# **Purpose of Assessment**

Assessments are conducted upon admission to identify individual oral hygiene needs. Determination of referral to resident's dental professional should be made at this time. The assessment of the mouth will be done by a nurse initially; and observed twice daily by caregivers when oral care is given.

Oral concerns such as thick mucous, coated tongue, dry mouth, dry cracked lips, irritated tissue, or pain, trauma, or infection require special care. The Oral Health Standard includes recommendations to address these concerns.

In the past, sponge topped toothettes were used to swab out the mouth. Toothettes are rough, and a soft toothbrush does an equally good job of the same task. Toothettes are not considered safe (risk of choking) not cost effective, and are not recommended for use in elder care.

# **Common Mouth Problems** may affect Resident's overall health.

- Gum disease & tooth decay are bacterial infections
- Having infected gums equal an open sore the size of your forearm
- Infections in the mouth can be spread through the blood stream to affect other parts of the body

New research links mouth infections to diabetes, heart and blood vessel disease, and pneumonia

# Who is at <u>increased</u> risk?

Residents with:

### **❖ Diabetes Mellitus**

Diabetics were 15 times more likely than non-diabetics to have lost their teeth. They are more at risk for gum disease. The higher the blood sugar levels the more bacterial growth. The higher the bacteria level the increased risk of oral disease.

### **\*** Heart and Stroke Disorders

Residents, in this category, that have gum disease, may increase their risk by

1-3 times for acquiring heart and blood vessel disorders.

# **\*** Respiratory Diseases

Mouth bacteria can be aspirated into the lungs. Oral disease can increase the risk of pneumonia 3-6 times. Pneumonia is the #1 killer in Care Homes. Risk increases with:

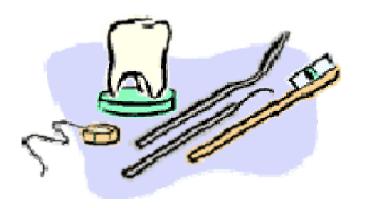
mes. Risk increases with
Poor health
Swallowing problems
Poor brushing
Feeding dependency
Dry mouth
Antibiotics

Natural teeth

# ORAL HEALTH & HYGIENE



INFORMATION FOR RESIDENTS & FAMILIES



Prepared for the
Residential/Complex Care
Facilities
PS # 262738 (09/2012)
Based on the
Fraser Health Integrated Oral
Health Standard

#### What is Oral Care?

Oral care is the assessing and cleansing of the mouth including: teeth, dentures, tongue, palate, and inside cheeks and lips. The Integrated Oral Health Standard, ensures that even those with complete upper and lower dentures, or just partial dentures, will get their mouth cleaned a minimum of twice daily. Prevention of infection, decay, and disease is the purpose of this oral health care. By providing oral care twice a day, caregivers may have a positive impact on the well being of residents and assist to:

- decrease oral malodour
- decrease social isolation
- decrease pain
- increase comfort
- improve self-esteem

# What Caregivers & Residents Can Do

## Natural Teeth Oral Care:

- **1.** Ensure oral care in the morning and evening is done
- **2**. Wash your hands before and after cleaning the mouth; wear gloves
- 3. With the Resident sitting upright, gently floss between the teeth; scrape with the floss in an up & down motion

- 4. Using a pea-sized amount of tooth paste and moist toothbrush, place the bristles at a 45 degree angle toward the gum line, and massage gently back and forth to remove the plaque from every tooth; rinse with water as needed
- **5**. Gently brush the roof of the mouth, insides of cheeks, and the tongue, with the soft toothbrush
- **6**. Observe and report any abnormality to a Licensed Practical Nurse or Registered Nurse

### **Basic Care for Dentures**

- 1. Dentures (complete and partials) should be rinsed after eating and brushed twice daily
- **2.** Brush dentures using tepid water, liquid hand soap (or toothpaste) to remove plaque, food debris, and prevent stains
- **3**. Brush inside surface of denture that rests against the soft tissue
- **4**. Rinse dentures well to remove soap or toothpaste and debris
- **5**. Before putting dentures back into the mouth, use a moist soft toothbrush to gently brush the tongue, roof of mouth, and inside cheeks
- **6**. Remove dentures before sleep and store in a clean dry container

\*Dentures will no longer soak in water; tablets that fizz will no longer be recommended. Leaving dentures overnight in still water where microorganisms may grow is not recommended.

# How can Family members help?

- 1) Find out what the Resident's oral health needs are by asking a nurse who will refer to the Resident's Care Plan, or the Activity of Daily Living Record, or Kardex
- 2) Participate in the oral hygiene program by ensuring there is:
- a soft toothbrush that is replaced every three months <u>for every</u> <u>Resident</u>
- toothpaste and floss for natural teeth
- denture brush & container for those with complete or partial dentures
- assist resident to receive annual dental exam
- 3) Assist with Oral Care

The researched facts indicate when bacteria in the mouth are kept to a minimum health complications are decreased. Good oral care is necessary for good overall health.

We are a team. You can be an important team player.