



Developing oral health teams in rural residential aged care services



Rachel Tham – Monash University
Theresa Brook – Hepburn Health Service



HEPBURN
HEALTH SERVICE

A COMMUNITY HEALTH SERVICE



Rural Health Conference, Ballarat
22-23 April 2010

www.med.monash.edu

Why is it important?

- Ageing population
- Keeping teeth
- Oral health ↔ general health
- Rural health worse
- Workforce shortages
- Access to oral health services



Background

- **Hepburn Health Service:
Daylesford, Trentham and
Creswick**



- **Tongala Aged Care
Service: Tongala**



Background

- **2003 – QI improvement project at HHS**
- **Dentist visits to residents in aged care services – screening and treatment arranged**
- **Need for sustainable solution to aged care staff ability to provide preventive care to residents**



Background

- **2008 –Windermere Foundation Grant to:**
 - **Identify oral health needs of residents;**
 - **Identify barriers to oral health care;**
 - **Develop and implement an oral health education program for aged care staff.**
- **Findings:**
 - **Dental/Oral health care needs improving**
 - **Aged care staff – limited training, skills and confidence**
 - **Dentists – lack of portable equipment and special needs gerodontic training;**
 - **Education sessions too short and theory-based.**



Developing oral health teams in rural residential aged care services

- To improve the oral health knowledge and skills of rural residential aged care staff by developing aged care **'oral health teams'** as the basis for improving oral health of residents in rural residential aged care services.
- Funded by the Windermere Foundation



What did we want to do?

1. Assess the impact of training on oral health teams' knowledge, attitudes and practices
2. Develop an oral health training resource for aged care staff
3. Assess oral health status and treatment needs of residents



How did we do it?

- **Aged care staff oral health knowledge, attitudes and practices survey**
- **Oral health team training – 1 day theory followed up with ‘hands-on’ training in the ‘real world’ setting (n=10)**
- **Oral health education resource pack**
- **Oral examinations of consenting residents**



Oral health team training

- **Theory:**

- Identifying common oral health conditions and understanding the basic disease processes
 - ☞ tooth decay, gum disease, ulcers, dry mouths and ill-fitting dentures
- Caring for natural teeth, dentures and soft tissues
- Infection control

- **Hands-on training**

- Oral health assessments and care plans
- Techniques for managing difficult/resistive behaviour
- Application of oral hygiene products

Oral examinations

- **Baseline: n=74;**
- **Follow-up [6 months later]: n=57**
 - Oral health good for most residents
 - Ill-fitting dentures a recurring problem
 - Improved plaque and calculus management
 - ~50% of participants needed follow-up care



Outcomes

- **Increased understanding of oral health issues in residential aged care**
- **Improved oral health knowledge and skills within aged care service – provide mentoring and training to other staff (capacity building)**
- **All residents receive comprehensive oral health assessment and care plan regularly**
- **Timely treatment arranged for all residents with oral problems**
- **Strengthened relationships between aged care and oral health staff**

Outstanding issues

- **Does not address the needs of community-based home-bound people**
- **Oral health professionals need access to portable equipment, training and funding to provide comprehensive outreach services**





Acknowledgements

Windermere Foundation Ltd

Hepburn Health Service and Tongala

Aged Care Service

- Oral health team members
- Residents
- Aged care nurses and carers

Dr Susan Hardy

For further information please contact :

Rachel Tham rachel.tham@med.monash.edu.au



HEPBURN
HEALTH SERVICE

A COMMUNITY HEALTH SERVICE

