3a) Oral Hygiene in Care Homes

Everyone should clean their teeth or dentures at least twice a day. This reduces the chances of future oral problems, meaning we can eat and drink comfortably and generally feel better about ourselves.

Older people may need assistance in brushing their teeth, and in some cases dementia or cognitive impairment may cause confusion and stress during the process. Residents may become agitated, making it even more difficult and time consuming than it already is. **Residents' overall wellbeing and staff safety** needs to be considered when attempting to clean the teeth of a resident who is refusing. These are a few steps and strategies that might make the process slightly easier:

Before Starting

Are there concerns about the resident's mental capacity? It is important to identify if they understand the process and value of oral care. Patients with capacity have the right to refuse oral care, those without may be confused about the process and need additional support to accept oral care.

Preparation



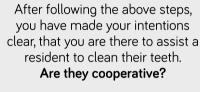
First, explain what you are about to do and check that the resident understands.



Next wash your hands wear disposable gloves.



Respect the residents privacy and dignity, make sure they are comfortable before you start.





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Use a pea sized amount of adult fluoride toothpaste.



Support the head and jaw, brush teeth and gums, continue even if gums bleed slightly.





Encourage them to spit out toothpaste, but not rinse.



Rinse toothbrush after brushing.

Try some of these Tips & Tricks

Included in the Oral Care in Care Homes Toolkit is a selection of cards, which you can either keep in a handy place or carry around with you during oral care routines. These cards contain tips and tricks that care home staff have used across the country to help provide better oral care. They are especially helpful for residents who might refuse care, are uncooperative or simply have trouble understanding.

Below are some examples that might be useful if the above steps haven't been successful.

Personalisation

1) Personal Routine



How often and when are teeth cleaned? Can this be adapted to the personal schedule of the resident?

They might have a preferred routine from before they were in a care home.

ine 2) Toothpaste



Is this something which could be adapted to the personal preference of the the resident?

Strong mint toothpaste could be replaced with a fruit flavoured fluoride toothpaste or milder/unflavoured alternative.

Environment



Try to maintain a quiet, peaceful environment and keep the number of people present to a minimum.

Excessive noise and distraction can be interpreted as threatening.

Tools

5) Toothbrushes



If the resident doesn't respond to normal toothbrushes it may be worth trying alternatives to find one they prefer.

Electric toothbrush heads are easier to get into the mouth. Consider an adapted handle or three headed toothbrush.

Communication

7) Initial Approach



Approach at the residents eye level. Explain what you are about to do before you do it.

Provide feedback and encouragement. Reflect on the positive aspects of having a clean mouth and fresh breath.

8) Dealing with Refusal



Residents might be tired or in pain so use the assessment tool to check for signs of pain. You might have to try again later.

If they seem scared, provide reassurance and give reasons for your actions: "I can see some food on your teeth..."

Physical Interaction



Place your hands over theirs, using them to guide the residents hands. This can be to hold the toothbrush or remove their dentures.

This can be encouraged but you cannot force a resident to brush their own teeth.

20) Opening the Mouth



Soften brush with warm water.

Gently touch the lips with the back of the brush and slowly twist to push back the lips and brush the outer surface of the teeth.

If these strategies become too time consuming for the morning time allotment, try returning later in the day. **Sometimes the slowest, gentlest way is the only way that works**.

Long Term Recommendations:



Shift patterns should work to enhance personal bonds between carers and residents.



Alternative short-term strategies for difficult patients like dental chews allow carers to use their time productively.



Use environmental cues to help residents understand what is going to happen (large images of toothbrushes on the walls).