

# Mouth Care Matters: Putting the mouth back into the body

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## Aim

To improve awareness, assessment and administration of effective mouth care across the Trust, by providing education and training. To also improve patient experience and reduce prolonged hospital admissions.

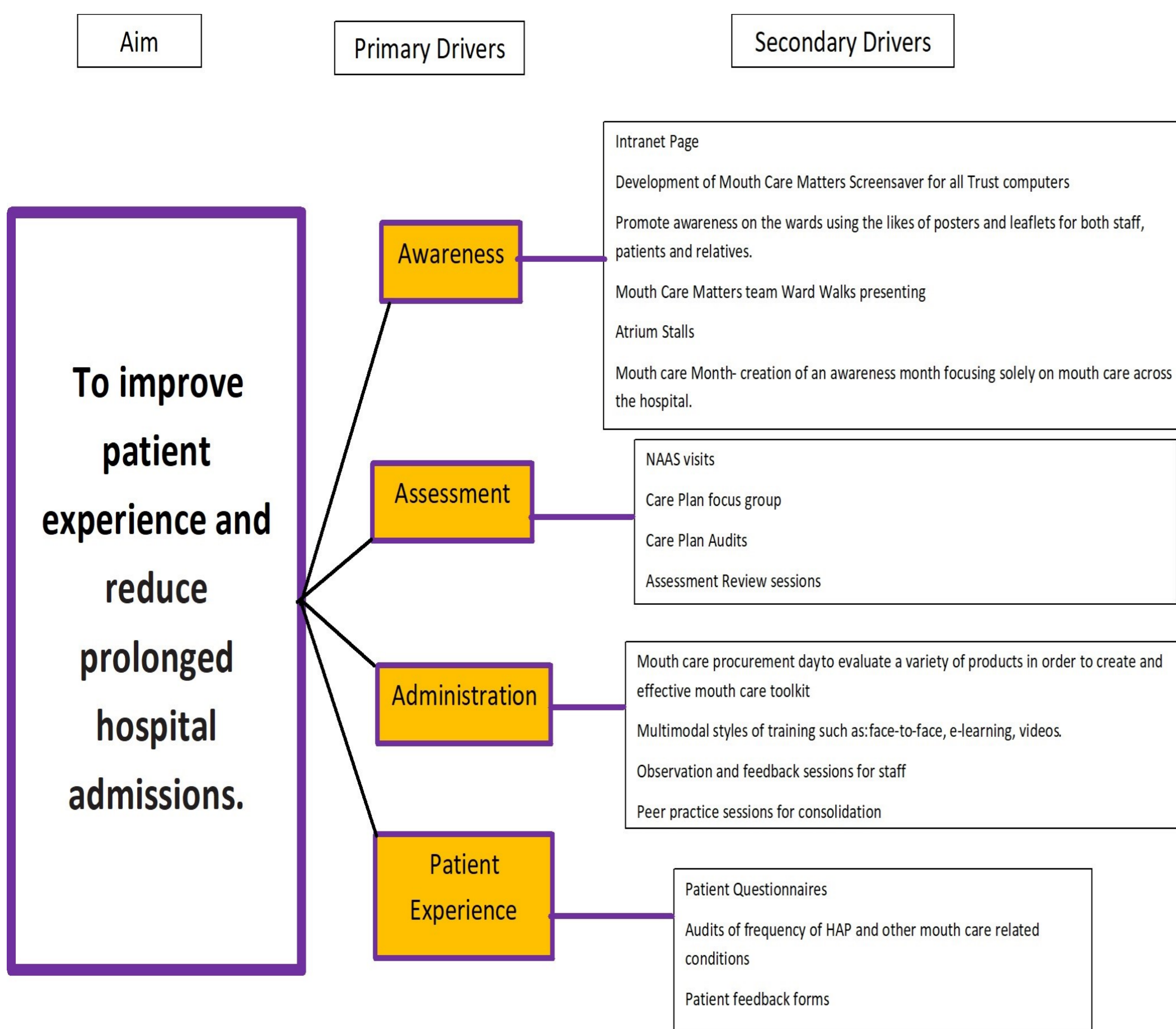
## Introduction

Mouth care has a massive influence on our general health and wellbeing but is often seen as a low priority (Public Health England, 2017). Evidence suggests that hospitalisation is associated with the deterioration of oral health, particularly amongst those who are unwell or immobile due to hospital treatments, neglect their normal oral care practises or are unable to carry them out. Poor oral health can affect our ability and desire to eat and drink; impact negatively on communication; and has an overall effect on dignity and well-being (World Health Organisation, 2017). This in turn has been linked to an increase in hospital acquired infections; poor nutritional intake; longer hospital stays, and general increased care costs (Binks *et al.*, 2017). Previous research has reported that healthcare professionals get limited or no oral health training and report numerous barriers for carrying out mouth care as a result of this, such as feeling uncomfortable or lack of knowledge of what to look for or how to carry out oral care. Health Education England, initiated the 'Mouth Care Matters' campaign in 2015 to improve the mouth care of adults in care homes and hospitals. GHNHSFT Mouth Care team plan to build upon this and improve oral health within the trust.

## Methods

Questionnaires were completed by nursing staff and patients across five pilot wards (Avening, 2B, 6A, 6B and 8B). These questionnaires collected a mixture of quantitative and qualitative information focusing on knowledge and experience of effective mouth care for nursing staff and exploring barriers. The patient questionnaires focused on changes to oral care during hospital stays and access to appropriate oral care equipment and resources. A product procurement session was held, allowing a variety of staff to sample and provide feedback on various mouth care products. This information together will inform the mouth care team to develop information and products packs as well as developing and delivering training resources .

Table 1. Driver Diagram



## Results

The main findings from the questionnaires identified that 50% of nursing staff had not received training in assessing and providing mouth care during their training or induction period. The main barriers reported to delivering mouth care included lack of time, training and resources as well as patient compliance. It was also identified that 79% of nursing staff felt they would have benefited from further training in both assessment and carrying out effective mouth care. Patients reported not being asked by nursing teams if they required support with mouth care or the provision on equipment (12 out of 23) and 25% of patients felt their mouth care and oral health had worsened during their hospital stay.

The procurement sessions highlighted user friendly/preferred products that staff would feel most comfortable using.

## Discussion

- The results highlight the need for further education and training for staff regarding mouth care assessment and the importance of oral hygiene.
- There is currently limited mouth care products available for nursing teams to utilise and this could also be hindering the provision of effective mouth care being administered on the ward.
- It is suggested that an increase in mouth care awareness and training may lead to an increase in patient health-related quality of life and a decrease in prolonged hospitalisation, aspiration pneumonia cases and unnecessary care costs.

### References:

- Binks, C., Doshi M. and Mann J. (2017) Standardising the delivery of oral healthcare practice in hospitals. *Nursing Practice*.
- Public health England (2017) delivering better oral health: a evidence –based toolkit for prevention
- World Health Organisation (2017) Oral health fact sheet.