Dentists in Nursing Homes
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Last year the New York Times reported on the epidemic of poor oral hygiene in long term care facilities (i.e. nursing homes, assisted living facilities) across the nation. Poor oral health is known by dental professionals to significantly contribute to a myriad of systemic disorders including diabetes, heart disease, Parkinson’s disease, rheumatoid arthritis, Alzheimer’s disease and pneumonia. Use of medications often manifest oral changes and pathology in this patient population. With the decline of edentulism it is now common to see many patients over the age of 65 with full dentition which have sustained age-related changes such as attrition, abrasion, recession and loss of attachment (periodontal disease). The Association of State and Territorial Dental Directors found that 30% of residents had “substantial oral debris on at least two-thirds of their teeth,” in the twenty nursing homes they surveyed.

Recognizing the need for oral care in long term care facilities, The Omnibus Budget Reconciliation Act of 1987 (Federal Nursing Home Reform Act) relegated oral health care tasks to nursing home workers who have little oral health care education. According a report by the Kaiser Foundation, more than half of the spending for nursing home care is provided by Medicaid and Medicare. In order to receive Medicaid and Medicare reimbursement, nursing homes must be licensed by states and certified as meeting the federal quality standards for nursing homes. There are six dental service regulations that every nursing home should uphold:

- Assist residents in obtaining routine and 24-hour emergency dental care.
- Provide or obtain routine and emergency dental services by either hiring on staff or contracting with a dentist to meet the needs of each resident in a skilled nursing facility.
- Charge (if desired) a Medicare resident (but not a Medicaid resident) an additional amount for routine, and again for emergency, dental services.
- Provide or obtain from an outside resource emergency dental services as well as routine dental services (to the extent covered under the State Medicaid Plan) to meet the needs of Medicaid residents.
- Assist the resident in making appointments and arranging for transportation to and from the dentist’s office.
- Promptly refer a resident with lost or damaged dentures to a dentist

Very few long term care facilities employ a dentist (and fewer employ dental hygienists) to provide oral health care to their clients.

Oral disease continues to threaten the general health of the less fortunate (including many members of minority groups), those with low incomes, individuals with disabilities and special health care needs, and the elderly. With both need and demand for dental care in these institutions dental education is recognizing that dentists and allied dental professionals must collaboratively work together toward a solution to the oral health disparities that exist. Many states have expanded the scope of practice and decreased supervision requirements for dental hygienists so that they may serve populations that do not have access to a dentist. Efforts by dental hygienists to aid the elderly have been well reported in dental hygiene literature.
Recognizing the need for dentists in these facilities the American Dental Association is now offering an online, 8 module, self-paced course for dentists interested in working with this patient population. The course, which grants 10 hours of continuing education credit to the participants, “is designed to help dental professionals understand how long-term care (LTC) facilities work and how you can work successfully in LTC facilities. You will learn how to deliver care in an environment outside your traditional practice location and care for your patients through their entire life span.”