Mouth Care without a Battle Worksheet

DVD 1: Module 1 Part 1 Mouth Care Basics (Basic Steps of Mouth Care)

Always weardenture care.	when providing mouth care and/or
Mouth care is not merelyinfection control and health promotion.	
 Basic steps of mouth care include: Remove food from the mouth Brush the surfaces of the teeth (inside) Clean between the teeth Brush the tongue and Apply fluoride protection to teeth (p 	
Remove left over food from the mouth to in the way: Use a piece of gauze dipped in water Squeeze off excess liquid Wrap gauze around gloved finger and Feel around cheeks for extra food re gauzed finger	d
toothbrush (hard bristles can gums creatir	ing proper brushing technique and a <u>soft</u> the teeth and ng more places for bacteria to grow):
Hold toothbrush at a back and f	
Brush the biting surfaces of teeth using toothbrush. As a review, why should a smouth care?	oft toothbrush be used when providing

While brushing the biting surfaces:
 Use back and forth strokes
Be sure and brush behind the on both the
top and bottom because the far back area of the mouth is commonly missed and the site of plaque build-up
Use a smaller brush (end-tuft brush) or a child's toothbrush to get to hard to reach places or for people who cannot open their mouths wide. If one or the other special brushes are not available, use the resident's regular toothbrush and do the best you can.
Replace toothbrushes every <u>3</u> months or when the bristles becomeor
Review the terms plaque, calculus, and gingivitis on the vocabulary list REMEMBER: It is the motion of the and not the toothpaste that cleans teeth – jiggle and sweep, jiggle and sweep. The
oosens the plaque and the removes the plaque.
Consult with a health care professional or follow facility policy when choosing a mouth care product; the decision is based on the resident's ability and needs. Mouth care products include: Toothpaste Water Listerine Biotene rinse and Anti-microbial rinse
Review each of the mouth care products listed above on the vocabulary list
Why would it be alright to use water as a mouth care product?

Simply brushing the teeth does not get in-between teeth. People should also between the teeth using an interdental brush, also called a go-		
between.		
Why is it important to clean between teeth?		
It is important to not stick a hand in a resident's mouth to floss the teeth. Why?		
It is important to clean the tongue because it has bacteria on it which is a common cause of and may have a		
heavy coating or be discolored.		
 Using a toothbrush, dip brush in product, then start with front of tongue and brush forward withstrokes, then slowly work way to back of tongue while being careful not to make the resident gag; may also use scraper on the back of the toothbrush if available Using a gauze pad dipped in product and wrapped around a cotton swab, rub along the tongue of residents who cannot open their mouths wide 		
Apply a fluoride product to teeth per facility policy.		
When mouth care is complete, perform one last check inside the resident's mouth by gently sweeping the gloved finger through the mouth to check for other food that may remain and observing for irritation of the, and		
Finally, the nurse aide cleans up after performing mouth care by discarding disposable materials that were used, disinfecting and putting personal supplies away, disinfecting the workspace, and washing hands.		

DVD 1 Module 1 Part 2: Beyond the Basics (Dealing with Special Situations)

De	nture care – tips for removi	ng dentures		
•	Upper – grasp with middle	and index	_ behind front teeth	
		tside front teeth; gently roo		
	and	, to	; once	
	loosened, pull	and toward	l you	
•	Lower – grasp middle of bo	ttom teeth between thumb	and middle finger;	
	gently rock denture	and	; once	
		and toward		
•	Partial – grasp the clasps and work gently until the denture is unhooked from the teeth and denture is easy to remove and			
•	After removal of dentures, top and bottom dentures a	put in cup with clean cool w re immersed	vater, making sure both	
cle	ways check for irritation in the an inside of the resident's neth at all:			
•	Dip cotton gauze in mouth	care product and squeeze e	xcess liquid	
•	Wrap gauze around gloved tongue, and on gums	finger and rub gloved finge	r inside cheeks, under	
•	Use sweeping motion to re motions if there is a lot of f	move food (might need to ι ood) and	ise several sweeping	
•	While cleaning gums, let th	e resident spit in a cup whe	n necessary	
De	nture care – tips for cleanin	g dentures:		
•	According to best practices	(and per facility policy), nev	ver use toothpaste	
•	Line the sink with a paper t accidentally dropped	owel over drain to prevent	damage if dentures are	
•	Take lower denture and bruwater, using	ush teeth with toothbrush u and tec brush all other surfaces tha		
	loosened food and plaque;	brush all other surfaces tha	t come into contact	
	with mouth; rinse toothbrush and denture under running water;			
	then place in denture cup			
•	Take top denture and brus	n teeth with toothbrush und	der cool running water,	
		d		
	•	brush all other surfaces tha		
	mouth; rinse toothbrush and denture under cool running water; then place in			
	denture cup			

•	Ensure both dentures are submerged in	water in denture cup
	after denture cup has been rinsed	
De	entures – other important concepts:	
•	Best practice discourages use of toothpaste to clean de facility)	ntures (follow policy of
•	Adhesive – use as little as possible; if dentures fitis not needed	, adhesive
•	Keep dentures out of mouth for at least <u>4</u> hours a day, Why?	preferably longer.
		To be sure
	dentures are removed daily, it is easiest to take out der; while out always keep the	em in cool water or
	denture cleaner. What can happen if dentures dry out?	Store
	dentures away from direct sunlight and heat. Why?	
	Before inserting dentures – check for redness, swelling, where dentures come in contact; dentures are not fitted properly; report raw area or ulcimmediately	may be a sign the
O	ther situations:	
•	People without teeth (edentulous) – mouth care identic dentures	cal with residents with
•	Missing teeth – mouth care as describe previously for reexposed gums	-
•	Loose tooth – notify supervisor; if safe and as directed, with other hand and use short light strokes when brush teeth, hold it steady when cleaning between teeth	•
•	Loose tooth falls out during care – do not replace; apply area with clean gauze to stop bleeding; and notify supe	,
•	Broken teeth – usetoothbrush; dip swab in cleaning product and rub arour removing plaque and debris	and not nd broken teeth
•	Swallowing disorders – provide mouth care do not use toothpaste; use very little liquid in mouth; a in liquid and dab on gauze pad to get rid of excess wate encourage resident to spit into medicine cup when necour	er; brush as normal;

• Tube feeding – treat the same as residents with swallowing disorders

DVD 1 Module 2: Providing Mouth Care in Challenging Situations

Review the terms, dementia and Alzheimer's Disease, on the vocabulary list Always remember when caring for a resident with dementia:

•	Behavior has a	
•	Behavior is a form of	_ because the
	disease has robbed the resident of the ability to make words	_

3 Stages of Dementia			
Stage	Communication	Behaviors/Needs	
Early	Can express needs and follow simple directions	 Memory problems (may think teeth have already been brushed) Need step-by step directions ("put the paste on the brush; rinse your mouth; brush your front teeth") Needs help but may not know it Easily upset Trouble adjusting to new routines (mouth care done same time every day by same person when possible) 	
Middle	 Increased difficulty understanding Increased difficulty expressing self Does not understand what doing and why – becomes agitated Can understand simple words and gestures 	 May hit, spit, grab, bite, yell Need step-by step directions ("put the paste on the brush; rinse your mouth; brush your front teeth") Let resident have toothbrush and use hands-on guidance; resident may become more agreeable if he/she can participate in own care 	
Late	 Can't use words or follow directions Uses body language and makes sounds to communicate 	 Often need total care May not open mouth State what nurse aide is doing Use touch to demonstrate understanding Offer reassurance and encouragement 	

It is important for the nurse aide to understand what stage of dementia a resident is in because of the need to adjust the approach to mouth care.

The nurse aide should get started with mouth care by first making a ______ with simple, respectful activities towards the resident:

- Knock
- Approach from front
- Say hello and introduce yourself
- Move and speak slowly
- Make eye contact
- Make small talk ("You look nice.")
- Explain why you are there
- Ask permission

The Resident Refuses Mouth Care

Refusing mouth care – what the nurse aide does in response to the resident lepends on the , but			
remember – never force mouth care on the resident mouth care!			
Facts about refusals:			
Occurs more at first. Why?			
The	nurse aide may need to		
adjust the time to provide the mouth care that th preference) – some prefer before a meal and som	•		

• It may work to phase in mouth care by first brushing just the front of the teeth, later brushing the back of the teeth, later cleaning the tongue, and ultimately building up to full mouth care; the nurse aide also may start every other day – just establish some type of routine

Reason: resident does not understand what the nurse aide wants to do (due to being hard of hearing or dementia)

- Talk to the resident at eye level and speak slowly and clearly
- Show equipment and supplies to be used
- Use different words (clean, instead of brush)
- Use gestures to act out the behavior (model opening up your own mouth and brushing your own teeth)

Reason: resident has a fear of loss of control or pain

- Explain what you are doing and why; give a reason ("Your mouth will feel better." "Let me get the food from your teeth so you're more comfortable.")
- Provide reassurance ("I'll be careful not to hurt you." "If anything bothers you, tell me, and I will stop."
- For middle stage or advanced dementia, give the resident something he/she likes to hold (blanket, stuffed animal)
- Attend to needs

Reason: bad timing (resident is tired)

- Determine preferred time (morning, bedtime, before or after meals?)
- Come back later

The nurse aide may face other challenges when attempting to provide mouth care to a resident.

The Resident Will Not Sit Down

Reason: resident does not understand

- Put a chair behind the resident's legs and say, "please sit down."
- Nurse aide sits down to demonstrate desired behavior.
- Get the resident's attention by facing him/her, making eye contact, and stating name
- Talk with the resident
- Provide mouth care standing up
- Stand up in front of sink with mirror to model past behavior

The Resident Will Not Open Mouth

Reason: resident does not understand

- Touch the cheek, mouth and/or lower jaw to suggest to resident to open mouth
- For late stage dementia, slowly approach the mouth with toothbrush, gently slide brush into the mouth, and begin brushing
- Sing a song which causes the resident to open the mouth

Reason: resident does not want care

- Be patient
- Make small talk

- Give a reason ("Your mouth will feel better;" "Let me get the food from your mouth so you're more comfortable")
- Ask resident if he/she wants to brush teeth by self
- Simply come back later

The good news is, once the	is open, it usually stays
open and the nurse aide can complete mouth care	

The Resident Grabs at the Nurse Aide or the Toothbrush

For the resident with middle stage of dementia who grabs the nurse aide or toothbrush, stop the care and figure out the reason for the behavior.

Reason: resident does not understand

- Speak loudly and clearly
- Repeat self using simple words
- Talk to the resident at eye level
- Use gestures and props

Reason: resident is in pain

- Be gentle
- Talk through the procedure
- Slow down and stop when necessary

Reason: resident wants control

- Give resident toothbrush and guidance
- Use hand over hand technique

Reason: resident is anxious or afraid

- Provide reassurance by explaining what the nurse aide is doing and why ("I
 will be careful not to hurt you;" "If anything bothers you, tell me and I will
 stop.")
- Give resident something to hold (cup, teddy bear, or other similar object)
- Redirect resident by talking, singing, playing music, providing a favorite drink/food, gently touching and massaging shoulders or arms

The Resident Hits the Nurse Aide

Reason: for a resident with middle stage dementia, hitting may be sudden and come as a surprise

- At the earliest sign of agitation when resident is observed getting upset, stop and see what is going on (most residents will not hit if this is done)
- Redirect resident by talking, singing, playing music, providing a favorite drink/food, gently touching and massaging shoulders or arms
- If resident continues to hit, the nurse aide should stop with mouth care and come back later

The Resident Bites Down on the Toothbrush and Will Not Let Go

Reason: during middle or late dementia, possibly a reflex to chew was stimulated

- Gently wiggle the toothbrush or swab
- Gently rub cheek and massage the jaw
- If the nurse aide feels comfortable, rub along inside of cheek, but outside of the teeth area

The Resident Sucks on the Nurse Aide's Finger, Gauze, or Toothbrush

Reason: during late dementia, a reflex to chew was stimulated

- Explain what you are doing because the resident may think it is food
- Stop if it is a reflex and then start again
- Redirect resident by talking, singing, playing music, providing a favorite drink/food, gently touching and massaging shoulders or arms

Reason: during late dementia, mouth area hurts

- Recognize pain
- Be gentle
- Provide reassurance

The Resident Spits Water on the Floor Instead of a Cup

Reason: the resident associates the cup with drinking and not spitting into

- Provide mouth care near a sink and instruct resident to spit into the sink
- Tilt cup forward under the chin to suggest the resident to spit

Dentures

For residents with early to middle dementia, it is best if the resident can remove/replace dentures; the nurse aide should tell the resident what to do, touch the resident's lip, and finally use patience, flexibility, and good humor.

Resident needs to have his/her dentures removed from mouth, but refuses

- Use verbal prompts and display patience
- Residents with early dementia persuade with a simple reason ("A clean denture feels so much better.")
- Ask when a better time would be to return

Resident needs to have his/her dentures placed in mouth, but refuses

• Use verbal prompts and display patience

• Establish a routine with the same caregiver

- Try touching cheek or lip with denture
- Determine if resident will put in denture and then nurse aide can adjust

The key to providing mouth care a form of	re without a battle is to understand tha	at challenges
The nurse aide must remembe individualize	r to be a	and
<u>Summary</u>		
Know the person		
 Approach from the 		
• Get	first	
• Focus on the person, not th		
• Listen for	_ about the person's needs	
Encourage participation		
• Give simple step-by-step		
Explain each		
• Be patient and repeat if ned		
• Give	feedback and encouragement	
	touch and reassurance	