

Title of Document	Oral Health and Care
Name of Department	Quality

What type of document is this?	Policy	
Which Helping Hands POL/SOP/W.I does this document relate to?		Reference number of POL/SOP/W.I

Which Operational Priority/Priorities does this document link to?	Governance Framework	Superior Client Care		

Custodian of document	Group Managing Director	Committee/Group responsible for this document	Policy Committee
Approval date and committee chairperson signature	25.03.25	When is its next scheduled review?	25.03.28

Who does it apply to?	All staff working with Customers					
	Does it apply to bank workers?	Yes	Does it apply to agency staff?	Yes	Does it apply to third party contractors?	No

Purpose of the Policy	Poor oral care can lead to complications with eating and impact on a person's general health. There are established links between poor oral health and heart disease, strokes, diabetes and pneumonia. Therefore, the purpose of this policy is to provide employees with requirements and guidance for supporting customers with oral care.
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ROLES AND RESPONSIBILITIES

Role	Responsibility
Senior Leaders	To ensure the policy is embedded across Helping Hands.
Clinical Team	To provide advice and guidance to Operational teams on supporting end of life / palliative customers with oral care
Care Managers	To adhere to this policy and to promote awareness of the importance of good oral health and care. Where concerns are raised regarding customer oral health, follow the necessary steps including (but not limited to) referral to appropriate health care professional.
Carers	To adhere to this policy and report any customer oral health related concerns to their line managers.

1.0 Policy Statement

Good oral health has a huge impact on a person's general health, physical wellbeing, mental wellbeing and quality of life. Having healthy teeth and gums enables people to chew foods and speak clearly.

Dental health problems are more common with people who have limited mobility and for people living with dementia as they may be unable to maintain a consistent and healthy oral hygiene routine on their own.

Poor oral health and hygiene can lead to tooth decay, gum disease and tooth loss. Furthermore, poor oral health has established links to general health conditions such as heart disease, diabetes, strokes and pneumonia. Therefore, supporting our customers to look after their teeth, gums and mouth is important to improve wellbeing, health and quality of life.

2.0 Care Assessment, Support Plan & Risk Assessment

- 2.1 The customer's pre-assessment may highlight oral care needs and support. However, the Care Manager shall ensure that oral care needs are discussed and reviewed as part of the initial care assessment.
- 2.2 Upon the initial care assessment, the assessor should discuss with the customer, family and / or their representative support with oral care.
- 2.3 Where it has been assessed and agreed with the customer that Helping Hands will support with maintaining their oral care, this shall be clearly detailed within the customer's Support Plan and Personal Care Needs Risk Assessment (*refer to Appendix one for examples of risks and control measures*).

2.4 Standards of Oral Hygiene

2.4.1 Customers will have preferences of how their oral hygiene routine is to be completed. However, it is important to raise awareness of high standards of oral hygiene which may include, but is not limited to the following:

- Brushing teeth twice a day for two minutes last thing before you go to sleep and one other time during the day.
- Switching to an electric toothbrush can be more effective than a manual toothbrush.
- Using a pea sized amount of fluoride toothpaste which contains at least 1,350ppm of fluoride.
- Brushing all surfaces of the teeth including the gums.
- After brushing for two minutes, spitting out any excess toothpaste.
- There is no need to rinse the mouth out as the fluoride will stay on the teeth helping to protect them.
- Where possible, use interdental brushes and floss to clean between your teeth to help keep your gums healthy.
- If gums bleed a little, keep brushing and this should stop. However, if gums are still bleeding after a few days and/ or are concerned, see a dentist.
- A mouthwash is not necessary to use unless it has been recommended by a dentist.
- However, a mouthwash is best used between meals if unable to clean the teeth.
- Where possible, try to eat a balanced diet with at least five portions of fruit and vegetables a day and reduce how often sugary foods and drinks are consumed.
- If partial/full dentures are in place, these should be cleaned by soaking and brushing them with a soft-bristled brush and a denture cleanser that isn't too harsh or abrasive. This helps remove food, plaque and other deposits. If you use denture adhesive, clean the grooves that fit against the gums to remove any leftover adhesive. Do not use denture cleansers inside your mouth. Soak the denture for 20 minutes each evening in Dentural or Milton solution and then rinse thoroughly with cold water.

- Remove dentures at night unless you have been asked to keep them in.

- 2.5 The Personal Care Needs risk assessment provides details on the support required, associated risks and applicable control measures.
- 2.6 Oral care and support shall be included within the daily routines of the customer's Support Plan.
- 2.7 Where customers are supported with oral care, an applicable 'Oral' planned activity should be created aligned with the customer's needs.
- 2.8 The needs of the customer may change which may become apparent during a care needs review. However, where the needs of the customer changes, the Care Manager shall ensure that the support plan, risk assessments and activities are updated and reflect the customer's oral care needs and requirements.

3.0 Supporting Customers with Oral Care

Oral care needs and support will be tailored to the customer's individual needs, circumstances and preferences. Customers may require support in the form of reminders, encouragement, physical assistance such as brushing and denture care. Any oral care and support will be provided with dignity and respect.

3.1 Personal Protective Equipment (PPE)

- 3.1.1 Where carers are providing tasks which involve personal care, such as oral care, the appropriate PPE should be donned (worn) and disposed of as per Helping Hands policy and procedure.
- 3.1.2 Refer to the HHH-SOP-005 – Infection Prevention Control - Appendix One – Recommended PPE.

3.2 Reminding a customer to complete their oral care routine

- 3.2.1 Customers may only require a reminder to complete their oral care routines, and they are able to perform the physical tasks. This may be in the form of brushing, flossing, denture care or generally checking on mouth care.

3.3 Providing a customer with encouragement with their oral care routine

- 3.3.1 Customers may require gentle encouragement or prompt to complete their oral care routines.
- 3.3.2 Encouragement should be delivered in a gentle and positive way and guidance provided where necessary.

- 3.3.3 If encouragement is required, the customer may be able to complete their oral care routine without physical support or assistance. However, physical support or assistance may be required.

3.4 Physically assisting a customer with their oral care routine

- 3.4.1 The customer may require different levels of physical assistance to complete their oral care routine. For example, customers may require carers to only apply toothpaste to brushes or unscrew toothpaste caps.

- 3.4.2 A customer's condition may prevent them from physically completing a task such as brushing their teeth and requires the carer to provide physical assistance.

3.4.3 Brushing

- Physically assisting the customer to brush their teeth shall be completed to the customer's preference following the detailed oral care routine within the support plan and activity.
- See *Appendix Two* for physically supporting a customer to brush their teeth.

3.4.4 Mouthwash

- If support is provided related to measuring out mouthwash, the manufacturer instruction needs to be followed.

3.4.5 Flossing

- Physically assisting the customer to floss their teeth shall be completed to the customer's preference following the detailed oral care routine within the support plan and activity.
- See *Appendix three* for physically supporting a customer to floss their teeth.

3.4.6 Dentures

- Dentures should not be cleaned using toothpaste as it can scratch the dentures.
- Dentures should be cleaned as shown in section 2.4 above.
- If there are any concerns related to dentures, it is important to see advice from a dentist.

4.0 Oral Health

It is important for carers to be aware of the signs of an unhealthy mouth, including tooth decay, gum disease and infection. Where a customer is physically supported with brushing their teeth, the carer should attempt to check the customer's teeth, gums or mouth for problems such as bleeding, ulcers, broken teeth, teeth with holes or dark staining, or any lumps or swelling.

Where concerns are identified, or where customers verbally disclose any concerns they have about their oral health, it is recommended to seek advice from the dentist, GP or relevant health care professional.

5.0 Recording & Reporting Concerns

- 5.1 Carers are required to document oral care and support provided within the daily visit notes and to accurately action related daily activities within the care planning app.
- 5.2 Where any oral health / care concerns are identified, carers are required to promptly report their concerns to their line manager via the Customer Notification form.

6.0 Dental Care

NHS.UK recommends people with good oral health to visit the dentist every 12 to 24 months. People with oral health problems will need more regular check-ups. Where appropriate, staff shall promote awareness of regular check-ups and shall support the customers to access dental services.

7.0 Oral Care - Palliative & End of Life Care

7.1 Common Oral Problems

- 7.1.1 Common oral problems in palliative care include dry mouth, painful mouth, halitosis, alteration of taste, and excessive salivation. They may result from poor oral intake, drug treatments, local irradiation, oral tumours, or chemotherapy.
- 7.1.2 Oral symptoms may significantly affect the person's quality of life, causing eating, drinking, and communication problems, and oral discomfort and pain.

7.2 Care Assessment - Palliative & End of Life Care

- 7.2.1 When assessing a customer with oral symptoms in palliative care, assessors should ask about dry mouth, oral pain, halitosis, alteration in taste, excessive salivation, difficulty chewing, difficulty speaking, dysphagia, and bleeding.
- 7.2.2 The assessor should seek specialist advice and guidance from a relevant healthcare professional should there be any concerns with oral health.

7.2.3 Referral should be considered, or a specialist contacted for advice where concerns are related to the following:

- Oral intake and nutrition
- Oral pain
- Ulcers
- Severe or persistent thrush infection
- Cold sores
- Prolonged taste disturbance (dietitian)
- Communication problems or excessive salivation (speech and language therapist)

7.2.4 Details of care and support should be detailed within the customer's support plan, risk assessments and planned activities.

7.3 Managing Oral Care for a Customer During End of Life Care

7.3.1 When managing oral care for a customer during end of life, mouth care should be provided as often as necessary to maintain a clean mouth:

- The mouth can be moistened every 30 minutes to an hour with water from a water spray, dropper, ice chips if customer is alert.
- Petroleum jelly on the lips may help to prevent lip cracking.
- A room humidifier or air conditioning can be used.
- Pain should be managed as per instructed by a healthcare professional.

TRAINING

Is training required?	Training is available
Details of training	Academy – Oral Health Awareness Course

COMPLIANCE

How is compliance with the POL going to be monitored	During Quality audits and monthly governance checks by the service, review of visit notes, support plans and risk assessments.
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EQUALITY IMPACT ASSESSMENT AND PROCEDURAL INFORMATION

	Positive / Negative / N/A	Comments
Does the document have a positive or negative impact on one group of people over another on the basis of their:		
• age?	N/A	

• disability?	N/A	
• gender reassignment?	N/A	
• pregnancy and maternity (which includes breastfeeding)?	N/A	
• race (including nationality, ethnic or national origins or colour)?	N/A	
• marriage or civil partnership?	N/A	
• religion or belief?	N/A	
• sex?	N/A	
• sexual orientation?	N/A	
If you have identified any potential impact (including any positive impact which may result in more favourable treatment for one particular group of people over another), are any exceptions valid, legal and/or justifiable?	N/A	
If the impact on one of the above groups is likely to be negative:		
• Can the impact be avoided?	N/A	
• What alternatives are there to achieving the document's aim without the impact?	N/A	
• Can the impact be reduced by taking different action?	N/A	
• Is there an impact on staff, client or someone else's privacy?	N/A	If yes, privacy impact assessment required

What was the previous version number of this document?	N/A	
Changes since previous version	This is a new policy	
Who was involved in developing/reviewing /amending the POL?	Quality Development Lead Clinical Team Quality Assurance Business Partner	
How confidential is this document?	Public	Can be shared freely within and outside of Helping Hands

References	NHS UK – Taking care of your teeth and gums Alzheimer's UK – Supporting a person with dementia to keep a health mouth NICE guidance
Associated Documents	

Appendix 1

Risk and Control Measures (list is not exhaustive)

Risks	Control Measures
Swallowing Difficulties / Choking Risk	<p>Use a toothpaste that doesn't foam if the customer has difficulty swallowing or problems with choking. A Dentist will be able to advise on where to get this type of toothpaste.</p> <p>Support the customer to tilt their head forward to help prevent aspiration when tooth brushing</p> <p>Speak to the relevant healthcare professional such as a Speech & Language Therapist for advice.</p>
Gagging / Retching	<p>Changing the customer's body position, brushing at a different time of day or using a smaller toothbrush may help to reduce these problems.</p> <p>Stand behind and slightly to one side of the customer. This will give you better control of their lips and is less confrontational than standing directly in front of them</p> <p>Leave time for the customer to swallow, spit out or to take a breath</p>
Mouth Sensitivities	<p>Introduce a small, soft toothbrush to reduce hypersensitivity ready for proper brushing.</p> <p>An unflavoured toothpaste may be preferable for customers who dislike the taste of regular toothpaste. A Dentist can advise which one to use.</p>
Uncooperative	<p>If the customer becomes uncooperative, attempt to brush the remainder of the mouth at a later time.</p>
Worn toothbrush which can mean brushing is not as effective	<p>Regularly replace toothbrush when signs of wear and tear.</p>

Appendix 2

Physically supporting a customer to brush their teeth

Ensure to wash your hands thoroughly and don the correct PPE as per guidance for supporting someone with personal care.

- Apply a pea-sized amount of fluoride toothpaste to the toothbrush.
- Press the toothpaste well into the bristles to prevent it from falling off
- Stand to the side of the customer and help them to move their hand as they hold the toothbrush.

- Brush the teeth and gums in a circular round motion not backwards and forwards.
- Ensure to brush the teeth from these different angles:
 - behind the teeth along the inside
 - the biting surfaces of the teeth
 - in front of the teeth along the outside
- Brush the top set of teeth for one minute (spend 30 seconds on each side of the mouth). Repeat this on the bottom set of teeth.
- Encourage the customer to spit out the toothpaste after brushing.
- Encourage the customer not to rinse with water or use mouthwash straightaway. This helps to keep fluoride on the surface of the teeth to protect them from decay.
- Rinse the toothbrush with water

Appendix 3

Physically supporting a customer to floss their teeth (www.oralb.co.uk)

Ensure to wash your hands thoroughly and don the correct PPE as per guidance for supporting someone with personal care.

Request the customer to open their mouth in preparation for flossing, check they are comfortable and ready to begin.

Follow these steps on how to use dental floss correctly:

- Use enough floss (Wind). Break off a piece about 45 cm (18 inches) long.
- Wrap most of the floss around either the middle finger or the index finger of one hand, whichever you prefer, and a small amount onto the middle or index finger of the other hand. (Using the middle finger leaves your index finger free to manipulate the floss.)
- Guide: Keep a one-to-two-inch length of floss taut between fingers. Use index fingers to guide floss between contacts of the lower teeth.
- Slide between teeth Gently slide the floss between the teeth in a zigzag motion and be careful not to let the floss snap or “pop” between teeth. Contour floss around the side of each tooth. Slide floss up and down against the tooth surface and gently under the gum line. Floss each tooth thoroughly with a clean section of floss.
- Form a “C”. Make a C shape with the floss as you wrap it around the tooth. Then carefully pull the floss upward from the gum line to the top of the tooth.

- Roll along. As you move from one tooth to the next, unroll a fresh section of floss from the finger of one hand while rolling the used floss onto the finger of the other hand. Use your thumb as a guide.
- This technique applies to any type of floss you use including waxed, unwaxed, spongy floss or dental tape.

Flossing Back Teeth

- Unwind the floss as a slightly longer string of floss can help make it easier.

Floss Gently

- Poor flossing technique can result in complications, and it's important to be thorough yet gentle.

How Often to Use Dental Floss

- How often to use dental floss is just as important as properly using it. It is recommended to floss at least once a day to effectively remove trapped plaque, food, and debris from between teeth.