

Conclusion and further recommendations and actions

Smiling matters appears to have had an impact on the care homes' awareness and handling of oral health care. However, more still needs to be done to make sure that people living in care homes are supported to maintain and improve their oral health.

1. We recommend that the Office for Health Improvement and Disparities include care home providers in future adult oral health surveys. We also recommend that they consider commissioning a specific survey to understand the level of oral health care for people living in care homes and whether more resource needs to be targeted to this area.
2. We recommend that care home providers raise awareness of what people should expect when they enter a care home and their families, such as:
 - getting an oral health assessment on admission to a care home
 - how much treatment should cost, and who is exempt and entitled to free treatment on the NHS.
3. As recommended in Smiling matters in 2019, we suggest that a mandatory oral health component is introduced in the next iteration of the Care Certificate.

4. We suggest that updated guidance is developed to support:
 - dental professionals to treat people in care homes – particularly on-site domiciliary care
 - care home staff to support people living in care homes who are resistant to oral health care and support.
5. To improve collaboration in planning for the health and wellbeing of people in their area, we suggest that commissioners:
 - promote cross-sector integration between care home and dental professionals
 - use funding to improve oral health in care homes – through local initiatives like peer-to-peer support schemes or increasing dental access and training.
6. We suggest that the government continues to consider making people's summary care records available to dental teams to improve the safe delivery of care.
7. We suggest that the government considers automatic exemption from NHS dental charges when people move into a care home.
8. We recommend that CQC:
 - continues to improve how oral health care is included as an important part of the findings we feed back to care home providers and the public, including when we move to our new regulatory model with a single assessment framework
 - reviews how we can use our incoming new powers to assess integrated care systems and local authorities to ask systems how they are planning to address the oral health needs of people living in care homes, as part of the assurance that health inequalities are being addressed.