

Oral Care



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Toothbrush

A soft / medium, small-headed toothbrush suits most people.

- Replace at least every 3 months or sooner, when its deformed / splayed, as this decreases their effectiveness in removing plaque
- Very soft toothbrushes are kinder to the soft tissues & are often used in palliative care
- Use a brush with a large handle for those with limited dexterity. Its helps to have a firm, comfortable grip. Handles can be adapted to improve the grip - talk to occupational therapist or manager for advice
- Electric toothbrushes are useful for who cannot grip a manual toothbrush
- Powered brushes reduce plaque and gingivitis more effectively than a manual brush
- Heads on powered brushes do wear out & need to be replaced regularly

Brushing natural teeth:

When explaining what you are doing, remember to consider factors such as the Service User's personal preferences and consider whether they can understand your explanation.

1. Explain what you are about to do & ensure they have understood.
2. Find a comfortable position for the Service User and support their head. It's best not to approach them from behind. Try different ways to do this, to suit the individual
3. Use a pea-sized amount of fluoride toothpaste. If they struggle because of poor dexterity, coordination, or visual impairment, to squeeze this onto the toothbrush it may be easier for them to squeeze it into their mouth.
4. Begin on the upper or lower teeth. Work round the outside first, gently scrubbing each tooth for a count of six
5. When you finish the outside, work your way back on the inside, cleaning each tooth (as above)
6. Clean the chewing surfaces
7. Start again on the other jaw, repeating instructions 4–6 above
8. Even if the gums bleed slightly, continue to brush them. The bleeding is usually the result of plaque build-up and only continued effective brushing will improve gum health

9. Allow the Service User to spit out, and prompt them if required. Only rinse the brush once toothbrushing has been completed. Encourage them not to rinse out afterwards – it’s good to have a small residue of the toothpaste on the teeth for prevention
10. If cooperation is limited, brush different areas of the mouth at different points of the day and start with a different area each day

Reluctant to Brush Teeth:

- If the Service User becomes distressed & oral care can’t be provided, try to find out why they are refusing.
- Document their refusal & explore techniques to encourage them to accept help & reduce stress / distress.
- Record successes and disappointments and report to your line manager
- If the Service User repeatedly refuses oral care over a week or shows signs of oral problems (for example bad breath, drooling, trouble eating) inform your manager.
- You could also speak to family members, with the permission, they may have ideas.

This information is to help staff follow the guidelines set out in the Adults with Incapacity (Scotland) Act 2000 when residents’ refuse oral care.

Procedure for All Oral Care:

Remember to:

prompt	encourage	support
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- Encourage them to manage their own oral care
- Ensure they have the correct products
- Promote self-care as much as possible

Assistance with oral care:

- Always respect their comfort, privacy & dignity
- Wash your hands thoroughly & apply PPE
- Explain the procedure to the Service User
- Ensure the water, is drinking water
- Rinse toothbrushes well after use & store in the upright position or individual ventilated holders
- Don’t expose brushes to contamination from a flushing toilet or dirty hands
- Denture containers must be emptied, washed, rinsed, dried and stored - when not in use. If the Service User is independent with oral care, encourage them to manage this aspect of the care too