Nursing Home Residents’ Dental Status

In 2016, there were 49.2 million people over age 65 in the U.S., accounting for 15.2% of the total population.1 As of 2014, there were 1.4 million nursing home residents, a large majority of which were 65 or older.2 These individuals rely on the facility to provide holistic healthcare services and assistance with activities of daily living (including oral hygiene). It is also imperative that nursing homes provide access to routine dental services. Though the percentage of elderly visiting a dentist in a given year has improved, those 65 years or older report the lowest dental visit rate compared to other age cohorts.3

Federal Law: Nursing Home Dental Care

Federal law (42 C.F.R. § 483.20) requires all nursing home facilities conduct an oral health assessment upon admission of a new resident and periodically.4 Federal law also requires that long term care facilities:

• Obtain routine and emergency dental services from an outside resource to meet resident needs;
• Assist residents with making appointments and arranging transportation, as requested;
• Within three days, refer patients with lost or damaged dentures; and,
• Assist residents in applying for dental service reimbursement.4

Promising Practice: Resident Dental Screen

The CMS MDS RAI 3.0, published in October 2017, specifically promotes the utilization of multidisciplinary health teams in caring for nursing home residents. However, the user manual omits dentistry from mention as a member of that team. “Nursing homes have found that involving disciplines such as dietary, social work, physical therapy, occupational therapy, speech language pathology, pharmacy, and activities in the RAI process has fostered a more holistic approach to resident care and strengthened team communication.”5

Figure 1. Percent with a Dental Visit in the Past Year by Age Cohort: 1997-2015

<table>
<thead>
<tr>
<th>Year</th>
<th>2–17 years</th>
<th>18–64 years</th>
<th>65+ years</th>
<th>Total Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>73%</td>
<td>64%</td>
<td>65%</td>
<td>65%</td>
</tr>
<tr>
<td>2010</td>
<td>79%</td>
<td>61%</td>
<td>65%</td>
<td>65%</td>
</tr>
<tr>
<td>2015</td>
<td>85%</td>
<td>64%</td>
<td>61%</td>
<td>65%</td>
</tr>
</tbody>
</table>


2. Nursing homes that receive public funding must comply with federal regulations but may also be required to follow additional state law regarding long-term care services.
4. Promising Practice: Resident Dental Screen

This fact sheet has been funded by the North Dakota Department of Health, Oral Health Program with dollars allocated by the DentaQuest Foundation.
Adding a dental professional to the existing healthcare team can improve the overall health and well-being of the more than 1.4 million nursing home residents in the U.S. In collaboration with the North Dakota Older Adult Oral Health Workgroup, staff at the Center for Rural Health (CRH) reviewed state and federal laws, CMS regulations, and national promising practices guides addressing oral health assessments and screenings in long term care settings. The CRH then developed a template for screening the oral health status of all new nursing home residents upon admission. The template was reviewed by a focus group and several stakeholders. A full presentation of the tool, along with an implementation strategy, may be found in the Standardized Dental Screening for New Nursing Home Residents: A Promising Practice Guide available at ruralhealth.und.edu/what-we-do/oral-health/publications.

The guide suggests all new nursing home residents will have a dental screen completed by a dental provider and a direct care provider at the nursing home within 14 days of admission. The completed screen will be utilized to develop a resident’s daily plan of care for oral hygiene.

### Responsibility of the Dental Professional
1. Dental visit type: Admission, Annual, Other
2. Number of functional teeth
3. Edentulous [Y/N]
4. Maxillary denture present [Y/N]
5. Mandibular denture present [Y/N]
6. Substantial oral debris, impaction [Y/N]
7. Root fragments [Y/N]
8. Severe gingival inflammation [Y/N]
9. Calculus buildup [Y/N]
10. Any dental problems present [checklist provided in the template, taken from CMS RAI 3.0]
11. Treatment needed
12. Daily oral care plan recommendations:
   - [ ] Prevident and Chlorhexidine Mouthwash
   - [ ] Denture cleaning: Level of assistance needed
   - [ ] Teeth cleaning: Level of assistance needed

### Responsibility of the Unit Charge Nurse
1. Contact information for resident’s dentist
2. Date of last complete dental exam
3. 24-hour dental emergency contact
4. Cognitive problem(s) limiting ability to perform personal dental hygiene [checklist provided]
5. Functional impairment(s) [checklist provided]
6. Dry mouth, causing buildup of oral bacteria [Y/N]
7. Medication(s) that cause dry mouth [medication checklist from MDS provided]
8. Diseases/conditions that may be related to poor oral hygiene, oral infection [checklist provided]
9. Developed daily oral health plan [Y/N]
10. Prepared oral health toolkit [Y/N]

### Oral Health Toolkit
- Toothbrush
- Toothpaste
- Floss
- Floss handle
- Prevident
- Chlorhexidine mouthwash
- Kidney dish
- Facecloth(s)
- Toothettes
- Mouth prop
- Denture cleaner
- Denture brush
- Denture cup
- Proxabrush
- Daily oral care plan

### References

### For more information
Visit the CRH webpage for additional oral health publications and information. ruralhealth.und.edu/what-we-do/oral-health

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