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Oral Care for people with disability

Resource for disability support workers



Family &
Community
Services

Why are we here today?

To talk about **ORAL CARE**

- + What is oral care?
- + Why is oral care so important?
- + What are the effects of poor oral care?
- + What is your role as a support worker?
- + Strategies to help you provide good oral care for the people you support.



ORAL CARE: What is it?

Keeping your mouth **healthy!**

Caring for your mouth and body.

What does this include?

+Teeth, gums, tongue, saliva.



It's not just about brushing teeth!

Steps to good ORAL CARE...*

1. Brushing teeth and/ or gums at least twice a day
2. Cleaning the tongue twice a day
3. Flossing between the teeth twice a day
4. Mouth rinsing with water and/ or mouth wash

*If the person you support has swallowing difficulties, talk to their GP about the need for a Speech Pathologist and/ or Dentist (to help develop safe oral care strategies).

Steps to good ORAL CARE *continued...*

5. Drinking water after every meal
6. Limiting unhealthy snacks & eating well
7. Regular visits to the Dentist

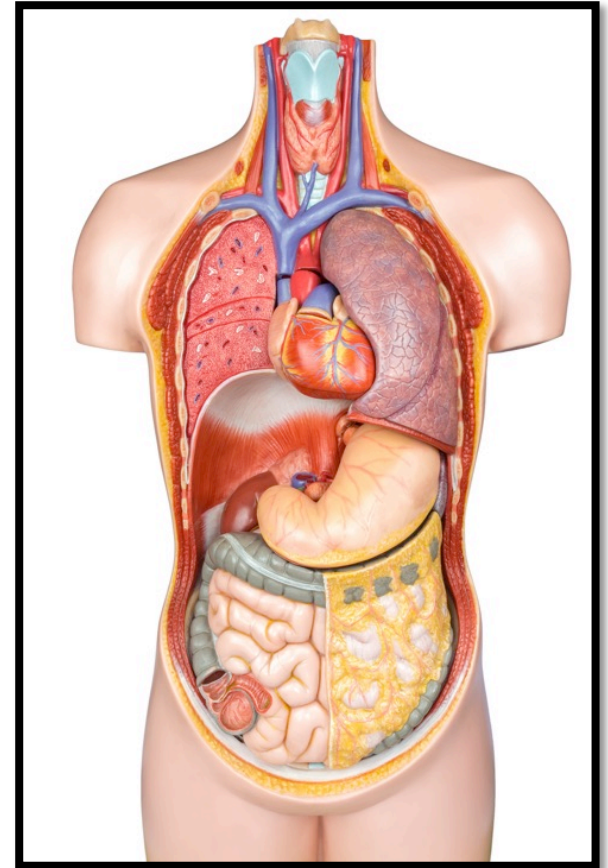
Remember... the people you support should visit the dentist every 12 months, or earlier if they experience tooth ache or other oral concerns.



Why is it so important?

- + Things in our mouth enter our bodies: air, food, drink, saliva and *bacteria...*
- + Our mouth is important for
 - Eating, drinking, talking, smiling
 - Interacting with others
 - Absorbing some medication
- + *An unhealthy mouth = An unhealthy body*

Oral healthcare is especially important for people with disability- **EVEN IF THEY DON'T HAVE TEETH**



People with Intellectual Disability

Compared to the general population, people with Intellectual Disability may:

- receive **less support** (i.e. access to dental services)
- have a **higher prevalence** of decayed, missing, and filled teeth
- have difficulty **understanding** why oral care is important
- have difficulty providing their **own oral care**

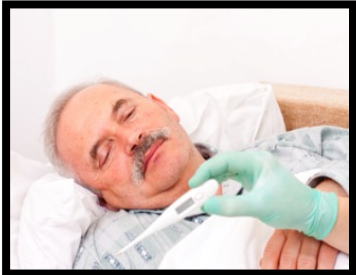


People with Intellectual Disability

- May have **communication** difficulties, preventing them from seeking appropriate support and services
- May have **physical and behavioural** difficulties that can prevent them from receiving the best oral care
- May have difficulty **managing pain**, which may trigger behaviours of concern

The effects of poor ORAL CARE

The 5 S's



Sick



Sore



Skinny



Smelly



Sad

1. Sick

Sick teeth

- **Plaque:**
 - + Soft bacteria that grows on teeth
- **Tartar:**
 - + A build up of yellow/brown plaque
- **Tooth decay:**
 - + Rotten teeth



1. Sick continued....

Sick gums

- **Gingivitis:**
 - + Inflammation of the gums

- **Gum disease/ infection
(Periodontal disease):**
 - + Causes teeth to fall out
 - + Causes gums to pull away from teeth



Having a sore mouth, broken or missing teeth makes it very difficult to eat a nutritious healthy diet

1. Sick continued....

+ Sick body

- + **Aspiration:** Aspiration is when food, drink, toothpaste and/or bacteria from the mouth **enter into the lungs**. This can lead to severe complications such as:
 - Spread of infection to the bloodstream and other parts of the body.
 - Aspiration pneumonia (a breathing condition due to lung infection).
- + **Heart disease:** People with unclean mouths are twice as likely to develop heart disease than those with clean mouths. Heart disease is very serious, and **can be fatal**.

1. Sick continued....

- + **Stroke**: People with unclean mouths can be at risk of having a stroke. This is because the germs in an unclean mouth can enter the blood stream and **cause clots in the blood**. Blood clots cause strokes.
- + **Diabetes**: Oral infections (bacteria) can **increase blood sugar**. People with diabetes are prone to infections.
 - + This means people who have diabetes or who are borderline diabetic will have difficulty managing their sugar levels.
 - + This will have adverse effects on their health.

2. Sore

- + **Tooth sensitivity**: causing **pain**, discomfort and decreased enjoyment of food, e.g. sensitivity to hot and cold foods and drinks such as, ice-cream and hot or cold water.
- + **Pain when brushing**: leading to **refusal** to brush teeth or have teeth brushed by someone else.
- + **Responding to sensation**: be aware that individuals may have **different responses to pain** and altered sensation.

2. Sore continued...

- + Pain and discomfort may trigger **behaviours of concern**.
- + If there are known risks to the person you are supporting or to the support workers the **risk should be documented** in an **oral care plan**.
- + It is also important to **include positive strategies** if known; to minimise risk to the person and support worker.



3. Skinny

- + **Pain when eating:** Not wanting to eat or drink because **mouth/ teeth are sore.**
- + **Difficulty chewing:** because teeth are loose or missing, making **eating slow** and increases the risk of choking.
- + **Difficulty absorbing nutrients:** The first part of **digestion starts in the mouth.**

4. Smelly

- + **Bad breath:** caused by bacteria in the mouth. The bacteria may have an impact on the persons overall health.
 - Clean the tongue and in between the teeth

*Bad breath can be embarrassing
and isolating*



5. Sad

- + Excluded by peers (left out of social interactions)
- + Visually unpleasant – Discoloured or missing teeth
- + Don't want to spend time with others
- + Others may not want to spend time with them
- + Feeling embarrassed
- + Pain



Your role as a support worker

- + Encourage and practice **good oral hygiene** with the people you support.

Good oral hygiene =
a good shift at work &
good health outcomes for
people with disability



Challenges, Ideas & Problem Solving

As a support worker, you may face challenges and risks associated with Oral Care in your work place.



Risks associated with Oral Care



There are significant risks associated with Oral Care, which vary from person to person. Some risks include biting, choking and cross- contamination.

It is important that each person you support has an Oral Care plan to ensure they have a safe consistent approach used by all support workers. *See example on slide 36.*

Ensure you read and understand the persons' supporting plans prior to performing oral care. Plans may include:

1. Oral care plan;
2. Nutrition and swallowing;
3. Risk management plan;
4. Meal time management plan;
5. Intervention and support plan if required.



CHALLENGE: the person doesn't like the dentist

SOLUTION:

- + **Pre visits** to the dentist before appointments/treatment.
 - The person can meet the dentist, sit on the chair and have a positive experience days/weeks prior to treatment.

- + **Social stories** can be a great way to prepare the person for what procedures are about the take place.
 - The story could include pictures and/or words about the dentist, the building, the chair, the persons mouth and teeth, feelings such as uncomfortable, sore, numbness.
 - Finish the story in a positive and realistic way, for example: "after your appointment we can go and buy a book/go out for lunch/ see a movie".

CHALLENGE: the person wears dentures

SOLUTION:

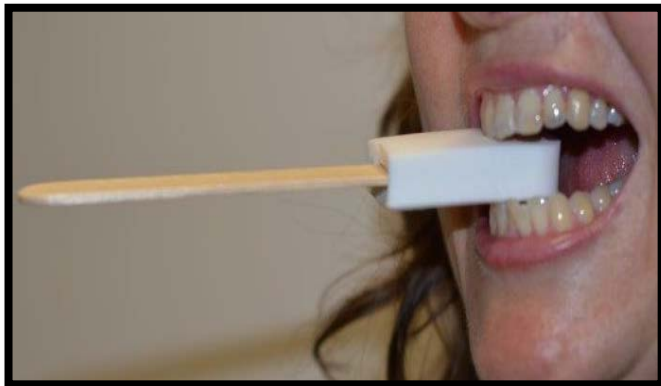
- + Dentures must be brushed daily to remove food and plaque, but do not use toothpaste - this is too abrasive and creates microscopic scratches where food and plaque can build up.
- + Take out dentures at night.

CHALLENGE: the person can't/ won't keep their mouth open

SOLUTION:

- + If the person has difficulty keeping their mouth open whilst brushing their teeth, there are other options to assist you and the person.
- + You could try using a bite block or a rolled up cloth/washer.

Note: Please seek advice from a clinician and oral health professional before placing objects other than a tooth brush in a person's mouth.



CHALLENGE: the person is unable to swish and spit mouthwash

SOLUTION:

- + There are lots of ways to help a person use mouthwash. Mouthwash can be swabbed, brushed, sprayed or wiped on.



Note: Please seek advice from a clinician and oral health professional before placing objects other than a tooth brush in ones mouth.



CHALLENGE: The person has a dry mouth

SOLUTION:

- + If a person has a dry mouth they have a higher risk of tooth decay because food stays in their mouth longer. To help keep the mouth clear of left over food:
 - Make sure the person drinks water to remove excess food
 - Use artificial saliva
 - Spray water into the mouth using a spray bottle
 - Give the person ice to suck on or chew
 - Give the person sugar-free gum or mints to chew on

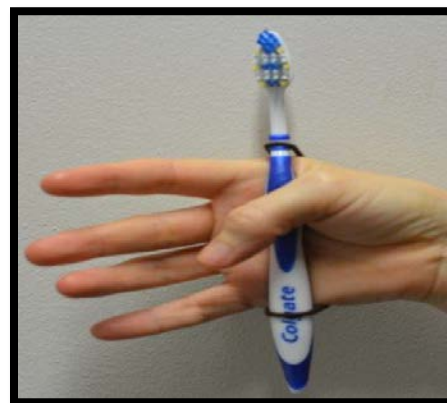


Note: Please seek advice from a clinician if the person you are supporting has swallowing difficulties and is at risk of choking.

CHALLENGE: the person finds it difficult to hold a tooth brush

SOLUTION:

- + Grip can be improved by:
 - Using a wide elastic band to attach toothbrush to the person's hand
 - Modifying the toothbrush handle with a rubber ball or bicycle handle
 - Modifying the toothbrush handle with rubber tubing



CHALLENGE: the person doesn't brush all sides of teeth & gums

SOLUTION:

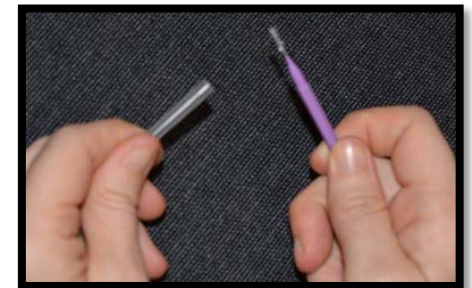
- + Try using a **3-sided toothbrush**. This brush cleans all sides of a tooth at the same time, making brushing faster and reducing the time of pain and discomfort.
- + **Electric/battery tooth brush** can also maximise area brushed quicker and may be a nicer sensation.



CHALLENGE: Difficult to floss/ clean between the person's teeth

SOLUTION:

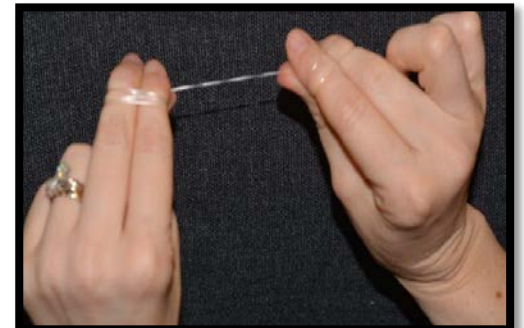
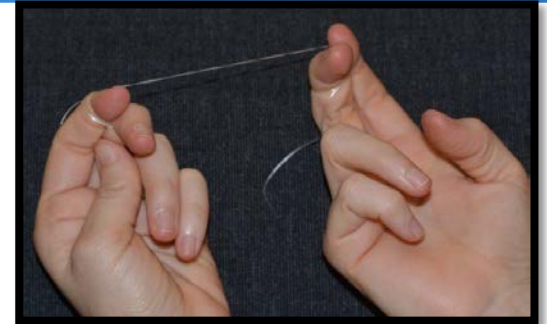
- + Can the person floss independently or with prompting?
- + Flossing can be a tough job that takes a lot of practice.
- + Try using a floss holder, disposable floss stick, moistened toothpick or interdental toothbrush.



CHALLENGE: How do I floss the person's teeth?

SOLUTION:

- + Use a string of floss 18 inches long - wrap it around **finger** of each hand
- + Grip the floss between the **thumb & index finger** of each hand
- + **Start** with the **lower front teeth**, then upper front teeth, then all the other teeth
- + Work the floss gently between the teeth until it reaches the gum-line. Curve the floss around each tooth. **Slide the floss up & down.**
Do this for both sides of every tooth.
- + Adjust the floss a little as you move from tooth to tooth so the floss is clean for each one.



CHALLENGE: Refusal or aggressive behaviour

SOLUTION:

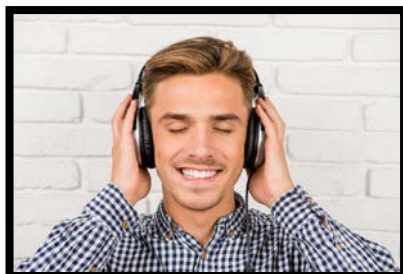
+ Try the “**TELL-SHOW-DO**” approach

1. **TELL** the person about each step before you do it. For example, explain how you'll help him or her brush and what it feels like.
2. **SHOW** how you're going to do each step before you do it. It might help to let the person hold and feel the toothbrush and floss. Try using the back of their hand to feel the bristles of the toothbrush to reduce anxiety.
3. **DO** the steps in the same way that you've explained them. All staff should follow the same steps consistently and an individual routine should be developed.

CHALLENGE: Refusal to have teeth cleaned or aggressive behaviour

SOLUTION:

- + Give the person an object to distract them during teeth brushing e.g. a **vibrating object** or hand held mirror – this may distract them from the oral sensation
- + Create an environment that is pleasing: e.g. **play music** that the person likes during teeth brushing
- + The use of headphones could assist as a good distraction.
- + The person may be sensitive to touch on their face: If so, try **introducing the toothbrush gradually**: brush their hand, cheek, and lips to get them familiar with the texture of the bristles, then their teeth, talking through each step as you go.
- + Organise brushing for a **time of day** when you know the person is more likely to cooperate.



CHALLENGE: the person refuses to enter bathroom

SOLUTION:

- + The bathroom isn't the only place to brush someone's teeth.
- + The kitchen or dining room may be more comfortable for the person. Instead of standing next to a bathroom sink, allow the person to sit at a table. Place the toothbrush, toothpaste, towel, floss, and a bowl and glass of water on the table within easy reach.
- + Make sure there is enough light for you to see what you are doing and the person is comfortable and aware of their surroundings.

CHALLENGE: Keep routine the same each day.

SOLUTION:

- + Consistency is very important
- + Imagine over 5 different staff coming into your home and brushing your teeth in 5 different ways!
- + Use a visual activity sequence or routine board so that all staff and the person are aware of the way they have their teeth brushed. Use the same routine every day.
- + Consistency will help the person to become familiar with the routine, and may reduce their anxiety and risk around brushing their teeth and making it more enjoyable for them and easier for you!



An example of an oral care plan - activity sequence


Name - Oral care Plan

				
<p>I need my Tooth brush, special tooth paste and face washer,</p>	<p>Morning & night - Staff apply a thin Ribbon of Netra Fluor</p>	<p>Staff, please help me brush my teeth for 2 minutes giving me small breaks to rest mouth.</p>	<p>MORNINGS ONLY - staff apply a thin ribbon of Gel-Kam and brush for a further minutes, giving me small breaks to rest mouth.</p>	<p>Now I can brush my own teeth and tougue for a minute. Prompt me to brush up,down, sides and my tougue.</p>
			<p>Pack away tooth brush. Tooth paste and place washer in the laundry</p>	
<p>Spit out Tooth paste</p>	<p>Wipe face with washer</p>	<p>Well done!! High five from staff</p>		

NOTE:

Staff please return equipment, place tooth brush back on charger. Complete data recording in daily folder.

An example of an oral health plan


Family & Community Services
 Ageing, Disability & Home Care

My oral health plan

My name: _____

Insert photo

Date of plan		
CIS number		
Person responsible		

My support *Completed by the person and support worker*

Do I have my natural teeth?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, do I have dentures?	<input type="checkbox"/> Yes <input type="checkbox"/> No
What support do I need with my oral health?	<input type="checkbox"/> None <input type="checkbox"/> Some help <input type="checkbox"/> I need full support		
	<input type="checkbox"/> Verbal prompting <input type="checkbox"/> Physical help <input type="checkbox"/> Other: _____		
The place I prefer to have my teeth / mouth cleaned is:			
What is best way to communicate with me about my oral health needs?			
What special oral hygiene requirements do I have? (if any e.g. how do I use mouthwash or floss my teeth?)			

My routine *Completed by the GP and / or dentist*

I need my teeth / mouth cleaned (number of times per day and when):	
Tools I need to use:	
Toothbrush	<input type="checkbox"/> Soft and regular <input type="checkbox"/> Electric <input type="checkbox"/> Modified toothbrush
	<input type="checkbox"/> Suction <input type="checkbox"/> Mouth swab <input type="checkbox"/> _____
Toothpaste	<input type="checkbox"/> I don't use toothpaste <input type="checkbox"/> I use toothpaste
	Recommended product: _____
Mouth wash	<input type="checkbox"/> I don't use mouthwash <input type="checkbox"/> I use mouthwash
	When / how do I use it? _____
	Recommended product: _____

Health Planning Tools and Templates, V1.2, January 2016

1


Family & Community Services
 Ageing, Disability & Home Care

My oral health plan

My name: _____

Floss	<input type="checkbox"/> Yes <input type="checkbox"/> No
	When / how do I use it? _____
	Recommended product: _____
Dentures	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Scrub with a brush <input type="checkbox"/> Soak overnight
	Recommended product: _____
I take medication that causes dry mouth	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dry mouth products	<input type="checkbox"/> Yes <input type="checkbox"/> No
	When do I use it? _____
	How do I use it? _____
	Recommended product: _____
Other information	

My annual review *Completed by the GP and / or dentist*

Date of the last oral health review by my GP or dentist	
Outcome of the oral health review (health professional to record or attach report)	
Date of the next oral health review	

Plan endorsement

Name of professional (dentist / GP)	
Signature of professional	
Date	
Team Leader signature and date	

Health Planning Tools and Templates, V1.2, January 2016

2

Problem solving

Let's share ideas...

- + Where do you stand or sit when cleaning a person's teeth?
- + What works well for you and the person you support?
- + What doesn't work well?
- + Has a person ever demonstrated behaviours of concern when you were brushing their teeth? What did you do? Would you do anything different if it happened again?

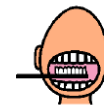


Thank you

+ Handout:

Why all the fuss about oral care plans?

+ Any Questions?



Why all the fuss about Oral Care Plans?

- People with disabilities have more oral health problems than people without disabilities.
- They receive less oral health care and it is often of a lower quality. ¹
- There is a clear link between having dysphagia (swallowing difficulties), poor oral health and getting aspiration pneumonia (when food, saliva, liquids, or vomit enters the lungs causing an infection). ²

People with intellectual disabilities...



- Often have to rely on someone else to clean their mouth.
- May have a dry mouth or excess saliva, often as a side effect from medications.
- Have a higher rate of reflux. The acid from the reflux can wear down teeth. ³
- May have trouble communicating pain from reflux or discomfort with their mouth or teeth.
- May not like having their teeth brushed because they are sensitive to touch around their mouths or may not understand what is happening and get distressed.
- May not be able to clean their teeth properly by themselves due to their difficulties using their hands.
- May have poorer diets or make less healthy food choices e.g. foods high in sugar, fruit juice and soft drink.

What can you do?

- Follow the person's individual Oral Care Plan.
- Whenever possible, involve the people you are supporting in their own oral care routines by using simple instructions and showing them what to do.
- Attend regular dental reviews – usually once every year.
- Even if they do not have teeth, good oral care is very important to keep their gums, tongue and saliva clean and healthy.
- Lookout for changes in a person's eating or other behaviours that may be due to sensitive teeth or a sore mouth e.g. poking fingers in mouth, refusing to eat certain foods etc.
- Make a referral to a Speech Pathologist as oral care problems can affect a person's swallowing.
- Encourage healthy eating and offer alternatives to sugary foods.

Developed by Kelly Anschau, Senior Speech Pathologist, SES District Resource Team - June 2015

1. Dental Health Services Victoria 2008
2. Longmore et al. 2002 & Sheppard 2005
3. Dr Peter King 2005

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Our contact details

NGO Accommodation Services
Support Team:

9377 6517

[NGOAccommodation.ServicesSupport
@fac.nsw.gov.au](mailto:NGOAccommodation.ServicesSupport@fac.nsw.gov.au)