

# Oral Care in Continuing Care Settings: Collaborating to Improve Policies & Practices

*The 'Brushing Up on Mouth Care' Project*

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**This research focused on daily mouth care for dependent older adults living in long-term care facilities.**

**GOAL:** *To inform policies and programs to promote better mouth care practices for seniors living in long-term care and to develop strategies for improved staff training and institutional care planning.*

## Why did we do this research?

Canadians are living longer and are aging with more of their natural teeth than ever before. Older adults with certain physical and medical problems may have difficulty with their daily mouth care and many depend on others to help them with these tasks. This places them at risk for developing oral diseases. The percentage of older adults who rely on continuing care services is also increasing. Research suggests that often there is not enough support or resources within continuing care to provide effective daily mouth care. Sometimes mouth care is not seen as a priority when compared to other personal care needs. We wanted to learn more about what it takes to ensure that proper daily mouth care is carried out for those who require assistance and for those who are providing the assistance. Therefore, we examined the types of things that influence daily mouth care in long-term care. Our goal was to learn from the experiences of those who care for older adults in order to find better ways to integrate mouth care into daily routines.

## Who conducted this research?

Researchers from Dalhousie University partnered with three long-term care facilities on Nova Scotia's eastern shore (the "Tri-Facilities"). Our research team included a variety of health care providers (dentists, dental hygienists, physician, nurse, dietician), health promotion experts as well as health care administrators, seniors, and representatives from community colleges and government.



## A Collaborative Effort

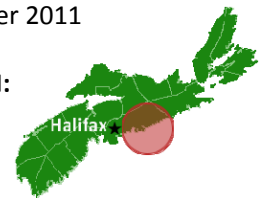
A key feature of this research was to ensure that our findings would be relevant to those who would use the information. Early in the research, we asked our Tri-Facilities partners what they would like to gain from this project. They suggested information and resources that would make daily mouth care a more formal process that would include: training and education; orientation on

## PROJECT TIMELINE:

July 2008 - December 2011

## PROJECT LOCATION:

The Eastern Shore of Nova Scotia



- The Birches Continuing Care Centre
- Braeside Nursing Home
- Duncan MacMillan Nursing Home
- Adult Day Clinic Eastern Shore Memorial Hospital

## FUNDING:

**\$142,697**  
over 3 years



***Mouth care is often inadequate for those who depend on others to carry out tasks of daily living.***

## PARTNERS:

- Faculty of Dentistry - Dalhousie University
- Atlantic Health Promotion Research Centre (AHPRC)
- Eastern Shore Tri-Facilities - Capital District Health Authority, NS
- Nova Scotia Community College
- Continuing Care Branch - Nova Scotia Department of Health
- Nova Scotia Department of Seniors
- The Nova Scotia Group of IX Seniors
- The Health Association of Nova Scotia

mouth care for frontline staff; development of an "oral health care" toolkit for residents; and evidence based recommendations for policy within the organization. By bringing administrators and front-line care staff together with researchers, we were able to think about the work in creative and practical ways, develop realistic goals, and plan and carry out activities that would be most meaningful.

## What did we do?

### Step 1: Gathered Information

We spoke directly with older adults in the Tri-Facilities as well as people involved in their care. We examined a broad range of documents related to personal care in the Tri-Facilities. The information and feedback we collected was used to plan further steps in the project.

### Step 2: Developed the 'Brushing Up on Mouth Care' Program

A one-day workshop was held to design a set of actions that would integrate mouth care into organizational policy and personal care practices in each of the three long-term care settings. Participants included a variety of health professionals, educators, government and seniors' representatives and most importantly, administrators and front-line care staff from the Tri-Facilities.

### Step 3: Implemented the 'Brushing Up on Mouth Care' Program

The "Brushing Up on Mouth Care" program was implemented in the 3 long-term care facilities for a period of 12-months. Concepts arising from the workshop were developed and reviewed in each of the facilities as they were introduced. The program involved education and training for nursing staff and care providers, oral health toolkits and care cards for all residents, and guidelines for oral assessment and care planning. Feedback from the care staff and managers was used to expand and improve ideas. These "back and forth" discussions helped ensure that the following "Brushing up on Mouth Care" features were user-friendly and relevant:

**"...and a lot of times you'll go in and brush somebody's teeth - their own teeth, and you can tell that their teeth haven't been done for days or probably weeks and that's heartbreaking."**

**- Care Provider**

- Care cards
- Toolkits
- Assessments (daily and annual) & care planning tools
- Information sheets
- Posters
- Oral health education sessions and videos for care staff

### Step 4: Evaluated the 'Brushing Up on Mouth Care' Program

The evaluation plan was designed so that the research team could see how well the 'Brushing Up on Mouth Care' program was being used at the 3 long-term care facilities. Feedback from each site was gathered at various points throughout the year. A variety of methods were used to gather information including work-life surveys, diary studies, oral care records, interviews with site managers, evaluation surveys, and researcher field notes.



## What did we find?

The 'Brushing Up on Mouth Care' program resulted in:

- Increased awareness of the importance of oral health amongst care providers, managers, and administrators.
- Greater efficiency in the delivery of daily mouth care due to care providers feeling supported by the presence of necessary resources and guidelines.
- Formalized oral health assessments being adopted into practice.
- Oral health champions emerging at each long-term care site. They played an important role in the upkeep of the program. Management had a clear responsibility to support the champions.

## OUTPUTS

### Guiding Principles

*Guiding principles ensure standards are met while allowing for flexibility between sites.*

### Policy Suggestions

*The findings of this research project show that provincial standards for oral care would help make sure that mouth care remains a normal part of daily personal care as we age.*

### Next Steps

*A Canadian Institutes of Health Research Knowledge Translation Supplement grant (February 2012) has provided additional funding to continue this important work.*

### INVESTIGATORS:

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