

Making a Daily Mouth Care Action Plan

A [Daily Mouth Care Action Plan](#) is a living document that you can use to direct daily mouth care activities. **It should be reviewed frequently and updated anytime there are changes in mouth care routines or after a dentist visit.** Some people will need their plan updated more often as they learn new skills or respond to [behavior support](#).



You and the person you support can use the action plan to share about daily mouth care activities and to track progress on oral health goals. You and the rest of the caregiving team can provide more consistent, predictable care for the people you support when you communicate about goals and progress.

An adult with a disability may be able to complete all steps independently. They may also need support caring for their mouth. The [Daily Mouth Care Action Plan](#) includes a section about an individual's level of participation in daily mouth care.



Create and Track Oral Health Goals

The [Daily Mouth Care Action Plan](#) includes space to create and track goals related to nutrition, daily mouth care and dental visits.



Nutrition Goals

The nutrition section includes space to create action steps to move the person you support from where they are now to where they want to be. This section should be updated as steps change or are achieved.

Example:

Where we want to be: T. eating a serving of fruits or vegetables at each meal.

Where we are: T. eats approximately 1 serving of fruit or vegetable a day.

Before: T. helps plan meals and chooses the fruit or vegetable.

During: T. serves self the fruit or vegetable.

After: At end of each week, talk about what fruits or vegetables T. did or did not like.

Daily Mouth Care Goals

The daily mouth care section is designed to help caregivers plan for daily mouth care sessions. This section should be updated as steps change or are achieved.

Example:

Where we want to be: Find toothbrush adaptation that allows M. to brush independently.

Where we are: Looking for a toothbrush adaptation that works for M.

Before: Choose an adaptation for M. to practice (add grip to a toothbrush, use hair tie, etc.).

During: Observe M. while brushing, give reminders as needed.

After: Discuss adaptation with M., decide to continue practicing w/ adaptation or try different adaptation.

See [Appendix A12](#) for more ideas.

Dental Visit Goals

The dental visit section should be completed with the dental team and can be updated at each dental appointment. The purpose of this section is to make dental appointments as successful as possible.

Example:

Where we want to be: G. tolerates dentist touching his mouth during exam.

Where we are: G. sometimes lets dentist touch mouth for a few seconds.

Before: During daily mouth care, gently inspect G.'s mouth with gloved fingers.

During: Leading up to appointment, remind G. that dentist needs to examine his mouth.

After: Dental team discusses how well G. tolerated exam, adjust plans as needed.



For each section, there is space for the caregiver to write a plan for before, during and after the activity.

- **Before:** What do you do to prepare for the activity (e.g., distractions, time of day).
- **During:** What are the skills or tasks you are currently working to achieve?
- **After:** What are the incentives you are using?

In the “Other Information” section of the [Daily Mouth Care Action Plan](#), you should list any behavior supports such as incentives, desensitization or shaping. If needed, make a note where other caregivers can find the entire behavior support plan.

Oral Health Consent Forms

Oral health care procedures, including any changes to the [Daily Mouth Care Action Plan](#), may require written permission from a person’s legal guardian.



The “Other Information” section of the action plan can include:

- The best time of day for mouth care.
- Where mouth care sessions take place.
- Guidance techniques such as hand-over-hand, a gentle touch or verbal cues.
- Additional behavior support information.

Daily Mouth Care Action Plan

Instructions: Use a new action plan when goals change or are achieved.

Name: _____ Dentist: _____

Phone: _____

Date created: _____ Next Appointment: _____

Level of Participation: _____

Nutrition Goal

Date Goal Achieved: _____

Where we want to be: _____

Where we are: _____

Before: _____

During: _____

After: _____

Daily Mouth Care Goal

Date Goal Achieved: _____

Where we want to be: _____

Where we are: _____

Before: _____

During: _____

After: _____

Dental Visit Goal (complete with a member of the dental team) Date Goal Achieved: _____

Where we want to be: _____

Where we are: _____

Before: _____

During: _____

After: _____

Products and Medications: _____ Other Information: _____

Daily Mouth Care Action Plan

Instructions: Use a new action plan when goals change or are achieved.

Name: Kylie L. Dentist: Dr. James at Family Dental

Phone: (123) 456-7890

Date created: 1/2/22 Next Appointment: Wednesday, July 6 at 2 pm

Level of Participation: Independently brushes, verbal guidance with flossing

Nutrition Goal

Date Goal Achieved: _____

Where we want to be: Sugary beverages are a once-in-awhile treat

Where we are: K. drinks one soda a day

Before: Weekly meal plan with K., encourage K. to fill in water as a drink for most meals

During: Serve K. water at every meal, even if K. chooses soda too

Offer praise if K. chooses water over soda or finishes water at meal

After: Incentive: Saturday movie night if K. drinks less than 3 sodas in a week

Daily Mouth Care Goal

Date Goal Achieved: _____

Where we want to be: K. flossing all teeth without reminders

Where we are: K. needs reminders to stay on task while flossing

Before: Offer praise if K. starts flossing after brushing, remind if needed

During: Offer praise if K. flosses entire bottom row of teeth without redirection

Offer praise if K. flosses entire top row of teeth without redirection

After: Incentive: short walk around the block if K. stays on task flossing both rows

Dental Visit Goal (complete with a member of the dental team) Date Goal Achieved: _____

Where we want to be: K. to be comfortable, cleaning done efficiently and quicker

Where we are: K. fidgets, turns head. Appt. take longer causing K. more discomfort.

Before: Pack headphones and fidget item of K.'s choice for the appointment

During: 1. K. wears headphones and listens to music from phone

2. If K. start moving too much during cleaning/exam, offer fidget toy

After: Review with dental staff & decide if plan worked/what adjustments needed

Products and Medications: Biotene Dry Mouth Oral Rinse after brushing and flossing

Other Information: K. may need a verbal reminder to stay on task during mouth care

Motivational Interviewing: Action Plan

Better Conversations, Better Oral Health

Use these motivational interviewing (MI) strategies to talk about oral health with the person you support.



MI Strategy for the Person You Support

Use summarizing to help create plans for daily mouth care.

Example:

“Let me make sure I understand you. You want to change when you brush your teeth. You would rather brush right after dinner, not right before bed. You don’t like when we interrupt your show. That frustrates you. Am I missing anything?”



Adapting MI Strategies

Remember to use short, simple sentences.



MI Strategy for Guardian or Family Member

Use reflective listening to rephrase what family members say about oral health goals.

Example:

“You’re worried what will happen if [person you support] doesn’t start making healthier food choices.”

“It sounds like you want to create a goal for [person you support] related to flossing.”



Next Steps

These are additional resources that will help you and the person you support keep thinking about this topic after your conversation is over:

- [Daily Mouth Care Action Plan](#)
- [Daily Mouth Care Action Plan: Brainstorming Goals](#)
- [Action Plan Video](#)

