

Winter 3-8-2023

Mouth Care is Self-Care

Abigail Waunch
Seattle Pacific University

Katelynn Huot
Seattle Pacific University

Aleya J. Germany
Seattle Pacific University

Oleksandra Shmatok
Seattle Pacific University

Elizabeth M. Cortes
Seattle Pacific University

See next page for additional authors

Follow this and additional works at: https://digitalcommons.spu.edu/shs_nlce



Part of the [Community Health Commons](#), and the [Public Health and Community Nursing Commons](#)

Recommended Citation

Waunch, Abigail; Huot, Katelynn; Germany, Aleya J.; Shmatok, Oleksandra; Cortes, Elizabeth M.; and Firms, Cortney M., "Mouth Care is Self-Care" (2023). *Nursing Leadership in Community Engagement Projects*. 24. https://digitalcommons.spu.edu/shs_nlce/24

This Article is brought to you for free and open access by the Health Sciences, School of at Digital Commons @ SPU. It has been accepted for inclusion in Nursing Leadership in Community Engagement Projects by an authorized administrator of Digital Commons @ SPU.

Authors

Abigail Waunch, Katelynn Huot, Aleya J. Germany, Oleksandra Shmatok, Elizabeth M. Cortes, and Cortney M. Firms

Executive Summary: Mouth Care is Self-Care

Elizabeth Cortes, Cortney Firms, Abigail Waunch, Katelynn Huot, Oleksandra Shmatok, Aleya
Germany

Lydia Green Nursing Program, Seattle Pacific University

NUR4153: Nursing Leadership in Community Engagement

Carol Redfield, DNP, MN, RN

February 22, 2023

Executive Summary: Mouth Care is Self-Care

In February of 2023, six Seattle Pacific University (SPU) nursing students partnered with a Seattle rehab agency to deliver mouth care education while prioritizing the health literacy level of the community. The agency aims to foster an inclusive and empathetic environment that builds a diverse community for those traumatized by homelessness, addiction, and mental health (Recovery Café, n.d.). The nursing group upheld the agency's mission with honor and respect during each project step. The special projects manager of the agency expressed a lack of health literacy among members. Tailoring health literacy to the appropriate education level has significantly improved dental and oral health (Stein et al., 2018). Through assessments, students determined a need for education and support regarding oral hygiene and created the project motto: "Mouth care is self-care; taking care of one's mouth is caring for one's overall health" (Appendix G). This project required collaborative effort in using critical thinking skills to execute the nursing process and deliver appropriate information.

Background

According to King County, in 2020, 11,751 people were homeless in the Seattle and King County region, 53% had shelter, and 47% did not. A 5% increase compared to 2019 (King County, 2020). Additionally, the agency reported 732 members in 2019-2020; of those members, 69% are homeless (Recovery Café, 2020). The nursing group conducted a windshield questionnaire and an initial assessment to identify the education needs of the population. Oral care concerns and lack of resources were common throughout the six nursing student interactions with the members. Periodontal disease increases the risk of cardiovascular disease, coronary heart disease, stroke, and peripheral artery disease (Nazir, 2017). Many members said they

brushed their teeth daily, but oral assessments revealed that most had cavities, missing teeth, decay, or tooth pain.

The King County Hospitals for a Healthier Community (HHC) reports that in 2014-2016, "half of adults with household income below \$15,000 had not visited a dentist in the past year, reflecting long-standing income disparities for dental care" (HHC, 2022). All data considered led the students to formulate the nursing diagnosis of an oral care deficit related to low health literacy, lack of resources, and previous lifestyle choices, as evidenced by low education levels, lack of resources, interaction with group members, missing teeth, reported pain, and tooth decay. Therefore, the project plan assessed the member's baseline behaviors and knowledge regarding oral care, created educational activities to increase health literacy, and provided resources to maintain health. In addition, the project aimed to emphasize oral care as self-care as this helps prevent diseases and tooth loss. Furthermore, presenting oral care as self-care is tailored to the population as they are on a journey to rehabilitate and re-establish healthy lifestyles.

Activities with Rationale

The nursing group spent six consecutive weeks at the agency assessing, implementing, and evaluating. In the first week, the students got familiar with the agency and conducted the windshield questionnaire. The second and third weeks involved nursing students identifying and validating the need for health literacy education. It was a priority to build rapport during these weeks while continuing assessments. Patient-centered focus, active listening, and care for vulnerable populations may increase trust between patients and the healthcare team (Khullar et al., 2022).

The start of implementation began in the fourth week at the agency. First, the students conducted an initial questionnaire to assess the population's baseline behaviors and knowledge

regarding oral care (Appendix A). Based on the results, the students created an educational PowerPoint and presented it during week five. The PowerPoint focused on why mouth care is self-care, the proper way to use hygiene supplies, and alternatives if supplies are unavailable (Appendix G). Studies show that those suffering from alcohol or substance use disorder cannot maintain sufficient health outcomes. Therefore, treatment programs should promote health literacy (Rolova et al., 2021). Furthermore, the nursing group created an educational poster condensing oral care education (Appendix F). Tailoring health literacy to appropriate education levels has significantly improved dental and oral health (Stein et al., 2018). Additionally, the students provided information for further oral care services (Appendix D).

In the sixth week, the nursing group provided the agency with 32 mouth care kits which included: a toothbrush, toothpaste, mouthwash, lip balm, floss, and an educational pamphlet (Appendices E). The students conducted a "post-education" questionnaire to evaluate the effectiveness of the teaching (Appendix B). The group reinforced oral education with a second presentation to close on the importance of preventing diseases and alternatives for mouth care supplies (Appendix G).

Outcomes

Our desired outcome was for members to have the knowledge, supplies, and motivation necessary to perform mouth care. When comparing the pre-teaching and post-teaching questionnaire, there was a 16% increase in members who correctly answered how often one should brush their teeth, an 11% increase in members who correctly identified how long one should brush their teeth, and a 39% increase in how often one should floss (Appendix A & B). The data from our pre- and post- teaching shows an overall increase in oral care knowledge.

Another outcome was providing the necessary supplies to perform mouth care, which was then distributed to each of the agency members present at the presentation. Leftover supplies were given to the agency to resupply members as needed. The members' response to the kits and the presentation showed their readiness to implement a new health behavior distinct to their previous lifestyle choices as they now had the motivation necessary to perform mouth care. During post-teaching assessment, members referred to the teaching by stating, "healthy mouth, healthy body", referring to the emphasis on oral care as self-care and its impact on the health of other body systems. Overall, the desired outcome for the members of the agency was met.

Conclusion

The nursing project of oral care showed positive results with increased health literacy among members. However, the inconsistency of member participation was the most significant limitation. In addition, the student group experienced challenges in accounting for the same number of pre- and post-teaching questionnaire participants. Another limitation was the inconsistency of how participants were questionnaire ed. Students should have established a baseline to perform questionnaire s. Lastly, it is a possibility that interviewees may not truthfully answer our questions as they may find the true answer embarrassing to questions such as "how often do you brush your teeth?".

If the students could conduct a long-term assessment, this would consist of reassessing knowledge with our questionnaire, assessing practices by conducting another oral assessment, and finding out if they used the supplies given the kit and if they have gone to the clinics that were referenced. If we could revisit the agency and see the impact of this project, we would hope to see our posters displayed, members verbalizing greater comfort with their mouths, and see an improvement upon oral assessment. The agency still has a list of the dental clinic references we

provided and heard that members could get help from those clinics. Most of all, we hope that the impact of our project is that members adopt an attitude of mouth care being self-care.

References

- Constantine, D. (2020, July 1). *Point-in time count estimates a 5 percent increase in people experiencing homelessness, newly updated data dashboards reveal more people receiving shelter, and services*. King County.
<https://kingcounty.gov/elected/executive/constantine/news/release/2020/July/01-homeless-count.aspx>
- King County Hospitals for a Healthier Community (HHC). (2022). *King county community health needs assessment*.
https://kingcounty.gov/depts/health/data/community-health-indicators/~/_media/depts/health/data/documents/2021-2022-Joint-CHNA-Report.ashx
- Khullar, D., Prasad, K., Neprash, H., Poplau, S., Brown, R. L., Williams, E. S., Audi, C., & Linzer, M. (2022). Factors associated with patient trust in their clinicians: Results from the healthy work place Study. *Health Care Management Review* 47(4), 289-296. DOI: 10.1097/HMR.0000000000000336
- Nazir, M. A. (2017). Prevalence of periodontal disease, its association with systemic diseases and prevention. *International Journal of Health Sciences*, 1(2), 72-80.
- Recovery Café. (2020). *2019-2020 Annual report*.
https://recoverycafe.org/blog/rc_report/2019-20-annual-report/
- Recovery Café. (n.d.). *Our mission*. <https://recoverycafe.org/about/mission/>
- Rolova G., Gavurova B., & Petruzelka., B. (2021). Health literacy, self-perceived health, and substance use behavior among young people with alcohol and substance use disorders. *International Journal of Environmental Research and Public Health*, 18(8), 4337.
<https://doi.org/10.3390/ijerph18084337>

Stein, L., Bergdahl, M., Pettersen, K. S., & Bergdahl, J. (2018). Effects of the conceptual model of health literacy as a risk: A randomised controlled trial in a clinical dental context.

International Journal of Environmental Research and Public Health, 15(8), 1630.

<https://doi.org/10.3390/ijerph15081630>

Appendix A
Pre-Teaching Questionnaire

PRE-TEACHING QUESTIONNAIRE			
<i>n=18</i>			
Question	Response	Total	Percent (%)
1. Do you brush and floss your teeth two times a day?	Yes	8	44%
	No	10	55%
2. How often should you brush your teeth?	2-3x daily	9	50%
	<2x daily	2	11%
3. How long should you brush your teeth?	≥2 min	8	44%
	Other	1	5%
	Don't know	5	27%
4. How often should you floss?	2-3x daily	7	38%
	<2x daily	1	5%
	Don't know	7	38%

Appendix B
Post-Teaching Questionnaire

POST-TEACHING QUESTIONNAIRE			
<i>n=9</i>			
Question	Response	Total	Percent (%)
1. Do you brush and floss your teeth two times a day?	Yes	7	77%
	No	1	11%
2. How often should you brush your teeth?	2-3x daily	6	66%
	<2x daily	1	11%
3. How long should you brush your teeth?	≥2 min	5	55%
	Other	0	0%
	Don't know	4	44%
4. How often should you floss?	2-3x daily	7	77%
	<2x daily	1	11%
	Don't know	0	0%
5. Did you find this information helpful?	Yes	6	66%
	No	1	11%
6. Do you feel you could teach others?	Yes	7	77%
	No	2	22%

Appendix C Mouth Care Tri-fold brochure



- ★ **Caring for your mouth is caring for your health!**
- ★ **Mouth care prevents serious disease**
 - Heart problems
 - Diabetes



CDC: Oral health conditions.

Brush twice a day, twice a day, no toothpaste, no problem. No toothpaste, no problem. No toothpaste, no problem.

- Wet a napkin or paper towel
- Wrap wet napkin around pointer finger
- Apply toothpaste, or use just wet
- Rub around all sides of your teeth, gums, and tongue
- Rinse with water and spit!



No supplies? No problem!

Extra Help

Downtown Public Health Center
206.477.8300
Reserved for Homeless adults and teens. Provides medical and dental services.



University of Washington School of Dentistry

206.616.6996 Inquires
206.543.5850 Limited Urgent Care

Supervised students provide dental care. Up to 30-40% lower than other dental clinics.

Check out at the front desk of the Recovery Cafe for more options

Check out at the front desk of the Recovery Cafe for more options.

- Wrap floss around middle fingers on both hands
- Use your thumb to gently slide floss between teeth all throughout mouth



- ★ Time to floss!
- Spit toothpaste and rinse with mouthwash OR water
- Include back of teeth and tongue!
- ★ Move back and forth all around teeth for 2 minutes
- Apply toothpaste and wet toothbrush.

How to use Your Mouth Care Tools

Mouth Care



Brought to you by:

Seattle Pacific University Nursing Students



- ★ Aim to use 2 times a day!



- ★ Floss
- ★ Toothpaste
- ★ Toothbrush

Included Tools

Appendix D Dental Care Referral Sheet

Dental Care Resources



Reduced or Sliding Scale
(Pay based on income)

Downtown Public Health Center

- 206.477.8300

Reserved for Homeless adults and teens.
Provides medical and dental services.

University of Washington School of Dentistry

- 206.616.6996 Inquires
- 206.543.5850 Limited Urgent Care

Supervised students provide dental care. Up to 30-40% lower than other dental clinics.

Union Gospel Mission

- 206.621.7695 Ask for Juanita

Volunteer dentists provide services. Pay based on income.

International District Clinic

- 206.788.3757

Reduced or pay based on income. Offers insurance assistance for uninsured individuals. No one will be denied services if they are unable to pay.

Country Doctor Community Health Centers – Dental Clinic

- 206.299.1611

Pay based on income for uninsured individuals.

Appendix E
Mouth Care Supply Kit



Appendix F
Mouth Care Poster

MOUTH CARE

NO SUPPLIES? NO PROBLEM

Brochures available with more information at Recovery Café desk.




BRUSH TWICE A DAY



Brush your tongue, top teeth, and bottom teeth; morning and night for 2 minutes

NO TOOTHBRUSH OR TOOTHPASTE?



You can use:

- A wet napkin
- Your fingers

Make sure to rub your teeth for 2 minutes

FLOSS TWICE A DAY



Insert floss in between teeth and use a zig-zag motion. Floss once in the morning and at night.

NO FLOSS?



You can use:

- Chewing Gum
- The tip of a straw
- Tape folded in half
- Your fingernails

Anything you can find to help remove stuck food and plaque from your teeth

RINSE YOUR MOUTH



Rinsing your mouth with mouthwash or water helps to remove food & bacteria. Helps to get rid of bad breath!

NO MOUTHWASH?



You can use:


- Water
- Water with salt or baking soda

This helps disinfect your mouth and remove stuck food.

Brought to you by SPU nursing students

Appendix G Mouth Care PowerPoint

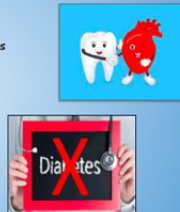
Mouth Care is Self Care!



Seattle Pacific University Nursing Students
Oleksandra, Courtney, Abi, Katelynn, Elizabeth, Aleya

Why Do We Need It?

- ★ **Prevent health complications**
 - Germs can enter into our blood
 - Heart, stroke, diabetes, lung problems
- ★ **Prevent tooth loss**
 - Plaque buildup
 - Tooth decay, gum infection
- ★ **Whiter brighter smile!**
 - Smile with confidence
- ★ **Feeling so fresh and so clean**
 - Food is everything!



Mouth Care Tools

Brushing-> Batman


- ★ Ready, set, good health!
- ★ 2 x 2 Rule: 2x a day for 2 minutes
- ★ Healthy mouth, healthy life
- ★ Teeth and tongue all in one

Floss-> Robin


- ★ Ready, set, work it!
- ★ Breaks up germs and food between teeth
- ★ Zig zag, up and down between teeth
- ★ Every tooth matters!

Mouthwash-> Batgirl!

- ★ Ready, set, rinse!
- ★ Brushing reaches 25% of mouth
- ★ Swish for 30 seconds
- ★ Bye bye germs and bad breath




How To Use the Tools!



No supplies? No problem!


- ★ Wet a napkin or paper towel
- ★ Wrap wet napkin around pointer finger
- ★ Apply toothpaste, or use just wet!
- ★ Rub around all sides of your teeth, gums, and tongue
- ★ Rinse with water and spit!



When To Get Extra Help!

- ★ Constant bad breath
- ★ Bleeding or sore gums
- ★ Swelling or pain in mouth area
- ★ Sores in mouth, gums, or lips

Dental Care Resources



[Bainbridge Public Health Center](#)
[University of Washington School of Dentistry](#)
[United States Military](#)
[International Dental Clinic](#)
[Seattle Pacific University Health Center - Dental Clinic](#)

Reduced or Sliding Scale
 (Ply based on income)

Appendix H
GANTT Chart

Gantt Chart for Agency	Project Goal: Promote health maintenance and health literacy									
<i>Tasks</i>	2 1/1 1	3 1/ 18	4 1/ 25	5 2/ 1	6 2/ 8	7 2/ 15	8 2/ 2	9 3/ 1	10 3/8	Initial
Review Gantt chart, strategize, delegate tasks	X	X	X	X	X	X	X	X		Group
Team Process Work										
Team agreement	X									Group
Weekly Report		X	X	X	X					Group
Continued research of population/ health care management	X	X	X	X						Group
Communicating with group about progress and ideas	X	X	X	X	X	X	X	X		Group
Assessment of Community										
Windshield questionnaire	X									Group
Context: Local/ National Statistics, Cultural <ul style="list-style-type: none"> • King county health • CDC • WHO • Literature based statistics 		X	X	X						Group
Factors of social equity <ul style="list-style-type: none"> • Lack of resources, mode of transportation, financial instability, access to healthcare, unstable housing, disability, social determinants 	X	X	X							Group
Review of relevant literature <ul style="list-style-type: none"> • EB article about health maintenance/ dental hygiene from each team member 		X	X	X						Group
Diagnosis: Health needs of target population										
Priority diagnosis <ul style="list-style-type: none"> • Oral-care deficit r/t low health literacy, lack of resources, and previous lifestyle choices A.E.B low education level and expressed lack of resources 	X	X								OS & CF
Additional diagnosis <ul style="list-style-type: none"> • Ineffective health maintenance r/t insufficient finances and lack of resources A.E.B. expressed lack of knowledge and failure to perform health maintenance behavior. 	X	X								AW & KH
Other <ul style="list-style-type: none"> • At risk for impaired skin integrity r/t failure to make health maintenance choices and lack of resources. 	X	X								AG & EC
Planning and Outcomes Identification										
Select priorities <ul style="list-style-type: none"> • Assess patient's dental literacy level • Gather evidenced-based oral hygiene literature 		X	X	X						Group

<ul style="list-style-type: none"> Connect with organizations to gather supplies Find referrals to dental care assistance Create oral hygiene handouts 											
<ul style="list-style-type: none"> Framework/ model to guide work Gantt chart Weekly review of project Issue/ conflict management Goal/ progress tracking 	X	X	X	X	X	X	X	X			Group
<p>SMART Goals: Cultural/ socioeconomic</p> <ul style="list-style-type: none"> Members will be provided with oral resources by end of week 6 (2/8) Members will be able to properly demonstrate oral hygiene by the end of week 7 (2/15) 					X	X					AG & EC
<p>SMART Goals: Cultural/ socioeconomic</p> <ul style="list-style-type: none"> Members will be educated about the importance of oral care by the end of week 6 (2/8) Members will identify resources in their community for oral hygiene week 7 (2/15) 					X	X					OS & CF
<p>EB interventions/ Prevention levels: APA resources</p> <ul style="list-style-type: none"> Group will send weekly articles to librarian Oleksandra will store and keep track of articles 	X	X	X	X	X						OS
<p>Sustainability, health equity, cultural sensitivity</p> <ul style="list-style-type: none"> Create and provide posters about dental hygiene Include resource info for dental hygiene assistance Provide education at members health literacy level 					X	X					AW & KH
<p>Intervention evaluation plan: method/ literature review</p> <ul style="list-style-type: none"> Ask members to demonstrate oral supplies and explain importance of use Create questionnaire to test members knowledge; assess intervention and incorporate the teach back method about oral care education. 					X	X					Group
Implementation											
<ul style="list-style-type: none"> Hygiene assessment station 				X							Group
<p>Project deliverable in coordination w/ agency</p> <ul style="list-style-type: none"> Present Project to Members 					X						AG/ EC
<p>3. Oral hygiene handout</p> <p>Project deliverable in coordination w/ agency</p> <ul style="list-style-type: none"> Oral supplies 					X						OS/ CF
<p>5. Demonstration of oral products</p> <p>Submit project deliverable to Agency/ SPU</p> <ul style="list-style-type: none"> Submit final presentation by March 1st 									X		AG/ EC
<p>Present project to agency</p> <ul style="list-style-type: none"> Present Final project during week 10 (3/8) 										X	AG/ EC
Evaluation											

