



# Oral health in care homes: from local to national impact.

Michelle Kay, Project Coordinator



# Background Networking

- Quarterly meetings with CQC;
- Local intelligence around dentistry;
- Key stakeholder meetings;
- Project design and implementation.

# Smiling Matters: Oral care in care homes

- 20 care homes in Brighton and Hove;
- 111 care homes residents;
- 75 care staff;
- Between February and April 2019.

# Involvement in CQC review

- Co-production events;
- Similar findings locally.

# Comparing findings: local to national <sup>1/2</sup>

- **Inconsistency in oral care provided**
  - 27% of care home residents had their teeth checked;
  - 65% of residents were never asked about their mouth.
- **NICE recommendations were not adhered to**
  - 19<sup>th</sup> of residents had received an oral health assessment.
- **Access to services was limited**
  - 55% of homes, did not have a dentist that visited the home;
  - 91% of residents would find it difficult to travel to a dentist.

# Comparing findings: local to national <sup>2/2</sup>

- **Oral health not included in care home policy**
  - 51% of care staff unaware of oral health policy.
- **Oral health training was not provided**
  - 25% of care homes had received oral health training.
- **Local approach: comparisons between providers**
  - Special care dental service has positive impact on oral health.

# Recommendations: local to national 1/2

- Promoting best practice;
- Adhering to NICE guidance;
- Access to services for all;

# Recommendations: local to national 2/2

- Oral Health Training for all staff;
- Policy awareness for all staff and residents.

# Working better Together: Table discussions

1. How to work best with the CQC: two suggestions.
2. How to maintain our Healthwatch independence: one suggestion.
3. Future opportunities to work together with the CQC: one opportunity.
4. In addition, any examples of where you have worked well with the CQC in the past and any learning from this.

# Contact Details

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