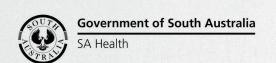


Building Better Oral Health Communities

Better Oral Health in Home Care

Dementia and oral care





Building Better Oral Health Communities Better Oral Health in Home Care

Prepared by

Ms Adrienne Lewis, RN, BN, MNStud, MPM,

Project Director, SA Dental Service

Ms Eliza Manuel, RN, BA, LLB,

Project Manager, SA Dental Service

With acknowledgement

Dr Peter King, BDS, MDS, BA,

Geriatric Dentistry Specialist

Dr Dymphna Cudmore, BDS,

Statewide Lead Clinician, SA Dental Service

Dr James Grealy, RN, PhD,

Dementia Care Consultant

Ms Glenda Whiting, RN, RM, BN, MBA, MEd,

Principal Lecturer - Health, TAFE SA

This resource was developed by the Building Better Oral Health Communities Project which was funded by the Australian Government Department of Social Services under the Encouraging Better Practice in Aged Care (EBPAC) Initiative (2012-2014).

The Building Better Oral Health Communities Project was led by SA Dental Service in collaboration with:

- Helping Hand Aged Care Inc SA
- Aboriginal Elders & Community Care Services Inc SA
- BaptistCare NSW & ACT
- Hunter New England Oral Health, NSW
- The University of Adelaide, SA School of Nursing & ARCPOH.

Disclaimer

While every effort was made to ensure the information was accurate and up to date at the time of production, some information may become superseded as future research and new oral hygiene products are developed. In addition, the information in this resource is not intended as a substitute for a health professional's advice in relation to any oral health issues of concern.

Creator

Lewis, Adrienne, author.

Title

Better oral health in home care / prepared by: Adrienne Lewis, Eliza Manuel.

ISBN

9781742437323 (ebook)

Notes

Includes bibliographical references.

Subjects

Older people—Dental care—South Austraila Older people—Health and hygiene—South Australia Mouth—Care and hygiene—South Australia

Other Creators/Contributors

Manuel, Eliza, author,

Building Better Oral Health Communities Project. South Australian Dental Service.

Dewey Number

362.197600846

For more information

South Australian (SA) Dental Service GPO Box 864 Adelaide, SA 5001 +61 8 8222 8222

Email: sadental@health.sa.gov.au



www.ausgoal.gov.au/creative-commons

© SA Dental Service,

Central Adelaide Local Health Network 2014

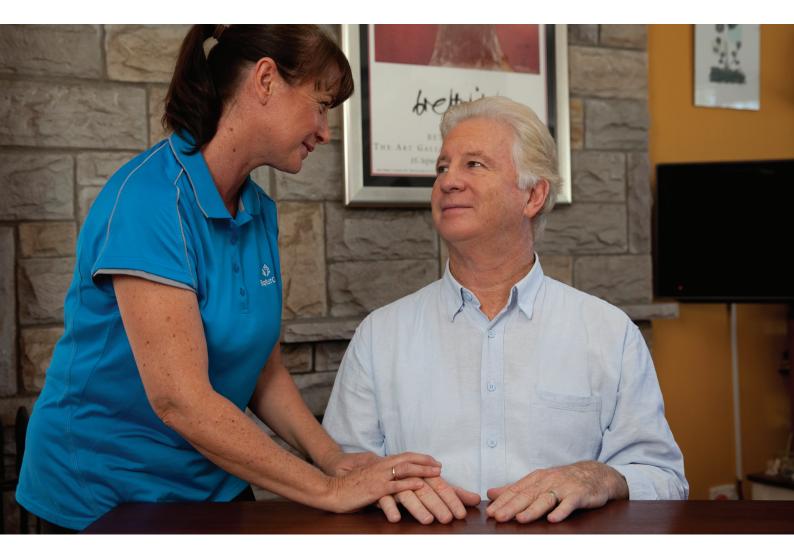
If you want to alter, transform or build upon this work, you are invited to contact SA Dental Service.

Design by We're Open

www.wereopen.com.au

Dementia and oral care

Some older people, especially those suffering dementia, may behave in ways that make it difficult to provide oral care. To encourage an older person's independence and get the best outcome for their oral health, it is important to think about their individual needs and how they can be supported to participate in their self-care. Routines are familiar and help reduce anxiety. In this way, establishing daily oral care as a pattern can help make it happen.



Better oral health in home care

Encourage and support clients by:

- communicating effectively
- choosing the right environment
- promoting participation
- responding appropriately to behaviours.

This is important because:

• helping people with dementia feel safe, secure and cared for will encourage participation during oral care.

Effective communication







Caring attitude

Focus on building a good relationship before you start oral care.

People with dementia are often sensitive to other people's emotions.

Use a calm, friendly and nondemanding manner.

Smile and give a warm greeting using the client's preferred name.

Continue to use their name at the start of your sentences.

Allow plenty of time for the client to respond.

Body language

Be mindful that people with dementia often pick up non-verbal cues easily such as body language, posture and facial expressions.

Approach from the diagonal and at eye level.

By standing directly in front you can look big and are more likely to be grabbed or hit.

Touch a neutral place such as the hand or lower arm to get attention.

Position yourself at eye level and maintain eye contact if culturally appropriate.

Be aware personal spaces can vary.

Speak clearly

Speak at normal volume and at the client's pace.

Always explain what you are doing.

Use simple words and short sentences.

Ask questions that require a 'yes' or 'no'.

Give one instruction at a time.

Use positive feedback.

Use words that impart an emotion; for example 'lovely' or 'sore' mouth.

A lack of response, signs of frustration, anger, disinterest or inappropriate responses can all suggest the communication being used is too complex.

Right environment





Best time

Establish a daily routine to reinforce the pattern of oral care.

Think about what is the best time for the person.

It doesn't have to be first thing in the morning and last thing at night.

The best time is when the client is relaxed and able to focus on the task.

Best location

Dementia can cause perceptions to change and the bathroom may no longer be the best place for oral care.

A person with dementia may not be able distinguish a white basin surrounded by white tiles.

Other places, such as the kitchen table, may be a better choice.

Cues to help you decide the best place are:

- Can the client sit or stand at the basin?
- Can they easily reach to pick things up and can they spit into the basin?
- Can you fit into the bathroom at the same time?
- Can the client see your face?

Setting up

If the bathroom is still the best place, make it feel safe and comfortable.

- Do you need to warm the room?
- Is the lighting bright enough?
- Colourful, familiar objects such as towels, a plant, a brightly-coloured toothbrush will help contrast the basin against the surroundings.
- Turn off the fan, add a thick, nonslip bath mat to help absorb sound.
- If seated, a chair with arms gives more security and stability.

Promoting participation







Overcoming fear

Having another person cleaning your teeth is a very intimate act.

You may need to spend more time building a trusting relationship.

Try gentle touching in a neutral place, such as the hand or lower arm.

Use calm, rhythmic movements to help them relax.

Once the client is relaxed, try stroking their face gently and smoothly.

This will help create a sense of comfort and safety and help the client accept oral care.

Bridging

Bridging aims to engage the person's senses (especially sight and touch) and to help the person understand the task you are trying to get them to do.

Undertake this method only if the client is engaged with you.

Describing and showing the client their toothbrush may be enough cues for them to brush their own teeth.

Give them the toothbrush to hold.

Find out if they are left or right-handed so the toothbrush is in the correct hand.

Also try sitting opposite the client and mimicking brushing your own teeth while the person mimics you.

Chaining

This technique is used if bridging doesn't work.

If the client does not initiate brushing, gently bring the person's hand holding the toothbrush to their mouth and describe what they need to do, while encouraging them to do it themselves.



Hand over hand

If chaining doesn't work, place your hand over the client's hand and start brushing so you are doing it together.

This gives the client some control while you guide them to make sure they are cleaning their teeth effectively.



Distraction

If the hand over hand method is not successful, place a toothbrush or a familiar item (such as a towel, cushion or activity board) in the person's hands while you use another toothbrush to clean their teeth.

Familiar music may also be useful to distract and relax the client.



Try again later

If your relationship with the client is not working and attempts at oral care are not going well, then tell the person you will leave if for now. Try again later.

Think about why this might be happening.

If resistance to oral care is an ongoing problem report this to the care coordinator.

Responding to changed behaviour

Changed behaviour	What to do
The client has delusions. The client may think: • you are not who you say you are • you are trying to hurt or poison them • they have cleaned their teeth already.	Mime what you want the client to do. Allow the client to inspect the items. Take the client to another room; for example, move from the bedroom to the bathroom.
Changed behaviour	What to do
The client grabs out at you or grabs your wrist.	Pull back and give the client space. Ask if the client is OK. Offer the client something to hold and restart oral care. If grabbing continues, stop the oral care activity and try again later. In the meantime, offer the client an activity they enjoy.
Changed behaviour	What to do
The client hits out.	Think about what may have caused the client's behaviour. Was the client startled? Did something hurt? Was the client trying to help but the message was mixed? Was the client saying 'stop'? Did the client feel insecure or unsafe?
Changed behaviour	What to do
The client walks away.	Allow the client to perch rather than sit. Perching is resting the bottom on a bench or table.
Changed behaviour	What to do
The client does not open their mouth.	Stimulate the client's root reflex with your finger by stroking their cheek in the direction of the mouth. Place toothpaste on the top lip to prompt the client to lick their lips.

Responding to changed behaviour (continued)

Changed behaviour	What to do
The client keeps turning their face away.	Reposition yourself. Sit the client upright. Stimulate the client's root reflex with your finger by stroking their cheek in the direction of the mouth. The client's head will turn to the side which is being stroked.
Changed behaviour	What to do
The client bites the toothbrush.	Stop moving the toothbrush. Ask the client to release it. Distract the client with gentle strokes to the head or shoulder, using soothing words.
Changed behaviour	What to do
The client holds onto the toothbrush and does not let go.	Stroke the client's forearm in long, gentle rhythmic movements as a distraction and to help relax the client.
Changed behaviour	What to do
The client spits.	Ensure you are standing to the side or diagonal front. Place a face washer or paper towel on the client's chest so you can raise it to catch the spit.

