# **O1 Background**



A clean mouth is a basic human need. When someone is unable to care for their own mouth and teeth they should be offered help to do so. All services supporting adults should provide high quality daily mouth care that meets the individual's needs and preferences. Tooth decay and gum disease are the most common UK dental problems and are largely preventable. Poor oral health can affect a person's ability to eat, speak and socialise, can lead to pain, invasive treatment, if left untreated can seriously damage health, quality of life and overall wellbeing. In Lancashire, a person with dementia, was in severe pain because their teeth were not cared for. The person was given painkillers, rather than dental care. As a result of this, 07 the person's health, quality of life and wellbeing were compromised.

## Questions

What does this guidance mean for your service?

Anything you need to change in your practice?

How will you engage with and identify staff training needs?

How will you talk to service users /family representative about this?

How will you implement any changes?

How will you monitor?

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•In emergency seek advice from NHS 111

•Urgent Care Services will also offer advice and treatment for urgent needs (pain relief, swellings, trauma or bleeding )

### **Oral health** care for adults 03 with care and support needs 06

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in the person's care plan and review regularly

•With consent, dentures

support with their oral health care.

whether a MCA(2005) assessment is

Consider the reason for the refusal and

required and/or consider referral in relation to

•Consider having an oral health care champion

• Make links with local dentists to support your service

and discuss how you will get urgent dental care if needed

dentistry service

self-neglect procedures

in vour service

should be marked by the local

•Know what to do if a person refuses

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# Why it matters 02

Failure to meet individuals' oral health needs is a safeguarding concern in relation to neglect or omission of care.

The purpose of this briefing is to promote good practice in line with the NICE Guidance- 'Oral health for adults in care homes' (www.nice.org. uk/guidance/ng48.) (July 2016). This guidance is relevant for providers of both care homes, nursing homes and domiciliary care.

Evidence shows that if care providers are clear about their duty of mouth care this led to improved oral health.

# Information

#### **Risk factors**

- Poor diet, alcohol and tobacco (take account in care plans)
- Poor mouth care (can cause aspiration pneumonia, gum disease, bad breath, tooth loss, abscesses and pain)

 Individuals with communication difficulties

Individuals with dementia

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## What to do

- Ensure that your service has a comprehensive oral health policy, including proactive actions to protect oral health of service users. ( a requirement of CQC regulation)
  - •Assess oral health needs at the start of service using p21 of NICE guidance
    - Obtain the name and address of the dentist (or enable access to a dentist) and the last dental appointment Include oral health routines

