

Oral Care Implementation to Improve Patient Outcomes

Katharine Martinez, MPH, RDH Phoenix Children's kmartinez3@phoenixchildrens.com



Background

- The oral systemic connection has garnered much attention in the past few years as to the role of the oral cavity and its translocation of oral bacteria to other sites causing hospital acquired infections (HAI).
- $\widehat{\mathbb{W}}$ Ensuring proper oral care is crucial to protecting our immunocompromised patients from acquiring an HAI.
- The role of oral health educator is highlighting the importance and need of oral care at Phoenix Children's. This position is trailblazing for other hospitals across the Nation.

Description

- The oral health educator role has been created to integrate oral care into medicine.
- \bigcirc In the capacity of this role, hospital wide changes in oral care products, interventions, protocols and education have been implemented.
- The goal is to decrease the incidence of HAIs by utilizing better oral care techniques to lower bacteria throughout the oral cavity.

Pediatric Hematology/Oncology/BMT

Mucosal Barrier Injury (MBI), Oral

organisms only pre and post

implementation of an Oral Health Program

Intervention

The oral health educator role to date....

- Utilized evidence-based research to bring in oral care products to help reduce HAIs and improve oral care compliance.
- Consult high risk patients to provide individualized oral care instruction and recommendations to help prevent a hospital acquired infection.
- Perform rounding with quality and infection prevention to support nurses in providing high level oral care on patients.
- Sits on HAI committees to reduce oral bacteria.
- Inpatient educator to educate nurses, care providers, patient/families on proper oral care to decreases HAI's.
- Whelp coordinate dental referrals for patients needing inpatient or outpatient dental treatment.
- Provide oral assessments to evaluate oral conditions to help provide guidance to multidisciplinary team.
- Lead quality improvement projects to improve patient outcomes.

Outcomes

- Currently this role is only at Phoenix Children's and recently Texas Children's hospital.
- $\widehat{\mathbb{W}}$ This role is helping to mentor other Children's hospitals on oral care implementation strategies.



Conclusion

- Hospitals with an oral health educator have more customized oral health education, competency, evidenced-based research products and interprofessional collaboration.
- $\widehat{\mathbb{W}}$ Since starting this role and making changes we have seen a decrease in HAIs related to oral bacteria. Specifically, a decrease in oral organism MBI CLABSI's.
- This role has received positive feedback from quality consultants, infection prevention, medical directors, nurse managers, educators, medical staff and nurses.
- $\widehat{\mathbb{W}}$ Patients and families have been highly interested and appreciative of this role and the oral hygiene education given.
- Feedback from oral health trainings showcased that nurses value the role of oral health educator.

Pre/post intervention 1/1/18-12/31/2023 0.8 Oral Interventions begin 6/1/2020 0.6 0.4

Pediatric Hematology/Oncology BMT

Mucosal Barrier Injury (MBI), Oral

organisms

Streptococcus mitis and Rothia mucilaginosa Oral Organism only CLABSI-MBI rate per 1,000 line days

45% 40% 35% 30% 25% 20% 15% 10% 5% 0%

Post-intervention 6/1/20-

12/31/23

Pre-intervention 1/1/18-

5/31/20