

Delta Dental Hospital Oral Care Proactive Education Program (HOPE)

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Background

Banner – University Medical Center Phoenix (BUMCP) is an Age Friendly Health-System. About 40% of patients managed at BUMCP are over age 65 representing more than 10,000 older adults per year.

Oral Health is a strategic hospital-based intervention for Banner Health.

Evidence based oral health practice for hospitalized older adults has several benefits:

- Oral health can improve systemic health and quality of life.
- Encouraging oral care 2x per day and early mobilization through education and patient engagement during hospitalization can decrease complications of aspiration pneumonia and patient length of hospital stay.
- Patient engagement related to oral health and early mobility can improve overall patient engagement, experience, health and wellbeing while hospitalized.

In August 2021, Banner Health and Delta Dental of Arizona Foundation established a partnership to prioritize oral health in the hospital, applying cost-effective solutions to identify, address and prevent oral health issues. An integral component of this program is the establishment of the role of an Oral Health Navigator.

Purpose

Develop a Protocol for Oral Care that aligns with Banner Health’s Initiative to reduce Hospital Acquired Pneumonia for Non-Ventilator dependent hospitalized patients.

Phase 1: Develop, Implement, and Study Oral Care protocol at BUMCP Medical Surgical Units

Phase 2: Implement and Scale Oral Care protocol at BUMCP Progressive Care units

Methods and Results

Setting: A large academic medical center: Banner – University Medical Center Phoenix.

Design: Quality Improvement

The Model for Improvement developed by Associates in Process Improvement as listed by Institute for Healthcare Improvement (IHI) is utilized for this work (see Figure)

Team: HOPE Oral Care RN Navigator, Physicians, RNs/PCAs, Speech and Language Pathologists, Dental Hygienist, Clinical Quality, Safety and Research team members.

Nursing Survey to identify Challenges with Oral Care: To identify nursing challenges to providing oral care, a self-administered survey was undertaken.

A total of 59 multidisciplinary staff participated in the initial education for oral care.

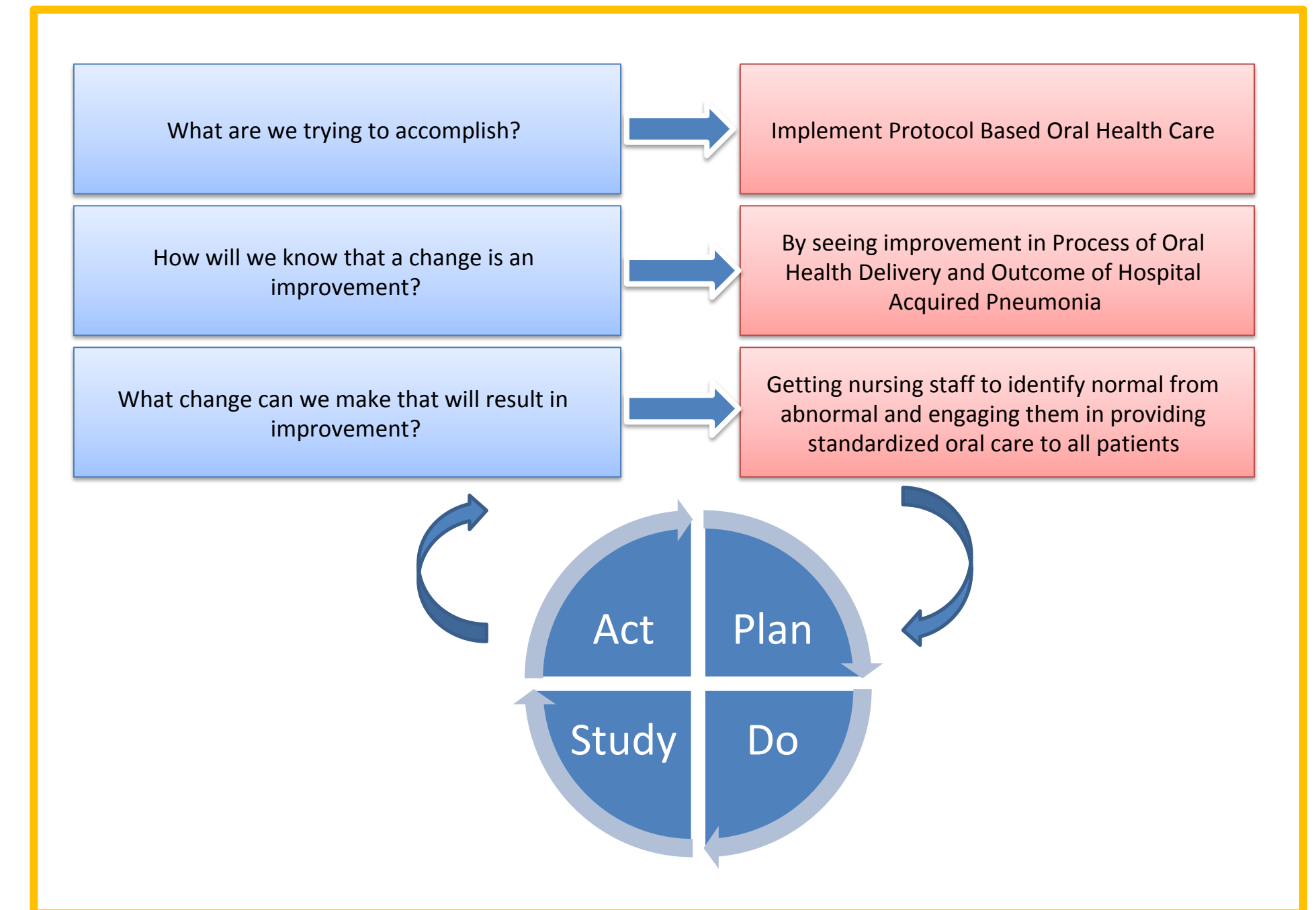
32 RNs and 16 PCAs took the pre-survey for a total of 48 responses.

Results: Knowledge and Attitudes of Oral Care in the Hospital Setting:

We identified the following concerns after implementing the *HOPE Dental Program pre-survey*:

- Questions written in dental terminology were not well understood by participants (15%) (e.g., herpetic lesions, edentulous)
- Use of oral care sponge swabs was considered an effective way to remove plaque (40%)
- The term “comfortable” when describing a position in Bedside Mobility Assessment Tool (BMAT) was not well understood (28%)
- Recognizing that dentures should not be worn at night (17%)
- Not knowing the role of the oral care navigator (30%)
- Participants who expressed less than “very satisfied” in providing appropriate oral care (50%)

Figure: Quality Improvement Process Design



Next Steps

Improve nursing confidence for the following:

1. Identify normal from abnormal mouth
2. Provide basic oral care using Oral Care Protocol
3. Consult oral health nurse navigator for abnormal mouth

References:

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Warren, C., Medei, M. K., Wood, B., & Schutte, D. (2019). A Nurse-Driven Oral Care Protocol to Reduce Hospital-Acquired Pneumonia. The American journal of nursing, 119(2), 44–51. <https://doi.org/10.1097/01.NAJ.0000553204.21342.01>