



Presents:

## Oral Care for the Dependent Elderly

Angie Stone, RDH, BS  
President

**HyLife, LLC**  
1181 Hain Road  
Edgerton, WI 53534

hylife@charter.net  
sharprdh.com

## I. Issue

- A. Lack of oral care for dependent elderly
  - 1. No access to care by professionals
    - a. No insurance benefits for residents
    - b. No dentist on staff
    - c. No dental equipment for DDS to work at facility
    - d. Lack of Transportation
    - e. Ability of residents to be transported
    - f. Dental offices are not equipped to serve this population
- B. Quality of life issues as a result of oral condition

## II. Profile of current residential facility residents

- A. Age
- B. Type of dental care they are accustomed to
- C. Typical oral condition

## III. Profile of future residential facility residents

- A. Baby Boomers
- B. Type of dental care they are accustomed to
- C. Typical oral condition

## IV. Oral Health Education of Primary Care Givers

- A. Nurses
  - 1. Oral Care Education
  - 2. Typically do not provide daily oral care to residents
- B. Nursing Assistants
  - 1. Oral Care education is very limited
  - 2. Basic instruction in brushing and flossing
  - 3. Are not taught connections between oral and systemic health

## V. Role of Dental Hygienist

- A. Provide oral care at residential facility
  - 1. The ideal world
    - a. Modern Dental equipment
    - b. Dentist on Staff
    - c. Appointments made by in house scheduler
    - d. Patients are cooperative
    - e. All patients receive hygiene services on a regular basis as needed by each individual resident
  - 2. The REAL world
    - a. Dental equipment is less than operational- if there is any at all
    - b. No dentist on staff-if there is he is retired and satisfies mandatory screening requirements only
    - c. Dental hygienists are not allowed in facility with out a dentist
    - d. Appointments consist of dentist doing screenings bed side

## B. Provide In-service Training at Facilities

1. Problems with this
2. Solution to problems
  - a. Adopt a Residential Facility Model
    1. What is this?
      - Each Hygienist adopts a nursing facility
      - Hygienist provides yearly or bi- annual in-service training
    2. How it works
      - Hygienist is provided with course content yearly
    3. Advantages of this model
      - Dental hygienist is doing community service
      - Many facilities are being served and educated
      - Education is universal so all facilities are on the same page regarding oral care

## I. Issue

## II. Profile of current residential facility residents

### III. Profile of future residential facility residents

### IV. Oral Health Education of Primary Care Givers

## V. Role of Dental Hygienist

### B. Provide In-service Training at Facilities

