



Oral Healthcare for Elderly Patients in a Psychiatric Long-Stay Unit

A full audit cycle and service development project



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Introduction

Dental and oral health is an aspect of physical health that is generally overlooked in psychiatric care. However, psychiatric patients are at a significantly increased risk of poor dental health.¹

Preventing Edentulosity- By the time they reach old age, people with severe mental illness are 3 times more likely to have lost all their teeth than the general population.² This has a significant impact on their self perception, communication and quality of life.³ Dentures can help- but in hospital and care settings there is a frequent denture loss and a trend towards no denture use.⁴

General Health- Effective oral health care has been shown to prevent 1 in 10 deaths from aspiration pneumonia in care homes.⁵

Preserving oral health and reducing tooth loss in psychiatric settings is achievable and has positive impacts on verbal and non-verbal communication, diet, self-esteem, overall health, and well-being.

Setting

O Casey Unit is a long-stay psychiatric inpatient unit for elderly patients. The patient group have a variety of mental and physical healthcare needs, with both enduring mental illness and dementia. It has 18 residents at present.

Aims

The aim of this project was to audit the current oral health care status and practices and compare with best practice standards. We then aimed to implement strategies to improve adherence to best practice and complete the audit cycle to assess this.

Audit Standards

- The British Society for Disability and Oral Health Recommendations formed the basis of the audit standard.
- NICE guidelines and HSE publications were used in service and policy development.
- A dental practice was consulted in developing the standards.

Method

First audit cycle- 2nd of April 2021 → Second audit cycle- 22nd of June 2021.

- Data was collected from patient records (admission documents, nursing assessments, care plans, medical assessments, clinical notes and medication records) . All 18 patients were included in the audit.
- Each patient was reviewed and interviewed (if able) to discuss their oral health routines and identify any problems.
- Each patients' bedroom and bathroom were inspected to determine the availability of a private space for oral hygiene and availability of oral hygiene equipment. Clinical rooms were inspected for availability of oral hygiene equipment.
- Staff nurses and nursing management in O'Casey Unit were interviewed to determine the current oral care practices.
- The current health care policies for O'Casey Unit and the General Health Policies for North Dublin Mental Health Services were reviewed.

Intervention

Oral Health Assessment

(Adapted from the British Society for Disability and Oral Health guidelines)

• Results of the cycle 1 audit discussed at management meeting

• Devised oral health assessment tool.

• Tool modified at later management meeting

• Decided to incorporate tool in chart and repeat 6 monthly in line with guidelines.

• Options for staff training and policies discussed- HSE carers guidance incorporated

• Plan made arranging a dentistry service for the O'Casey Unit (business case)

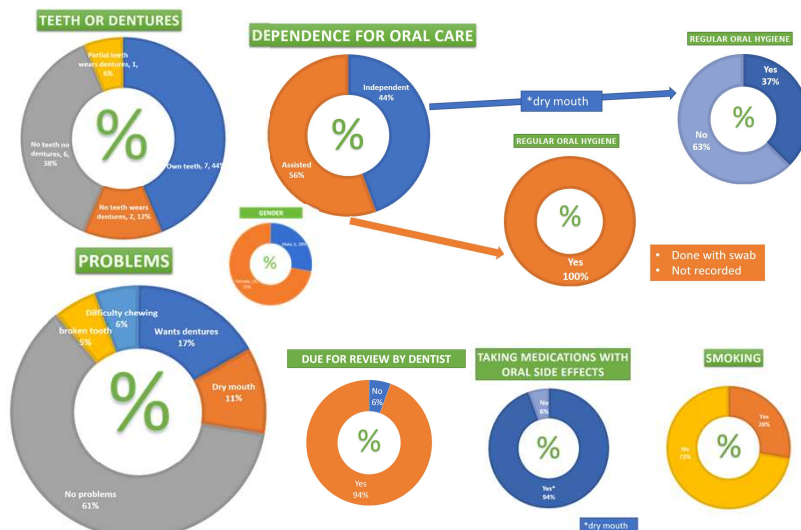
ORAL CARE

INFORMATION AND PRACTICAL ADVICE

A GUIDE FOR CARERS



Characteristics at initial audit



Results

Standard	April 2021 Compliance	June 2021 Compliance	Change
All qualified nurses will have a basic knowledge and understanding of the importance of oral health and disease.	Partial	Partial (Some additional information)	Small improvement
Oral assessment will be used to identify oral status and oral hygiene needs.	0%	100%	↑100%
There will be a clear referral procedure for routine and emergency dental advice and treatment.	No no current routine dentist	No no current routine dentist	↔ No change
Oral hygiene equipment appropriate to a resident's needs will be available.	88.9%	100%	↑11.1%
Specific oral hygiene aids recommended by the dental team will be available.	n/a	n/a	n/a
Residents will have access to privacy for oral hygiene.	100%	100%	↔ No change
Information will be available for residents / staff	No	No	↔ No change
A baseline oral assessment will be carried out to identify the resident's oral status and risk factors.	0%	100%	↑100%
Oral hygiene will be carried out as specified and according to resident's needs. Staff will support, motivate and assist residents to carry out oral hygiene as necessary.	Partial	Partial	↔ No change
Oral assessment will be repeated at specified intervals to monitor the effectiveness of oral care.	0%	Not assessed	Not assessed
The oral assessment records:			
a. Level of assistance required for oral hygiene	100%	100%	↔ No change
a. Does the client have dentures.	55.6%	100%	↑44.4%
i. If yes: Age of dentures	0%	100%	↑100%
i. If yes: Are dentures labeled	0%	100%	↑100%
a. Does the client have natural teeth	0%	100%	↑100%
a. Does the client have and oral health problem (described)	50%	100%	↑50%
a. Smoking status/history	94.4%	100%	↑3.6%
a. Is the client taking medication with oral side effects	100%	100%	↑100%
a. When was the client last reviewed by a dentist	77.8%	100%	↑22.2%
a. Does the client need urgent dental treatment	0%	100%	↑100%

Conclusion

The introduction of an oral health assessment tool and the provision of specific guidance for staff in our unit significantly improved compliance with oral health care recommendations.

Recommendations and Action Plan

A business case was made for the financing of a dental service (Dental Tech)

Once this has been approved, the patients will all have a dental review and recommendations for their on-going dental care from a dentist

A policy on oral health care was developed for O'Casey Unit..

Detailed guidance for oral health care is now available for O'Casey Unit staff. A certificate training course in oral healthcare is being made available to all staff.

The oral health assessment tool has been integrated into the patient's chart and will allow for ongoing monitoring at 6 monthly intervals

(Note: Permission was granted for this audit cycle and service development project by senior management for North Dublin MHS).

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