



Better Oral Health in Residential Care

Staff Portfolio

Education and Training Program

Module 3: It Takes a Team Approach to Maintain a Healthy Mouth



Government of South Australia
SA Health



Better Oral Health
in Residential Care

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- Tanunda Lutheran Home, South Australia
- Resthaven –Craigmore, South Australia
- Helping Hand –Parafield Gardens, South Australia

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was made to ensure the information was accurate and up to date at the time of production, some information may become superseded as future research and new oral hygiene products are developed.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.

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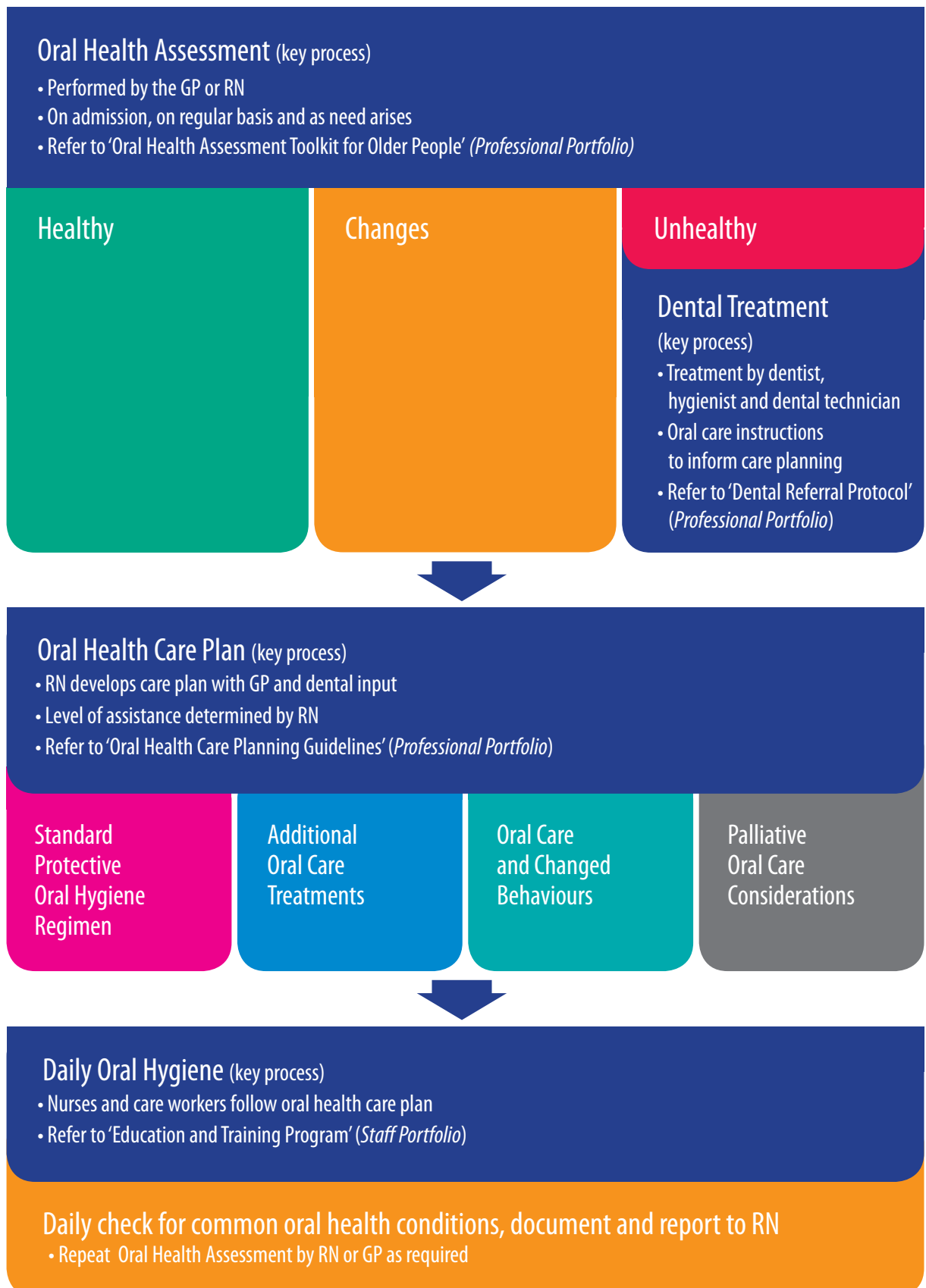
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Module 3

It Takes a Team Approach to Maintain a Healthy Mouth

Better Oral Health in Residential Care Model

Better Oral Health in Residential Care requires a team approach to maintain a resident's oral health care. GPs, RNs, nurses, care workers and dental professionals have responsibility for one or more of the four key processes. This flowchart illustrates the Better Oral Health in Residential Care Model.





Better Oral Health Reflective Practice

Module 3 brings together the content from Module 1 (knowledge) and Module 2 (skills) in a guided learning approach conducted in small groups.

The module uses clinically-based situations and guided questions to encourage reflection on and application to everyday practice.

The aim is to help aged care staff members to address situations they meet in their everyday practice and to enhance evidence based practice for better oral health in residential care.

Guided Questions

- think about the scenario presented
- respond to the questions provided
- identify what knowledge and skills you have already to respond to this scenario.

Working in Groups

When working in small groups:

- take time to think and reflect before responding
- work together and help one another
- share ideas and respect each other's views
- it is OK to disagree but do not be judgmental
- speak one person at a time.

Oral Health Scenario – Part 1



Description

Mr Osmond is a new resident.

He is a frail, well mannered and cooperative gentleman.

Mr Osmond has settled well into his new surroundings.

He has a good appetite and loves sweet foods and treats. He likes to drink coffee with two teaspoons of sugar.

Mr Osmond is sometimes forgetful but he is able to manage his activities of daily living with standby assistance and occasional prompting.

The GP has recently put him on several new medications.

On admission, the RN performed an Oral Health Assessment. Mr Osmond has natural teeth and an upper partial denture. His oral health was found to be 'healthy' and a referral to a dentist was not needed.

Based on this, the RN wrote up an Oral Health Care Plan for Mr Osmond.

Guided Questions

What information about Mr Osmond is relevant to his oral health care?

What oral health care should you give to Mr Osmond?

Oral Health Scenario – Part 2



Description

Several months have passed.

Mr Osmond's behaviour has changed. He has recently become confused and uncooperative.

The GP is treating him for a suspected urinary tract infection.

Mr Osmond is not cleaning his teeth and he won't let you help him. If you try, he won't open his mouth.

When Mr Osmond is like this it is easier to leave him and not do his oral hygiene care. This seems to be happening a lot. Other staff members have been doing the same and leaving out his oral hygiene care.

You notice his breath smells and it is unpleasant to be around him.

You also notice Mr Osmond is having difficulty eating his food.

Guided Questions

What could be happening here?

How might this have happened?

What could you do to encourage Mr Osmond to open his mouth?

Oral Health Scenario – Part 3



Description

You have been able to get Mr Osmond to open his mouth and you take out his partial upper denture which has metal wires.

You notice his denture is very dirty and one of the metal wires is broken.

When you look at Mr Osmond's mouth, you see the part of the mouth where the partial denture has been is red and sore.

When you brush his teeth his gums begin to bleed.

Guided Questions

Who should know about this?

What else should you look for and report?

What could happen to Mr Osmond if his oral health gets worse?

Oral Health Scenario – Part 4



Description

You assist the RN to do an Oral Health Assessment.

The RN notifies the GP and arranges for Mr Osmond to see a dentist.

Treatment is prescribed and the Oral Health Care Plan is updated.

Guided Questions

What additional oral care could be required?

List the various ways you can apply the different types of oral care products?

List the types of aged care staff and health professionals who have been involved in the oral health care of Mr Osmond.

Conclusion



Facts

As residents become frailer, they are at high risk of their oral health worsening in a relatively short time if their daily oral hygiene is not adequately maintained.

A simple protective oral health care regimen will maintain good oral health.

Better Oral Health in Residential Care Model

Better Oral Health in Residential Care requires a team approach to maintain a resident's oral health care. GPs, RNs, nurses, care workers and dental professionals have responsibility for one or more of the four key processes.

1. Oral Health Assessment

This is performed by the GP or RN on admission and, subsequently, on a regular basis and as the need arises.

2. Oral Health Care Plan

RNs develop an oral care plan which is based on a simple protective oral health care regimen:

- brush morning and night
- use high fluoride toothpaste morning and night
- use a soft toothbrush on gums, tongue and teeth
- apply antibacterial product daily after lunch
- keep the mouth moist
- cut down on sugar intake.

3. Daily Oral Hygiene

Nurses and care workers maintain daily oral hygiene according to the oral health care plan.

4. Dental Treatment

Dental referrals for more detailed dental examination and treatment are made on the basis of an oral health assessment. It is recognised frail and dependent residents may be best treated at the residential aged care facility.

