Industry Feedback Alert: Oral Health and Dental Hygiene

From Aged Care Quality and Compliance Group (Aged Care Complaints Scheme)

10 December 2013 (updated 12 May 2014 – contact details and URLs only)

Who is this alert for?

All Australian Government subsidised residential aged care providers.

What is an Industry Feedback Alert?

Industry alerts outline an issue we have identified through an analysis of our complaints data and other sources. They provide suggestions of areas that aged care providers may wish to review within their service. Alerts are not directions.

Issue

A number of complaints made to the Aged Care Complaints Scheme relate to poor oral health and dental hygiene.

Some of the issues care recipients experience as a result include:

- speech and swallowing difficulties
- inability to eat
- chronic infection
- bacteraemia
- impacts on appearance, self-esteem and social interactions
- pain and discomfort.

This alert outlines the rights and responsibilities of providers for maintaining a good standard of oral health and appropriate dental treatment for care recipients.

Observations
The onset of major oral health problems can take place before the care recipient moves into residential aged care. As residents become increasingly frail and dependent there is heightened risk of their oral health worsening in a relatively short time.

A growing number of care recipients in residential aged care have their natural teeth. In the past, many had dentures which were easier for aged care staff to keep clean. However, oral hygiene is still important whether a care recipient has their natural teeth or dentures.

**Under item 2.15 of the Accreditation Standards, it is required that an approved provider ensure care recipients’ oral and dental health is maintained.**

Approved providers must have effective infection control programs in place to ensure problems with oral and dental health are contained, as specified in item 4.7 of the Accreditation Standards.

Residents have the right to access quality care appropriate to their needs, including in relation to oral hygiene, under the Charter of Residents Rights and Responsibilities.

Better oral health care and maintenance in residential care is discussed in the **Better Oral Health in Residential Aged Care Professional Portfolio**. An overview of the suggested steps for suitable care and maintenance for a care recipient are as follows:

**Oral Health Assessment** – performed by a Registered Nurse (RN) or GP on admission and on a regular basis. This assessment should include the condition of the care recipient’s lips, tongue, gums, soft tissue, saliva, teeth and or dentures, oral cleanliness, dental pain and presence of odour.

**Oral Health Care Plan** - RN develops an oral care plan based on the findings of the health assessment – this will provide staff with the oral health care regime suitable for the care recipient. (i.e. brushing teeth and or dentures morning and night, high fluoride toothpaste on teeth, soft brush on gums, tongue and teeth, antibacterial product after meals, keeping mouth and lips moist, monitor sugar intake).

**Daily Oral Hygiene** – the care plan will assist nurses and care workers by outlining their responsibilities in providing and assisting with daily oral hygiene. Daily oral hygiene can assist in early detection of change that requires additional intervention from either a medical practitioner and or dentist.
**Dental Treatment** – the referral for more detailed dental examination and treatment will be made on the basis of the oral assessment and/or the findings of staff who assist, supervise or provide the daily oral hygiene.

When facilitating access to a dentist, service providers should:

- obtain consent from the care recipient, guardian or representative
- consult the local public dental service provider and the Australian Dental Association for information on dentist availability
- make suitable arrangements for obtaining health practitioner services for the care recipient
- understand the care recipient’s rights under the *Aged Care Act 1997*.

Additionally, access to a dietician may also be helpful.

However, the cost of these services must be borne by the care recipient (or their representative). Similarly, the Approved Provider does not have to provide transport to dental services. This too is the responsibility of the resident.

**Suggestions for your consideration**

While a care recipient’s oral health and dental hygiene must be handled on a case-by-case basis, you should consider:

- Better Oral Health in Residential Care Professional Portfolio, which includes an oral health assessment toolkit for older people, oral health planning guidelines and dental referral protocol
- trends in a care recipient’s eating patterns. It can be difficult for service providers to give food to care recipients if they do not want to eat due to discomfort
- regular access to a dentist for all care recipients, when consent is given
- care recipients with impaired cognition—they may not be able to open their mouths to maintain adequate oral hygiene
- key personnel being made aware of this alert.

**Contact**

Aged Care Complaints Branch

Aged Care Quality and Compliance Group
Email: agedcomplaintscomms@dss.gov.au (link sends e-mail)

Online: Visit the Aged Care Complaints Scheme website.