

Progress on recommendation 6

Oral health needs to be included more in regulation and local commissioning

In 2019, we recommended that social care commissioners include oral health in care homes in their assessment frameworks, and we review how we include it in our regulation.

From our engagement for this progress report, it was unclear as to the extent that social care commissioners routinely included oral health as part of their assessment frameworks.

Moving forward, there is a clear opportunity for services and local commissioning to be more integrated and sourced cohesively, rather than be bound by existing contractual arrangements, in order to address the needs of their local population.

In terms of our response to the recommendations, we added two questions to be asked routinely on care home inspections (each of which contained further detailed prompts):

- Do staff receive training in oral health?
- How do you ensure oral health is assessed, considered and delivered as a part of a person's care plan?

Although these questions have been added to our inspection methodology, we still have further work to do to make sure that oral health care is included as an important part of the findings we feed back to care home providers and the public. This is partly explained by the COVID-19 pandemic moving our priorities more towards risk and infection prevention and control, but we can now re-focus our priorities on promoting good oral health as part of our assessment of person-centred care.

As we move to our new regulatory model with a single assessment framework, we remain committed to include oral health in our routine adult social care inspection activity, and endeavour to make sure it remains a part of our evidence criteria under our effective and responsive key questions.

At present, the precise nature of the evidence requirements is still being decided, but more information on them can be found on our website.

With our incoming new powers to allow us to hold integrated care systems to account and assess how local authorities are delivering against duties under Part 1 of the Care Act, we have the opportunity to ask systems directly how they are planning to address healthcare inequalities, such as the oral health needs of people living in care homes.

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