



Australian Government

Department of Education, Employment and Workplace Relations

CHCOHC406B Provide or assist with oral hygiene

Release: 1

CHCOHC406B Provide or assist with oral hygiene

Modification History

CHC08 Version 3	CHC08 Version 4	Description
CHCOHC406A Provide or assist with oral hygiene	CHCOHC406B Provide or assist with oral hygiene	Unit updated in V4. ISC upgrade changes to remove references to old OHS legislation and replace with references to new WHS legislation. No change to competency outcome.

Unit Descriptor

Descriptor

This unit describes the skills and knowledge required by workers to provide or assist a client with their oral hygiene needs within the framework of an individualised care support plan and within their designated role and responsibilities

Application of the Unit

Application

This unit is intended to address skills and knowledge appropriate for workers who provide direct client care in a range of health and community services environments and whose work role requires them to provide hands on provision of or assistance with a client's oral hygiene where the client is unable to do any or all of this task for themselves

This work is carried out to achieve planned outcomes in the client's individual oral health care plan as part of their overall support plan

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Pre-requisite

This unit must be assessed after achievement of either:

- HLTIN301C Comply with infection control policies and procedures

or

- CHCWHS312A Follow safety procedures for direct care work

Employability Skills Information

Employability Skills

This unit contains Employability Skills

Elements and Performance Criteria Pre-Content

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element. Terms in italics are elaborated in the Range Statement.

Elements and Performance Criteria

ELEMENT

PERFORMANCE CRITERIA

1. Identify client's *oral hygiene requirements* and work within a *person-centred* approach to ensure *good oral health*
 - 1.1 Review *individualised care support plan* with *client* and/or supervisor to confirm support requirements to address client's oral hygiene needs
 - 1.2 Work effectively with clients from a diverse range of backgrounds to meet individual preferences in relation to provision of support or assistance with oral hygiene
 - 1.3 Discuss and confirm the client's level of participation in meeting their own oral hygiene preferences and provide information to the client and/or carer or *substitute decision maker* as required
 - 1.4 Confirm oral hygiene requirements are within scope of own knowledge, skills and work role and seek appropriate assistance where client requirements are outside scope
 - 1.5 Take into account and address *potential impacts* that provision of oral hygiene may have on the client and address any *situations of risk or potential risk* associated with the provision of support and confirm actions with supervisor
 - 1.6 Identify oral hygiene products, processes and aids for providing assistance and promoting independence in line with client's individualised care support plan
 - 1.7 Ensure all actions are in line with *legislative requirements, standards* and *organisation guidelines*

ELEMENT

2. Assist and support clients in their identified oral hygiene needs

PERFORMANCE CRITERIA

2.1 Prepare and use in an appropriate, safe and client preferred manner:

- *oral hygiene products and aids for teeth and soft tissue*
- *oral hygiene products and aids for dentures*
- *other materials required for oral hygiene*

2.2 Inform client of processes to take place

2.3 Provide support or assistance with oral hygiene tasks according to the individualised care support plan, organisation policies and procedures and with awareness of identified individual client preferences or risk, including:

- *toothbrushing*
- *soft tissue care*
- *care of dentures*
- *use of alcohol-free mouthwash*
- *interdental cleaning*

2.4 Incorporate *standard toothbrush care* into procedures

2.5 Where appropriate encourage client to wear, insert and remove own dentures in line with care plan and, where necessary, support and assist clients with care of dentures to industry standards

2.6 Use *techniques to improve oral hygiene practices and modified oral hygiene methods and aids* where identified as needed

2.7 Use *standard precautions* and, where necessary, *additional precautions* to address infection control requirements in all oral hygiene practices

ELEMENT**PERFORMANCE CRITERIA**

3. Assist and support clients in an appropriate manner
- 3.1 Provide oral hygiene support or assistance in an *appropriate environment*
 - 3.2 Use *effective communication, appropriate body language* and a *caring attitude* to facilitate client understanding of, and comfort with, oral hygiene processes taking place
 - 3.3 Clarify and address difficulties in providing support, including *client behavioural responses* with client and supervisor within organisation protocols
 - 3.4 Use recommended alternative techniques or arrangements in case of client refusal or inability to comply as recommended in the individualised care support plan
 - 3.5 Recognise signs that indicate potential for an oral health problem, including distress or behaviours of concern, especially in clients unable to articulate their symptoms or concerns
 - 3.6 Maintain confidentiality, privacy, dignity and respect of the client within organisation policies and procedures
4. Recognise and report changes in client oral hygiene requirements
- 4.1 Regularly *review* oral hygiene techniques being used to ensure oral health is maintained according to the oral health care plan
 - 4.2 Identify variations in oral hygiene support requirements and/or *report* to supervisor and/or other appropriate personnel
 - 4.3 Work with client and/or supervisor and/or other appropriate personnel to identify required changes to procedures and aids

ELEMENT**PERFORMANCE CRITERIA**

5. Identify *variations in client behaviour and habits* and if appropriate undertake visual oral check
- 5.1 Identify client behaviour and habits that may indicate oral health issues or associated pain or discomfort
- 5.2 Identify *signs and symptoms of potential oral health issues* that may indicate variation from normal or warrant attention by an oral health practitioner
- 5.3 Observe, listen for self-reports and question client and/or carer, and/or *other relevant people* as required to determine whether the client is experiencing any pain or discomfort that may be associated with oral health issues
- 5.4 Take into account *contributing factors* that may produce variation from normal behaviour
- 5.5 Obtain consent from the client or substitute decision maker to conduct a basic visual oral check and questioning if necessary in line with legislative requirements, organisation guidelines and within own work role
- 5.6 Ensure comfort of client by developing trust and rapport and working in an appropriate environment and at an optimal time
- 5.7 Ensure client is in a position which provides visual access to the mouth seeking their assistance to open their own mouth to minimise contact with the mouth using appropriate infection control procedures
- 5.8 Provide support for client's head or chin if necessary to enhance visual access without creating discomfort for the client
6. Complete reporting and documentation according to organisation policies and procedures
- 6.1 Document and report oral hygiene practices performed
- 6.2 Document and report any concerns arising during oral hygiene practices
- 6.3 Maintain and file documentation

Required Skills and Knowledge

This describes the essential skills and knowledge and their level required for this unit.

Essential knowledge:

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include knowledge of:

- Awareness of the National Oral Health Plan and other relevant state, territory and national government policy and programs
- Basic anatomy and physiology underpinning oral health and hygiene, including what is considered healthy and unhealthy
- Basic understanding of variations in oral hygiene care support requirements
- Basics of oral health and hygiene
- Common and specialised equipment, products and aids utilised in provision of oral hygiene care support
- Factors that impact on oral health, including:
 - abuse
 - access to services
 - accumulation of plaque and calculus
 - alcohol, licit and illicit drugs and substances and over the counter and herbal treatments
 - alcohol misuse
 - bacteria in dental plaque
 - client education
 - correct infant feeding practices
 - diet and nutrition, including fluids
 - fluoride
 - general health and wellbeing
 - immunosuppressant conditions
 - medical history
 - oral piercings
 - psychological issues, such as fear of being seen without dentures or persisting with ill fitting dentures for satisfaction of others
 - salivary function
 - smoking
 - social and cultural determinants of health
 - susceptible tooth surfaces
 - transmission of bacteria particularly from parent to child

- trauma, such as from seizures
- Guidelines for use of relevant technology, including information technology
- Impact of certain health conditions and related treatments on oral health e.g. immunosuppressant conditions, HIV, chemotherapy and radiation
- Individualised care support plans, including terminology
- Infection control standards and guidelines
- Methods of communication with clients in accordance with their communication needs
- Mobility issues for some clients and the impact this may have on oral hygiene
- Work health and safety (WHS) issues and procedures, including those related to manual handling

continued ...

Essential knowledge (contd):

- Oral side effects of medications, such as metallic taste in the mouth, dry mouth syndrome and ulcers
- Organisation requirements for documentation and report writing
- Own work role and responsibilities in provision of oral hygiene
- Personal safety and security risks associated with provision of oral hygiene care support and strategies to minimise risks
- Principles and practices in undertaking technical skills associated with supporting or assisting people to meet oral hygiene care needs
- Principles and practices of confidentiality, privacy, respect and dignity
- Processes and strategies to support people with and provide oral hygiene care needs
- Role of carers and substitute decision makers in relation to oral hygiene decisions and support
- Roles of oral health practitioners
- Significance of service setting, including specific contexts of supporting oral hygiene care needs in a client care setting and in a client's private home
- Signs and symptoms of an allergic reaction
- The interaction between oral health and general health

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Accurately document activities and observations within organisation policies and procedures
- Adhere to own work role and responsibilities within organisation policies and procedures
- Carry out effective oral health self-care practices
- Communicate effectively with people requiring oral hygiene care support, including use of active listening and questioning skills
- Consistently apply standard precautions

- Differentiate between healthy and unhealthy oral presentation
- Identify and respond to risks associated with providing oral hygiene care support
- Identify variations to oral hygiene care support requirements
- Liaise and report appropriately to supervisor and/or health practitioners
- Obtain and follow relevant information from an individualised care support plan
- Provide and/or assist with oral hygiene care support within the individual personal care context
- Recognise changes of clients behaviour, habits and physical condition that might indicate potential oral health issues and report accordingly
- Reflect on and improve own level and application of skills and knowledge to achieve desirable outcomes and maintain own capabilities
- Support a person's direction and participation in provision of oral hygiene care support responding to personal preferences wherever appropriate
- Use initiative in finding opportunities to promote oral health care and its interaction with general health
- Use processes, aids and equipment appropriately in provision of oral hygiene care support, including tooth brushing, soft tissue cleaning, use of mouthwash, care of dentures, care of crowns, bridges, implants and braces
- Use relevant technology, including information technology safely and effectively

In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include the ability to:

- Apply basic problem-solving skills to resolve problems within organisation protocols
- Apply literacy and numeracy skills required to fulfill work role in a safe manner and as specified by the organisation
- Consistently demonstrate interpersonal skills, including empathy when relating to people from a range of backgrounds and abilities
- Work effectively with clients, colleagues and supervisors

Evidence Guide

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects for assessment and evidence required to demonstrate this unit of competency:

- The individual being assessed must provide evidence of specified essential knowledge as well as skills
- This unit is best assessed in the workplace or in a simulated workplace under the normal range of

conditions

- Consistency in performance should consider the particular workplace context

- Access and equity considerations:*
- All workers in health and community services environments should be aware of access, equity and human rights issues in relation to their own area of work
 - All workers should develop their ability to work in a culturally diverse environment
 - In recognition of particular issues facing Aboriginal and/or Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on Aboriginal and/or Torres Strait Islander people
 - Assessors and trainers must take into account relevant access and equity issues relating to factors impacting on Aboriginal and/or Torres Strait Islander clients and communities

- Context of and specific resources for assessment:*
- This unit can be delivered and assessed independently, however holistic assessment practice with other community services units of competency is encouraged
 - Resources required for assessment include:
 - access to appropriate workplace where assessment can take place
 - simulation of realistic workplace setting

- Method of assessment:*
- In cases where the learner does not have the opportunity to cover all relevant aspects in the work environment, the remainder should be assessed through realistic simulations, projects, previous relevant experience or oral questioning on 'What if?' scenarios
 - Assessment of this unit of competency will include observation of processes and procedures, oral and/or written questioning on essential knowledge and skills and consideration of required attitudes
 - Consistency of performance should be demonstrated over a range of relevant workplace conditions

Related units:

- This unit may be assessed independently or in conjunction with other units with associated workplace application

Range Statement

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

Oral hygiene requirements appropriate to the client include care of:

- Teeth
- Crowns, bridges, implants, braces and other orthodontic appliances
- Dentures
- Mouth
- Soft tissue

Person-centred refers to:

- Effective service delivery
- Involving clients in discussions about service delivery options and issues
- Involving clients in informed decision-making relating to their care/service
- Listening to and addressing complaints
- Obtaining informed consent
- Putting clients, carers and their preferences at the centre of service delivery

Good oral health refers to but may not be limited to:

- A person's mouth that has:
 - breath without offensive odour
 - inflammation and lesion-free soft tissue
 - intact and stable teeth without cavities
 - moist lips without chapping
 - no build up of food, calculus or plaque
 - no oral pain
 - pink, moist, uncoated tongue
 - watery plentiful saliva
- Looking after the whole mouth, including natural and artificial teeth, gums, tongue, lips and inside the cheeks
- Oral health related quality of life factors, such as appearance, social interaction and self-esteem

Individualised care support plan may include:

- A stand-alone individualised oral health care support plan
- Care plan written by an appropriate health practitioner
- Oral hygiene care plan
- Personal care tasks embedded in a wider individualised plan

Client refers to those living in the community and/or facilities and may include:

- Children receiving care, including in children's services
- Older persons
- Palliative care clients
- People in care or health facilities
- People with acquired brain injury
- People with dementia
- People with disabilities
- People with mental health issues

Substitute decision maker (in relation to consent) must be:

- The person appointed with the right to speak for the client, such as:
 - advocate
 - carers
 - guardians
 - health attorneys
 - medical power of attorney
 - members of family
 - other practitioners
 - parent of child
 - person responsible
 - public trustee

Potential impacts may include but not be limited to:

- Positive impacts, such as:
 - able to chew food
 - clean mouth
 - improved general health and wellbeing
 - improved social engagement or interaction
 - increased self-esteem
 - longevity
- Negative impacts, such as:
 - discomfort
 - disempowerment
 - embarrassment
 - fear
 - humiliation
 - pain
 - trauma particularly as a result of poor technique

Situations of risk or potential risk, may include but not be limited to:

- Complex care clients, such as those with dementia or parkinson's disease
- Emotional reaction from client, such as those related to dementia or anxiety
- Infection control
- Manual handling
- Oral side effects of medication
- Physical reaction from client
- Pre-existing medical conditions
- Reaction to contact with sensitive teeth
- Resistance from client
- Triggers for seizures

Legislative requirements refers to:

- Federal, state or territory legislation that may impact on workers' practices and responsibilities, noting that implementation of the unit of competency must reflect the legislative framework in which a worker operates

Standards may include but not be limited to:

- Aged Care Standards
- Community Care Common Standards
- Disability Service Standards
- Home and Community Care (HACC) National Health Standards
- Infection Control Standards
- National Standards for Mental Health Services

Organisation guidelines may include but are not limited to:

- Clinical protocols
- Position descriptions
- Workplace policies and procedures, including:
 - infection control
 - WHS

Oral hygiene products and aids for teeth and soft tissue may include but not be limited to:

- Alcohol-free mouthwash directed by an oral health practitioner as part of an oral health care plan
- Fluoride toothpaste
- Interdental brushes
- Manual and electric toothbrushes
- Modified toothbrushes
- Mouth props (if trained in their use)
- Saliva substitutes
- Soft toothbrush suitable for bending
- Specialised aids
- Sprays
- Sugar-free gums
- Tongue scraper
- Tooth remineraliser

Oral hygiene products and aids for dentures may include:

- Denture adhesive
- Denture brush
- Denture disinfection product
- Denture labeling kit
- Denture soaking products
- Denture-friendly cleaner
- Named denture storage container (disposable or non-disposable)

Other materials required for oral hygiene may include:

- Bowl or hand basin
- Cup of fresh water
- Disposable gloves
- Hand towel to be placed across clients chest
- Lip balm
- Towel

Toothbrushing may include:

- Using currently accepted methods to clean:
 - natural teeth
 - fixed and removable prostheses
 - soft tissue

- Soft tissue care refers to:*
- Care of all soft tissue, including:
 - cheeks
 - gums
 - lips
 - palate
 - tongue
- Care of dentures refers to:*
- Cleaning, identifying and storing using currently accepted methods taking into account individual needs and preferences in line with the care plan
- Use of alcohol-free mouthwash may refer to:*
- That which is directed by a health practitioner as part of an oral health care plan to enhance oral hygiene
- Interdental cleaning refers to:*
- Cleaning between the teeth
- Standard toothbrush care refers to:*
- Cleaning, storage and replacement of toothbrush to currently accepted standards

Techniques to improve oral hygiene practices may include but are not limited to:

- Bridging:
 - engages clients senses especially sight and touch
 - engage client first and describe and show toothbrush
 - mimic brushing of own teeth to provide physical prompt
 - place brightly coloured toothbrush in client's preferred hand and they may mirror behaviour
- Chaining:
 - if not initiated through bridging, gently bring clients hand and toothbrush to mouth, describing activity and then encourage the client to continue
- Hand over hand:
 - if chaining does not work, place hand over client's hand and start brushing client's teeth so you are doing it together

continued...

Techniques to improve oral hygiene practices may include but are not limited to (cont'd):

- Distraction:
 - if hand over hand method is not successful, place a familiar item, such as towel, cushion or activity board, in client's hand while brushing their teeth
- Rescuing:
 - if attempts at oral hygiene are not successful tell client you will leave it for now
 - ask for assistance and perhaps have someone else take over

Modified oral hygiene methods and aids may include but are not limited to:

- Appropriate alcohol-free mouthwash and gel
- Backward bent toothbrush, or similar implement to retract cheek while brushing with another toothbrush
- Bite block
- End tufted brush
- Flossers
- Hand grip on toothbrush for clients with reduced grip strength
- High fluoride toothpaste wiped onto teeth instead of brushing as a short term alternative only
- Mouth props for clients who clench or bite or who have difficulty opening mouth (specific training required)
- Mouth spray
- Mouth swabs
- Saliva substitute
- Suction swabs
- Tongue scraper and/or brush

Standard precautions refer to infection control and may include:

- Wash hands before and after oral care
- Appropriate use of personal protective equipment (PPE):
 - eye/facial protection e.g. glasses/face shield
 - gloves
 - gown
 - mask
- Disposal of PPE

Additional precautions refer to:

- Those infection control precautions that should be used, in addition to standard precautions, when these alone might not contain transmission of infection

Appropriate environment may include but is not limited to:

- Choosing location where client is most comfortable
- Ensuring good lighting
- Maintaining client's preferred routines
- Turning off competing background noise, such as television or radio
- Using aids that may ease client anxiety e.g. hand mirror
- Using brightly coloured toothbrush that can be easily seen e.g. for children or for clients with dementia or visual impairment

Effective communication includes but is not limited to:

- Active listening and questioning
- Always explaining actions and processes and reinforcing with gestures where appropriate
- Asking questions that require a yes or no response when oral hygiene practices are being carried out
- Giving one instruction or piece of information at a time
- Observing client closely as lack of response, signs of frustration, anger, disinterest or inappropriate responses may suggest communication is too complex or that client is uncomfortable
- Speaking at appropriate volume, clearly and at clients pace
- Using reassuring words and positive feedback
- Using words client can understand

Appropriate body language may include but is not limited to:

- Being aware of approaching client appropriately e.g. diagonally from the front and at eye level
- Gently touching the client on the hand or lower arm to get attention, if necessary
- Positioning self at eye level and maintaining eye contact, as appropriate
- Being aware that personal space of clients can vary
- Being consistent in approach with positive expression and caring language

Caring attitude includes but is not limited to:

- Allowing plenty of time for client to respond to questions or instructions
- Focusing on building a good relationship before starting oral hygiene
- Using the client's name
- Using a calm, friendly and non-demanding manner
- Working with a person-centred approach

Client behavioural responses may include but are not limited to:

- Biting toothbrush
- Coughing
- Distress induced vomiting
- Fear response
- Gagging
- Grabbing or hitting out
- Leaving
- Not opening the mouth
- Not responding to directions
- Spitting
- Verbal aggression

Review may include but not be limited to the following questions and suggestions:

- Are the oral hygiene aids appropriate for the client?
- Do others e.g. family and/or carer have input?
- Has the observed behaviour improved?
- Is attitude and approach considerate of client needs?
- Is the approach and routine consistent for client?
- Is the client more receptive to oral hygiene support?
- Is the environment, timing, language and expression right for client?

Report may include:

- Non-verbal:
 - care plans
 - case notes
 - hazard and incident reports
 - photographs
 - progress reports
- Verbal:
 - face-to-face
 - telephone
 - recorded

Variations in client behaviour and habits may include:

- Anxiety around, or avoidance of, specific events
- Apparent pain or discomfort in or around the mouth
- Behaviours of concern
- Change in eating habits
- Change in mood or demeanour
- Changes in communication
- Crying
- Difficulty with eating, including spitting out food
- Hands in the mouth
- Inconsistent wearing of dentures
- Lethargy
- Physical aggression
- Refusal to open mouth
- Rubbing own teeth or gums
- Seemingly normal behaviours e.g. coughing could be indicator that food is in the lungs
- Self-harming behaviour
- Social isolation or withdrawal

Signs and symptoms of potential oral health issues may include but not be limited to:

- Observed and/or reported signs in or around the mouth, such as:
 - bad breath (halitosis)
 - bleeding
 - broken teeth
 - brown or discoloured teeth
 - calculus (mineralised plaque that will not brush off) on teeth particularly at gum line
 - change in colour or coating of tongue
 - dry mouth
 - eruption issues for children
 - evidence of build up of dental plaque on teeth, particularly at gum line
 - holes in teeth
 - lip blisters, sores or cracks
 - loose or mobile teeth
 - mouth debris/excessive food left in mouth
 - mouth ulcers
 - premature loss of baby teeth
 - receding or enlarged gums
 - soft tissue lesions e.g. red or white spots
 - swelling of face or localised swelling/inflammation

continued.....

Signs and symptoms of potential oral health issues may include but not be limited to (cont'd):

- Issues reported by client and/or others, such as:
 - tooth sensitivity
 - refusal of oral care
 - sore mouth, gums, tongue or teeth
- Other observations, such as:
 - change in appetite
 - change in demeanour or mood
 - difficulty eating/speaking
 - inability to open mouth very wide
 - irritability
 - refusing to open mouth
 - weight loss
- Observed and/or reported issues with dentures, such as:
 - broken metal wires/clips on partial denture
 - calculus on denture

- chipped or missing teeth on denture or chipped or broken acrylic (gum) areas on denture
- denture movement when client is speaking or eating
- refusal or failure to wear denture
- sore spots caused by wearing denture
- unclean denture

Other relevant people may include but is not limited to:

- External health care providers
- Other service providers
- Personnel internal to the service provider

Contributing factors may include but not be limited to:

- Abuse
- Ageing
- Disability
- Injury
- Medications
- Substance misuse
- Systemic illness

Unit Sector(s)

Not Applicable