Keynotes

The Care Plan
Care at Night
Continence Care
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Dementia
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Emergencies
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Family & Friends
Listening & Talking
Mouth & Teeth Care

Privacy & Choice



ORAL HEALTH AND DEMENTIA

Research has found that women who didn't brush daily had a 65% increased risk of developing dementia over those who brushed their teeth three times daily. (Journal of the American Geriatrics Society Vol 60 issue 8 p1556-1563) Poor oral health care has also been linked to other illnesses and diseases such as heart disease.

Mouth & Teeth Care



It's not just about our smile. Good care of our mouths and teeth can make all the difference to our wellbeing. As we get older our needs change and whether we have our own teeth or dentures, daily cleaning routines and regular dental check-ups are more important than ever. Planning, supporting and promoting good oral care leads to a healthier and happier life.

SUPPORT FOR ORAL HEALTH IS A LEGAL REQUIREMENT

Identifying, assessing and managing risks relating to the health and welfare of services users is specified under the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014: No 9 Person centred care, No 12 Safe care and treatment

Keep smiling

Good oral health means that we enjoy our food and speak and socialise with ease. Some people may not be able to communicate or do not wish to let on that they are in pain until it becomes unbearable, so it is important to look out for warning signs. If a person stops smiling or talking or becomes withdrawn, is it because they are in pain? People with dementia may also become more agitated or aggressive due to the pain.

Food and drink

Notice if a person seems embarrassed when eating or prefers to eat alone or has difficulties chewing or swallowing. This may be because of a sore mouth, teeth or gums. If they take dentures out or start to dribble, is that because their dentures are painful and badly fitting? Without attention these problems can lead to restricted diets, loss of weight and and dehydration.

Health risks

Poor oral hygiene can increase risks to general health and has been shown to contribute to pneumonia, swallowing problems and dementia. Good hygiene can reduce common problems such as thrush, abscesses, ulcers and bleeding gums.

Dry mouth may be a side effect of some medication, such as antidepressants or anti-psychotic drugs, leading to the build-up of harmful bacteria in the mouth, limiting saliva and making dentures sore to wear.

It's important to support residents not just with regular check-ups but to help find the cause and get the right treatment for any problems or downturn in their oral health.

Plan to care

A resident's current dental health must be included in the health assessment when they move into the home. Their care plan should document how to provide the level of support they need, who their dentist is and record regular check-ups. Like all care, this should be regularly reviewed with the resident.

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A SENSITIVE MATTER

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Why do residents with dentures or partial dentures have better oral health than those with their own teeth? Why do many care workers dislike giving oral health care more than continence care? Such close-up care is not easy but the British Dental Association shows how, with training, carers can gain more confidence and knowledge and residents' oral health improves.

If a person does not have access to their own dentist then the local NHS specialist dental service should provide advice. The care home may also have a dentist who has this expertise.

Where the care plan includes good oral care planning and reviews, the oral health of residents was found to improve.

Confident caring

The best laid plans can only work if carers are confident enough to deliver them. Many local NHS specialist dental services provide training to carers both for general care and specifically for individuals with special needs and they can visit the home. The British Dental Association should also provide useful information including guidelines on good oral health care. Always seek expert help and advice if you are unsure about any potential oral health problem.

GOOD PRACTICE

David kept pushing the toothbrush

his teeth. Despite gently speaking

to David she could not persuade

him to open his mouth. Jo con-

away when Jo was helping him clean

tacted David's partner, Sacha, to ask

for help. David felt safe to let Sacha look and he noticed a chipped

tooth. Jo made an appointment for

the Community Dental Service to

visit and for Sacha to be there in

It helps to talk

- Encourage the person you care for to carry out their own mouth care and be ready to help when they need it.
- Talk to the person privately if you think they may be in discomfort or pain.
- Remember that relatives and friends may notice changes so listen to their concerns.
- → When the person needs your help, talk to them, make sure they are comfortable and know what you are doing.

Regular cleaning

- → It is important for people to brush their teeth themselves for as long as they can but they may need prompting and your assistance.

 Toothbrushes can be adapted and an electric toothbrush may help.
- Remove any partial or full dentures before brushing natural teeth.
- Follow an agreed routine for natural teeth and/or denture care.

While every resident is entitled to professional dental care, it is your knowledge and understanding of the person you care for and the day to day practical care you give which matters most.





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