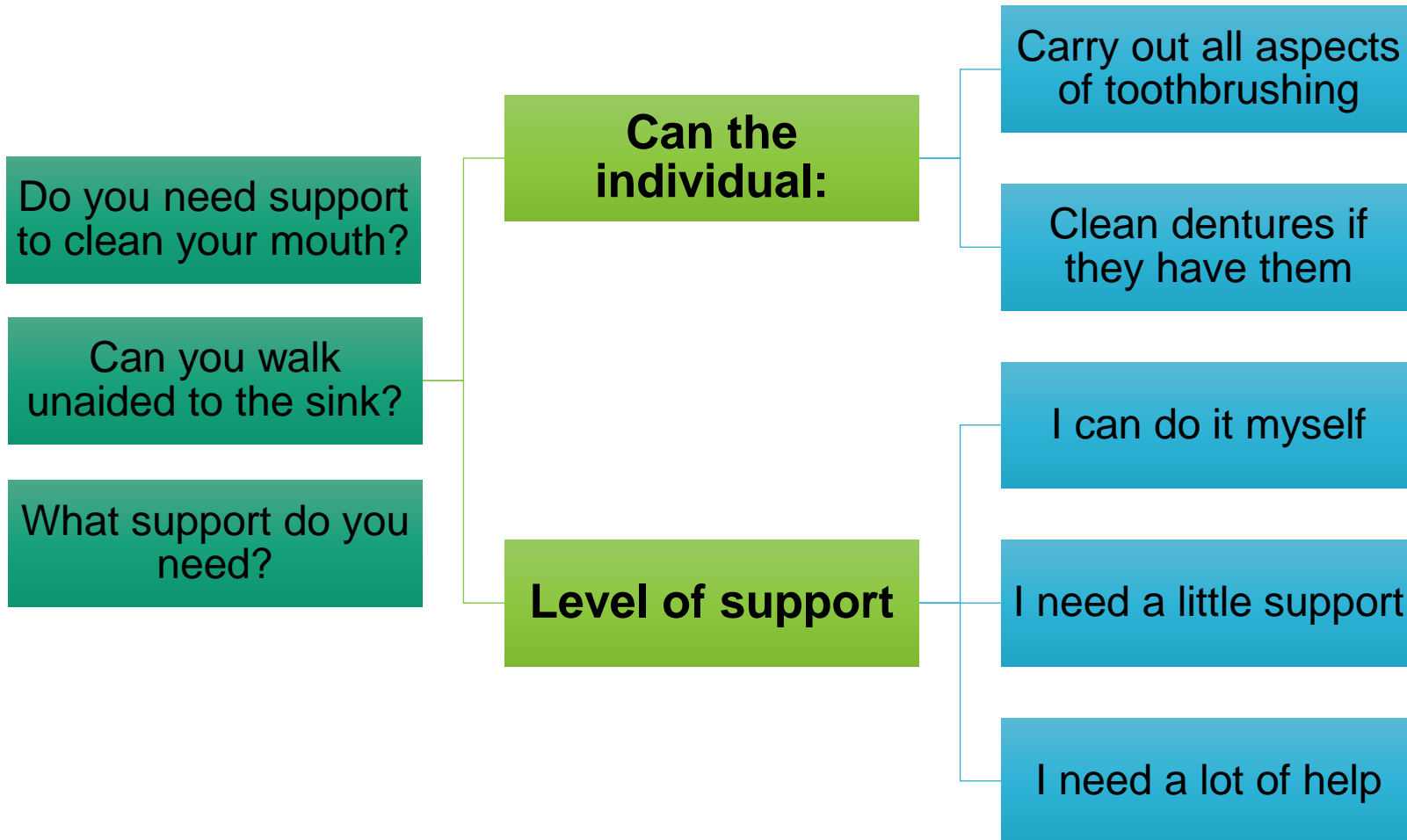
Lifestyle, health and other factors

There may be other relevant information regarding the risk to oral health such as:

- Diet – high in sugar (prescribed or personal preference)
- Tobacco and/or alcohol use

Level of support

Questions to ask the individual



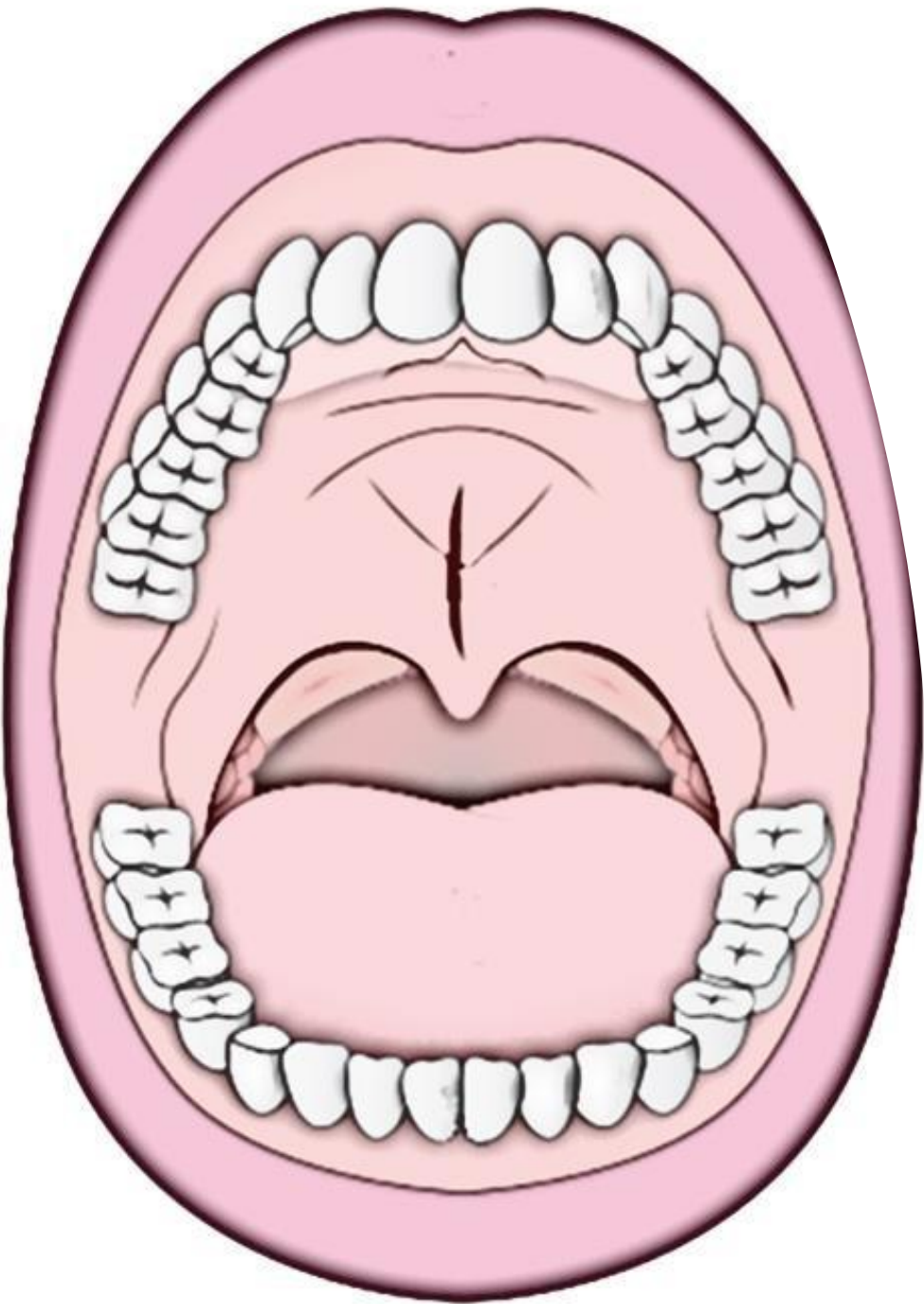
Your dentist

Questions to ask the resident

- Do you have a dentist?
- When did you last visit?
- Do you pay for dental treatment?
- How do you get to the practice?
- Do you have any pain?
- Have you recently had any problems with your mouth?

If concerned about anything or you find something when you check the mouth, make a note, tell your manager and consider referring to a dentist.





Oral Health Assessment: Check the mouth

Check
and
record

- Does the person have natural teeth? How many?
- Do they have dentures? If yes, are they able to wear them?
- What type? Full or partial? Upper or lower?
- Are there metal parts?
- Are they named?
- Where are these kept if outside the mouth?
- Then look inside and check the mouth

ORAL ASSESSMENT GUIDE	
Physical feature:	Look for:
Lips (and corners of mouth)	Cracks, bleeding, change in colour, lumps, or soreness.
Oral Cleanliness	Food debris, plaque, tartar, bad breath (halitosis)
Saliva	Pooling in floor of mouth, thick saliva, and dryness
Dental Pain	Verbal or physical or behavioural signs of pain
Tongue (Inspect top sides and underneath)	Look for unusual coating, ulceration, blisters, dryness, redness.
Natural Teeth	Decay, loose or broken teeth, any crowns or bridges, missing fillings.
Dentures	Remove dentures, check their condition, and check the skin underneath in the mouth.
Gingivae (gums)	Bleeding, redness, swelling, soreness.
Tissues - mucous membrane (the skin in the mouth)	Include the back of throat and inside the cheeks. Observe for unusual coating, ulceration, bleeding, discharge, or dryness.



A healthy mouth

- Teeth are clean
- The tooth surface is covered in enamel and free from tooth decay
- Any fillings are intact and there are no broken teeth
- The gums are pink and do not bleed when brushed
- The skin in the mouth (Mucosa) e.g. inside cheeks, under the tongue, is pink and moist, with no sign of ulcers, swelling, red or white patches
- The tongue is pink, symmetrical, has a slightly roughened surface and is moist with saliva.
- The lips are smooth, pink and moist.
- The floor of the mouth is moist with saliva

Dental pain

Signs of dental pain if unable to communicate

Rubbing – pulling
at a face

Facial
expressions –
clenching teeth

Body language -
huddled, rocking

Change in
appetite

Being more
restless, moaning
or shouting

Disturbed sleep

Leaving out
denture

Dependent on baseline behaviour



Care Plans

Individuals need a person-centred care plan, that addresses all their needs, personal preferences and clear information on the details of mouth care to be provided.

All care plans must be up to date and have review dates (usually monthly).

It should include:

- Details of mouth care (how, when and the person responsible)
- The products to use, toothpaste, toothbrush, denture cleaner and denture pot
- Level of cooperation and support needed
- Mobility and how the person will access the dentist
- The date and outcome of any visits to the dentist

Brushing and denture care record

It is important that you record when teeth and dentures are cleaned.

This gives evidence that care has been provided.

If it was not possible to clean the whole mouth, note which areas were cleaned so that the next carer can start to brush the teeth previously missed.

Remember to record if mouth care has been refused, this shows that you have tried and then write down what action was taken.

Summary

How to assess the mouth, plan and record mouth care



Assessing each individual allows you to plan their mouth care to meet their needs and pick up on any issues they may be experiencing



It is important to review the care plan regularly, as things can change quickly in the mouth and the person may not always be able to voice their concerns



Using documentation allows everyone to know if mouth care has been carried out and staff can retry if it was missed

Staff should know how to report oral health concerns and seek access to dental care

How to support individuals with their daily mouth care



Infection prevention and control

All staff should follow their local infection prevention and control guidance which include hand hygiene, cleaning of equipment and use and management of personal protective equipment.

Be prepared - get everything you need before you start.

Each individual should have a named toothbrush and individual holder, and/or a named denture brush/toothbrush for cleaning their dentures.

Rinse toothbrushes, then store upright in ventilated holder to air dry, placed in a clean cupboard to prevent contamination.

Individuals who carry out their own oral care should be encouraged or helped to ensure their oral care equipment is kept clean.

Mouth care for people with Covid-19



When providing mouthcare wear personal protective equipment (PPE) to prevent contact and droplet transmission.



They are more likely to cough when performing mouth care, be gentle, stand to the side or behind them, take breaks to allow the resident to rest and swallow



If possible, sit the person upright, do not use an electric toothbrush as this may cause droplets and splash



If the mouth is dry, encourage sips of fluid and use a dry mouth product if a person is confused, refuses, or resists care, stop and try again later.

Mouthcare is an important part of the overall care provided



Difficulty holding a brush

- Consider adapting the brush handle to make it easier to hold
- Try an electric toothbrush with a large handle - but note not everyone will cope with the sensation
- Or try a toothbrush that has three heads in one to surround the teeth



‘I need a lot of help’

- Explain the procedure appropriately to the individual
- Stand in a position that is comfortable for you and the individual, ideally to one side, and it's easier if the individual sits down
- Check they are comfortable and agree a signal to stop if they need a break
- Ask if there is something that the individual is concerned about
- Check the mouth before you start for ulcers or areas that may be sensitive or sore
- Be gentle, especially where you place your supporting fingers

Check the oral care plan before you begin

Cleaning a mouth that has dentures



- If dentures are not kept clean, individuals can get infections like oral thrush.
- Dentures should be left out overnight to let the mouth rest and reduce the risk of infection.
- If dentures are lost it may be difficult for a person to get new ones and they may not adjust to how these feel in their mouth.

Care for dentures

Remove any partial or full dentures, be careful especially if there are metal parts

Look out for red or sore areas caused by the dentures, and update the care plan if needed

Remember the mouth and any remaining teeth, will still need cleaning even if the person wears a full denture

Make sure any dentures are removed before any natural teeth are brushed

Refer to the oral care plan before you begin

Cleaning someone else's teeth

- Gently move the lips and cheek so you can see
- Try to start in the same part of the mouth each time and clean every tooth in order
- Angle the toothbrush towards the gums and include the part where the tooth meets the gum
- Brush the outside, inside and biting surfaces of the teeth in a methodical way – it should take about 2 minutes
- Include cleaning the tongue
- Be aware of any loose teeth and brush with care
- If gums bleed, continue to brush gently but thoroughly
- Encourage the resident to spit out after brushing and ideally not rinse
- Keep a record of any changes seen



Tips if mouth care is difficult

Communication is important: Be friendly, explain clearly, reassure, be positive

Break down the task – consider cleaning the mouth in smaller sections and repeat through the day (keep a record of what's been cleaned)

Use visual prompts/mime

Use two members of staff, one to support and the other to clean the mouth

Chaining: in which the carer starts the mouth care activity, and the person completes it

Hand-over-hand: in which the carer guides the activity

Distraction – find out what works – e.g. music, talking, having another object to hold

Try a different time of day

Dementia

- Individuals with Dementia may not be able to tell you if they are in pain
- Guide or prompt them and break tasks down into easily manageable steps
- If they don't seem to be coping, the pause and reassess



Communication strategies are vital

- Distressed or distressing behaviour represents an unmet need, try to understand the unmet need and acknowledge the feelings behind it
- Listen carefully and look for visual cues
- Give reassurance
- Use distraction

Person exhibits care-related stress/distress

Someone can refuse verbally or non-verbally

If they have capacity to make that decision then it is their right to make it, explain why mouth care is important and the possible consequences of their choice



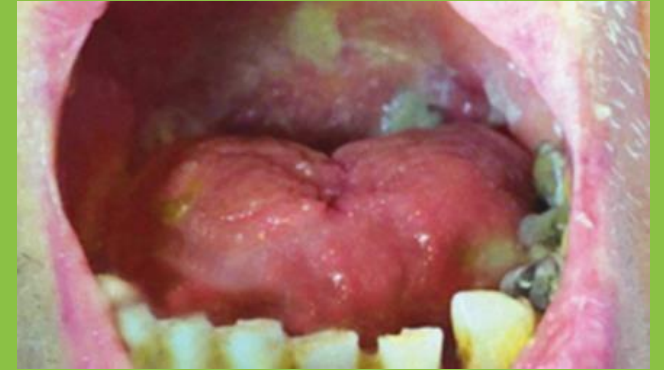
If they lack capacity, then investigate why they are refusing, then:

- Look for any signs of soreness, infection, broken teeth etc. which could make mouth care uncomfortable
- Come back and try later (try another time of day when the person is calmer and more receptive)
- Try another carer with whom the person is more familiar
- Explain carefully what you are going to do and why you are going to do it
- Be patient, take your time and be reassuring

Document and report if an individual persistently refuses mouth care

Dry mouth

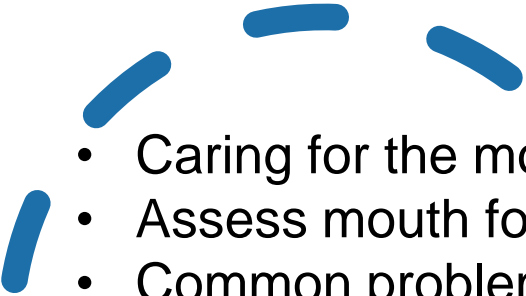
- A common problem often due to medication
- Causes difficulty in eating, speaking and swallowing
- May be a reason a person can't sleep
- Increases risk of tooth decay and may make it difficult to wear dentures



Mouth care

- Regular sips of water
- Use saliva substitutes or oral gels
- Increase frequency of mouth care
- Try mild mint or no taste toothpaste
- Consider seeking professional advice

Remember to keep lips moist

- 
- Caring for the mouth is important
 - Assess mouth for changes
 - Common problems – dry mouth, painful mouth, bad breath, alteration of taste, excess saliva
 - Aim to keep the individual comfortable
 - Mouth care can be carried out by family members, giving them greater involvement in the care of their relative

Mouth care

- Clean teeth using a soft, small headed toothbrush and Fluoride toothpaste after each meal and at bedtime
- Keep the mouth moist
- For people with swallowing problems, use a non-foaming toothpaste



Palliative and end of life care

Summary

How to support individuals with their daily mouth care

Promote independence, encourage and support the individual

Remember to consider the person's comfort, privacy and dignity

Be prepared and always explain what you are doing

Work with the individual's needs to adapt mouth care to get the most effective clean – perhaps clean the mouth in smaller sections, more frequently throughout the day

Keep a record of care provided and refer to a dentist if concerned



How to access dental care



The NICE Guidance states that the care home should make an appointment for the individual to see a dental practitioner, if necessary.

If the person doesn't have a regular dentist, NHS dentists can be found on the NHS website – www.nhs.uk/service-search/dentists/locationsearch/3

Individuals can be referred into the community Dental Service if they cannot be treated by a high street dentist and they meet the local referral criteria

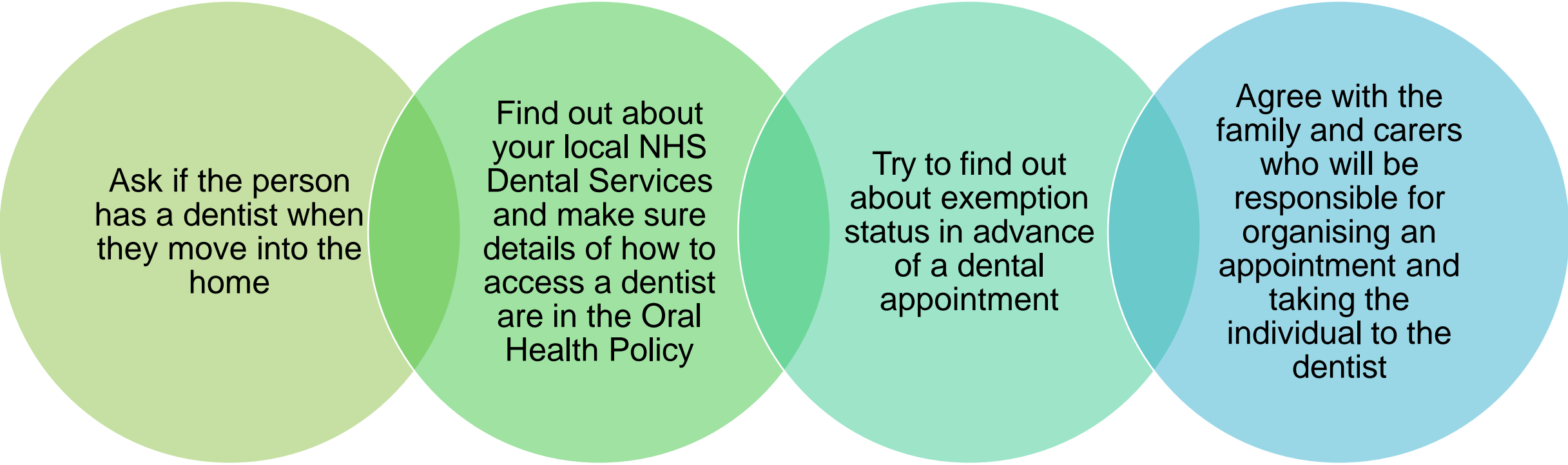
For urgent dental care seek treatment at their own dentist first. If this isn't possible, ring NHS 111 for advice and options

For emergency dental care seek help immediately in a hospital A&E department



Summary

How to access dental care



Ask if the person has a dentist when they move into the home

Find out about your local NHS Dental Services and make sure details of how to access a dentist are in the Oral Health Policy

Try to find out about exemption status in advance of a dental appointment

Agree with the family and carers who will be responsible for organising an appointment and taking the individual to the dentist

Signposting

We have collated the below resources produced by Department for Health and Social Care, Public Health England and National Institute for Health and Social Care Excellence which may help you support the oral health needs of residents in your care setting.

- [Oral health a quick guide for care home managers.pdf \(nice.org.uk\)](#)
- [NHS Vale of York Clinical Commissioning Group - Oral Health in Care Homes \(valeofyorkccg.nhs.uk\)](#)
- [Oral Health Information and Resources 2022](#)
- [Oral Health Training for Adults in Care Homes- Training Slides for Carers](#)
- [Oral Health Information Pack to Support Training](#)
- [Oral Health Assessment Tool](#)
- [Oral Needs Assessment and Care Plan \(2016\)](#)
- [Links to PHE Toolkit- Oral Health in Care Homes](#)
- [Oral Health- Quick Guide for Care Home Managers](#)