Improving Oklahoma Nursing Home Resident Outcomes through Person-Centered Oral Care

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Overview
• Poor oral health, particularly for those persons in nursing homes and long-term care facilities is associated with oral infections, pneumonia and other chronic diseases leading to hospitalizations among older adults
• Poor oral health contributes to over $800,000 in annual urgent care visits for preventable dental conditions among seniors

Purpose of oral care project
Enable nursing homes to provide person-centered oral care in order to impact key oral health-related outcomes among Oklahoma nursing home residents.

Nursing home participant benefits
• Receive support and improve staff’s knowledge and skills through free education
• Receive education on what to look for during a daily oral assessment
• Receive education on oral systemic relationships

Benefits, cont’d
• Receive education on implementing an oral care regimen
• Receive tools and resources to enable staff to feel more confident in providing oral care for residents who cannot do it themselves

A licensed dental hygienist will provide:
• Three onsite education trainings
  – Importance of Daily Oral Care for the Elderly
  – Daily Oral Care Strategies and Care Planning
  – Residents Requiring Special Care and the Resistant Resident
• Knowledge, skills and oral care support
• Toolkit/Education Curriculum
Oral care project includes
• Basic Screening Survey (BSS) for nursing home residents
  – It is non-invasive and visual only
  – No instruments are used
  – Takes only five-ten minutes per resident
  – TMF provides all the supplies needed for screening

Resident oral care interventions
• Lead to positive oral health outcomes such as reduced oral health related ER visits and hospitalizations (often linked to pneumonia)
• Lead to decreased incidence of oral health infections often linked to systemic health burdens such as:
  – Heart disease
  – Stroke
  – Diabetes

Similar Wound Surface Area

The bacteria goes directly into the bloodstream and causes harm

Importance of plaque removal
• Bacteria within the plaque on the teeth can migrate into the bloodstream and can cause:
  – hardening of the arteries
  – increased risk of blood clots
  – and makes it harder to control blood sugar

PLAQUE is a substance filled with germs (bacteria) which forms every day on the teeth

Plaque may be clear, white or may be stained and look yellow.
Findings of a 2008 study in a Florida nursing home

Nursing home residents who had daily mouth care provided by nursing assistants whose only job was to provide oral care had three times less risk of dying from pneumonia than those residents who did not receive the daily care from the nursing assistant designated to do oral care.


The Florida study is important because pneumonia is the number one cause of death in nursing homes

Breathing in germs from a dirty mouth is a significant risk factor for pneumonia

Germs from this plaque can get into the lungs and cause pneumonia.


If plaque is not removed daily by brushing and flossing, it will harden to become tartar (calculus)

Tartar

• Is rough and allows for accumulation of more plaque
• Is an irritant to the gum, which aides in the process of chronic inflammation associated with not only gum disease, but overall systemic health
Plaque and tartar may both be present on the teeth. Plaque is soft and can be removed by tooth brushing, while tartar is hard and must be removed by a professional dental cleaning.

**Periodontal Disease and Systemic Health**

- Gum disease causes chronic inflammation in elderly residents
- Chronic inflammation results in the inability to fight infections
- Chronic inflammation results in the body’s inability to control blood sugar
- Chronic inflammation allows a steady flow of bacteria into the bloodstream

Brushing and flossing can prevent gum disease, cavities and tooth loss

Gum disease may increase risk of stroke and heart disease

Residents with diabetes and severe gum disease have more trouble controlling their blood sugar levels

Residents with diabetes and severe gum disease are more likely to die from complications

Eleven-year study of 628 people found that those with severe gum disease had three times the risk of death from heart disease and/or kidney disease compared with those who had no gum disease or mild or moderate gum disease.

Oral cancer in the elderly
- 60% of cancer in patients 65 and older
- Death from oral cancer is attributed to late diagnosis = poor prognosis
- Not all lesions in the mouth are cancerous
- Mostly found on tongue and roof of mouth
- When in doubt, refer out

Roof and floor of mouth
- Swellings, ulcers, redness, raised lesions, white areas or other discolorations should be reported if found in the floor of the mouth.

Identify, care for and prevent the spread of contagious oral infections

Candida: Yeast infection (Thrush)
- Yeast infections can develop from poor oral hygiene, from taking antibiotics or when a resident is very sick
- Report this condition to the charge nurse, a doctor or dentist

Herpes Labialis (lip)
- Begin as blisters; then blisters scab over
- Contagious - may spread by touching: fingers, toothbrushes, towels, cups, etc.
- Healing occurs in 7-14 days
- Report this condition to charge nurse
- Do Not provide oral care until this has been checked by charge nurse

Treat chronic dry mouth to alleviate oral pain in residents
Dry Mouth
• Dry, cracked lips (esp. corners)
• Tongue looks fissured
• Red, inflamed gums
• Thick, “ropy” saliva
• Tongue blade sticks to tongue
• Report to charge nurse or dentist

Angular Chelitis
• Sores at the corners of the lips may be caused by:
  – Ill-fitting dentures
  – Yeast infection
  – Vitamin deficiency
  – Dry mouth
• Report this condition to charge nurse, doctor or dentist

Perform a denture or partial assessment to alleviate oral pain in residents

Denture assessment
• Ill fitting dentures can cause sores
• Cleanliness
• Broken/sharp edges
• Missing/broken teeth
• Fit: Is it loose?
• Resident satisfaction?

Mouth pain
• Ill fitting dentures can lead to improper nutrition
• Pain from dental infections can lead to improper nutrition
• Pain in the oral cavity is a contributing factor to weight loss in nursing home residents

A healthy mouth helps people eat the proper foods and prevents pain
**Purpose of daily oral health assessment**

- Early diagnosis of oral cancer
- Early detection of oral infection
- Identify contributing factors of
  - pneumonia
  - heart disease
  - stroke
  - diabetes
  - dementia

**Conditions to be reported and documented**

- Pain
- Lumps, swelling or sores
- Dry corners of the mouth
- Red or white patches
- Dry mouth
- Broken or decayed teeth
- Broken or lost dentures or partials

**A dirty mouth can make residents sick**

**Thank you for spending your valuable time with me today**