



SUPPORTING DAILY MOUTH CARE

Mouth care risk assessment form

Prevention and control measures in long-term care facilities

Knowledge
Oral Healthcare

NICE QS151

Statement 3 · Residents are supported to clean their natural teeth and dentures every day

NAME OF CARE HOME

ASSESSMENT CARRIED OUT BY

DATE CARRIED OUT

DATE OF NEXT REVIEW

#	HAZARD / ACTIVITY	WHO IS AT RISK?	WHAT ARE YOU DOING ALREADY?	RISK 0-3	FURTHER ACTION TO BE TAKEN	ACTION BY WHO?	BY WHEN?	DONE
EXAMPLE	Getting bitten while toothbrushing	Staff	Judith bites down on a 2nd toothbrush while her teeth are brushed	1	Notify nurse; 2 staff for toothbrushing, 2nd person distracting	Jade (team leader)	17/05/22	☒
1								☐
2								☐
3								☐
4								☐
5								☐

RISK RATING

0 Unlikely

1 Likely

2 Very likely

3 Certain

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