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STORIES OF IMPACT FROM MOUTH CARE MATTERS GRADUATES

"I am so thankful I took the Mouth Care Matters class! It helped me learn why Janice did not want to eat due to sores on her tongue. Even with 19 years of knowledge, it's great to refresh your skills, keep an open mind and learn new things to show others how to provide



better oral care for our residents." – **Sadie Fuson**, CNA (Sadie also observed and reported an abscessed tooth and thrush in other residents who, as a result, received proper treatment.)

I had a resident who was complaining of pain in the back of her mouth. I observed the spot, reported to the nurse, and a dentist appointment was made. She went to the dentist, and they discovered that she had cancer.



We were able to switch oral rinse with one tenant to help with his dry mouth issues.
We are getting more oral care done, especially in our memory care unit.

I just find that I complete much better oral care... and report any concerns I find. I know I take much greater pride and personal satisfaction in the quality of care I provide for elderly residents than I ever have before. I believe I am providing a much improved oral care service than I have before taking the Mouth Care Matters program.

"I learned more through Prepare to Care and Mouth Care Matters than I did through the CNA training. The Mouth Care Matters slides grossed me out, but because of the training, I was able to comfort an agitated individual who was in hospice care simply by cleaning the individual's mouth." – **Thomas Anderson**, Certified Nursing Assistant

"Prepare to Care and Mouth Care Matters give us the confidence to do the job more effectively and to better serve our residents and their families." – **Audra Short**, Resident Assistant, Edencrest at Riverwoods (Des Moines)

"I got my CNA through a high school class, but Prepare to Care

and Mouth Care Matters are different from the CNA class because it gets deeper into the training and includes information on ethics and professionalism."

- **Cierra Hunt**, Resident Assistant, Courtyard Estates at Cedar Pointe (Pleasant Hill)



Mouth Care Matters (MCM) – that says it all. The information and training is very useful in my day to day mentoring of new & current staff. I also use the "Oral Health Observation Guide" that was in our MCM packet. It really shows how important oral hygiene is from an early age to the end of life. Healthy and unhealthy changes. I learned beyond the scope of what I already knew.

 Robin Downey, Certified Nursing Assistant/ Lead Mentor, Stonehill Franciscan Services

Changing Not Only The Lives of People Served But Also Caregivers; Some caregivers learned that they, too, had a need for dental care. Some were referred or provided assistance in accessing services.

MCM GRADUATES





218 GRADUATES





99% RATE TRAINING EXCELLENT OR VERY GOOD





- 197 direct care professionals graduated from Mouth Care Matters;
- 21 Nurses and others have graduated from Mouth Care Matters;
- 21 MCM classes have been held regionally at local community colleges and other organizational sites;
- 99% rated the training excellent or very good;
- 99% would recommend the program to a co-worker;
- 96% said it increased the likelihood that they will continue working in the field of direct care;
- 90% said it increased the likelihood that they will remain with their current employer;
- 99% said they could use the information learned.

Another Mouth Care Matters (MCM) class is scheduled on September 18, 2018 in Davenport. Other classes are pending for a University of Iowa College of Dentistry project.

WHAT IS MOUTH CARE MATTERS?

Mouth Care Matters (MCM) is a one-day specialty training in the area of oral care. MCM was originally designed for home care, hospice, and nurse aides; personal assistants; patient care technicians; and direct support professionals, but the program is also suitable for other health and long term service and support (LTSS) staff including licensed nurses. Family caregivers may also benefit from the training. Taught by dental hygienists who are certified instructors, the program offers practical hands-on skills on how to provide the best oral care possible for lowans of all ages and abilities. One of the greatest take-aways by participants is "a greater understanding about the link between a healthy mouth and one's overall health and well-being."

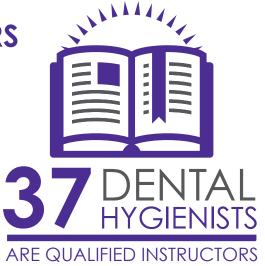


THE LIVES OF AN ESTIMATED 4,020

NURSING HOME RESIDENTS & RECIPIENTS OF HOME CARE WERE IMPACTED BY MCM GRADUATES

CURRICULUM AND INSTRUCTORS

- The competency-based curriculum was developed by Drs. Anita Stineman and Howard Cowen, University of Iowa Colleges of Nursing and Dentistry, respectively.
- A curriculum committee of content experts reviewed curriculum.
- 37 Dental Hygienists have been trained as Mouth Care Matters Instructors, with 32 remaining active and available to teach.
 Instructors completed an application to become instructors using eligibility criteria developed by a state competency committee.
- 100% of the trained instructors were satisfied with the training.









EMPLOYERS VALUE MCM

54 employers of those who provide direct care/service had staff participate in the MCM training. Post-training interviews were completed with 31 of those 54 organizations that support the need for continuing the program. Two nursing homes served as case study sites for evaluation purposes.

"The Prepare to Care and Mouth Care Matters programs teach them (direct care staff) to think outside the box." **Lee Hogg,** Healthcare Coordinator, Country Meadow Place, Mason City





"I was able to participate in the two-day training program. We don't provide as much hands on dental care with our clients, but they provided excellent hands on examples of how to assist a client in their care. For us, the most beneficial part was the understanding of how poor dental care impacts the overall health of our clients and the signs we can be looking for to prevent a small issue from becoming a major problem."

Jeff Wisnieski, Franchise Owner, Home Instead Senior Care

"Staff from the Madrid Home reported that the Mouth Care Matters class was very beneficial and increased their awareness of the importance of good oral care and how it can impact the overall health of the persons we serve. As a result of taking this class, staff are more aware of signs that could indicate need for care by a dental professional, thus improving the quality of life for residents."

Julie Rossow, Administrator, Madrid Home Communities



PLACES AND PARTNERS



Central Iowa Works/Candeo





Kirkwood Community College **KPACE Class**



Community College and Other Co-Hosts





Northeast Iowa Community College (NICC)



Ottumwa Job Corps





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MCM is one of three major grant initiatives of the Lifelong Smiles Coalition and funded by Delta Dental of Iowa Foundation (DDIAF). Mid-lowa Health Foundation (MIHF) and Department of Public Health (DPH) provided additional support for the program. The other two initiatives are I-Smile™ Silver and the establishment of the Office of Education and Training within the University of Iowa College of Dentistry and Dental Clinics. All share a common goal of increasing access to oral health for older lowans who are homebound or residents in a nursing home. Contact Mary Ann Young at maryann@iowacaregivers.org or 515-223-2805 for more information.



"Through the collective work of the Lifelong Smiles Coalition, more aging lowans will have access to dental care that can help improve their overall health. The Delta Dental of Iowa Foundation is proud to be a funder and active member of the Coalition." - Suzanne Heckenlaible. Executive Director, Delta Dental of Iowa Foundation

"Mid-Iowa Health Foundation has supported and partnered with the lowa CareGivers in their unique approach to improving access to care for vulnerable populations. Since Certified Nursing Assistants and Home Care Aides provide most of the hands-on care for lowans in those situations, it makes sense to focus on education and skill enhancement for this vital sector of the workforce," - Suzanne Mineck, President, Mid-Iowa Health Foundation.

CASES TO MAKE AND CHANGES MADE

The quality of care and services are only as good as those providing it. Those in direct care/service positions provide most of the direct hands-on care in most settings that include nursing homes, the homes of individuals served, assisted living facilities, hospices, residential care, group homes, and other locations. They are responsible for ensuring those served receive good oral hygiene. Compelling systemic inadequacies impair the rate of progress: 1) many who work in the field receive very little training in the area of oral care/hygiene and what training they receive is very fragmented and inconsistent; and 2) high rates of staff turnover hamper the desire for long-term impact. Until public policies are implemented that address job quality and its impact on the quality of care, staff turnover will continue to hinder efforts; 3) there is no central direct care workforce data base system (infrastructure) to ensure portability of MCM and other credentials which provides more consistency in training and prevents training redundancy for the workers.

1. Two-day Training Was a Barrier for Some.

Due to staff shortages it was difficult for some to attend a two-day training but yet invaluable for those who did.

Recommendation: Reduce class to a one-day training.

Change: Class was reduced to one-day. Evaluations for both one and two-day classes were rated equally high.

2. Linking Mouth Care Matters (MCM) to Prepare to Care a Challenge: State funding for the nationally recognized, competency-based Prepare to Care program for direct care workers was drastically cut in recent years. There is a lack of infrastructure needed to advance MCM as the first standardized and portable oral health specialty for direct care workers under the state's Prepare to Care program. The Prepare to Care program has been administered by the University of lowa College of Nursing through an lowa Department of Public Health contract. The disruption in funding needed to train and provide technical assistance to Prepare to Care instructors, and maintain the curriculum and training resources has become an unsurmountable burden, but we continue to advocate for support.

Recommendation: Promote and offer Mouth Care Matters as a free-standing Iowa CareGivers (IC) program until such a time that state support for Prepare to Care is restored.

Change: MCM is now offered by lowa CareGivers (IC). IC will continue to work with community colleges, Lifelong Smiles Coalition members, the state and others to increase access to the training. Existing MCM instructors will conduct the training and records of all who complete the training will be retained by IC to ensure permanent and portable credentials for those in direct care. The 6-hour Prepare to Care Core training will no longer

- Curriculum was revised for nurses to include supervisory content;
- First MCM class for nurses was held in September 2017 for Senior Housing Management Corporation;
- 100% rated the program as excellent or very good;

be required before enrolling in a MCM class.

- 100% would recommend this program to a co-worker;
- 100% said the training enhanced their knowledge about the link between oral health and one's overall health and well-being;
- 100% said this training better prepared them to support other staff under their supervision and/or co-workers in providing good oral care;
- 100% said they feel prepared and confident to complete oral health assessments and care plans for the individuals they serve as a result of this training;
- 100% can use the information they learned.
- 3. Requiring Prepare to Care Core as a Requirement Before Enrolling in MCM Was a Barrier.

Recommendation: Eliminate Prepare to Care core as a pre-requisite.

Change: Prepare to Care Core requirement was waived.

4. MCM Curriculum Suited As Interdisciplinary Training For All Staff

Three licensed nurses enrolled in and completed one of the MCM classes which resulted in a very positive turn of events and only furthers the case to be made that oral health is not on the radar of many health professions or care delivery systems.

One of those individuals was Joy Laudick, an R.N. with Senior Housing Management Corporation, which has 24 assisted living communities in Iowa. She said, "Looking back to my nursing education, I can honestly say I learned more in this one-day class (Mouth Care Matters) than I was offered throughout my RN training." Joy advocated that MCM be offered as an interdisciplinary training.

Recommendation: Promote MCM as an Interdisciplinary Training.



Senior Housing Management Corporation Nursing Staff Complete MCM

"Looking back to my nursing education I can honestly say I learned more in this one-day class (Mouth Care Matters) than I was offered throughout my RN training."

Joy Laudick, R.N. Senior Housing Management Corporation

FAMILY CAREGIVERS AND HOME CARE PROVIDERS CAN PLAY KEY ROLE IN PREVENTION

Intended Audience:

Direct Care Professionals also known as direct care workers and other titles such as direct support professional, supported community living worker, home health aide, universal worker, hospice aide, patient care tech, personal assistant, and certified nursing assistant. They work in a variety of Long Term Service and Support (LTSS) Settings.

Extended Audience:

- Nursing Staff and other Supervisory Staff
- Friends and Families of Those Receiving the MCM Training

5. Family Caregivers May Benefit From Training

Family caregivers may not place a high priority on oral health because they too lack awareness about the impact of good oral health to one's overall health and well-being. Plans to partner with AARP lowa to modify and test MCM training for family caregivers were abandoned due to interstate funding cuts.

Home and Community Based Settings a Focus on Prevention

A number of home care employers and home care aides reported that oral health is not one of their priorities and attributed that to the overall lack of awareness about the importance of oral health to possibly keeping people healthier and living independently longer.

Recommendation: Place a high priority on "prevention" by focusing on increasing awareness about the importance of good oral health among family caregivers, older lowans, individuals with disabilities, and home and community based providers. Continue to pursue opportunities with AARP lowa and other stakeholders to modify the MCM curriculum as needed and provide more training opportunities.

Change: Seeking funding to pilot a MCM training for family caregivers.

6. Pre and Post Tests Were Revisited.

A pre/post-test was used for the first round of MCM classes and there were a few questions that were problematic. Students simply completed and turned in their pre/post tests which meant that individuals left the class not knowing their test results.

Recommendation: Revise faulty questions and incorporate a group test to reinforce accurate information at the conclusion of the meeting. The general consensus was to ensure that students left the class feeling confident in their new knowledge and skills.

Change: The second round of training was administered as the pre-test, they also completed the post-test, and a group test and discussion were added to reinforce the correct answers. Team members leaned toward the belief that it was in the best interest of older lowans to ensure the learning needs of direct care workers are met and that the participants leave the class feeling confident over a pass/fail approach. The questions determined to be faulty were revised for round two of the training.

Pre and Post test results have not been re-analyzed yet, as we are waiting on the results from classes being held as part of a project led by University of Iowa College of Dentistry.

If people have too few teeth to chew, sores in their mouth or other oral health problems; they can't eat; they lose weight; become more frail and are at greater risk for falls.

Carol Van Aernam RDH, BA Registered Dental Hygienist, Iowa CareGivers Consultant and Mouth Care Matters Instructor.



7. Need for Awareness: Effective Tools for Promotion of Oral Health and MCM

There is an overall lack of awareness about the importance of oral health, services that are available, and training opportunities.

- Iowa CareGivers Hub newsletter featured a regular oral care educational column; an article on I-Smile Silver™; and was used to promote MCM classes and graduate stories, reaching 8,500 statewide.
- An oral health campaign was held in the two case study organizations. The kits included:
 - Newsletter articles on oral health in their organization/family newsletters;
 - Posters, word searches, and table tents promoting the importance of oral health;
 - Window clings to hang on mirrors in residents rooms as helpful reminders about oral care;
 The clings have been a popular tool;
 - Pocket cards for staff with helpful reminders about oral care.

Recommendations: Promote the oral health campaign kits to health and long term service and support (LTSS) providers during National Dental Hygiene Month in October, and consider making them available for sale.

Change: I-Smile Silver™ will be using the tools in some areas. IC is seeking ways to distribute them more widely during National Dental Hygiene Month.

- In-services and Educational Introduction Programs on oral health have become an effective tool for outreach.
 - 256 reached through presentations/in-services (separate from MCM classes);
 - 32 states reached with information about Lifelong Smiles Coalition and grant initiatives through an Oral Health America webinar;
 - Telligen webinar;
 - Exhibits at various events;
 - MCM graduates became spokespeople for MCM and improved focus on oral care.

8,500 STATEWIDE

Those in Direct
Care Become
Spokespersons
For Importance of
Oral Care



Campaign Window Clinas







DEFINITION OF DIRECT CARE PROFESSIONAL

Direct Care Professional (DCP), commonly referred to as direct care worker, is an umbrella name for one of the largest segments of lowa's workforce. Direct care professionals are defined as individuals who provide supportive services and care to people experiencing health conditions, illnesses, or disabilities and receive compensation for such services. They may work in home-based, community-based, or facility settings. They may have job titles such as direct support professional, supported community living worker, home health aide, and universal worker. The umbrella term also includes other jobs titles like hospice aide, personal assistant, certified nursing assistant, and patient care technician.

SUSTAINABILITY AND ACCESSIBILITY

Lessons learned and changes made, mentioned previously, now inform plans for future sustainability of Mouth Care Matters (MCM). A commitment from elected officials to place a high priority on oral health for lowans and an investment by public and private entities will be needed.

In order to effect change there are at least four primary high level areas of focus: 1) increased awareness among all stakeholders and the general public; 2) greater emphasis on recruitment and retention of a stable, well-educated and skilled direct care workforce, critical to accessing services; 3) prevention through more attention on home and community-based services and family caregivers; and 4) public policies that support access to good oral care for older lowans and individuals with disabilities.

- Secure additional funding to provide more MCM training opportunities for all health and Long-Term Service and Support (LTSS) staff. The positive class experiences result in word of mouth promotion.
- Provide MCM instructors with opportunities to teach and provide technical assistance.
- Rebrand and promote MCM as an lowa CareGivers' (IC) one-day, competency-based, oral health training with a certificate issued by IC and when appropriate, jointly by partners.
- Continue conversations with community colleges regarding partnering on promotion and delivery of MCM into their regular schedules.
- Focus on home care and community-based providers to ensure oral care is high on their lists of priority to keep people
 healthier and living independently longer and preventing premature nursing home placement.
- Include people with disabilities who experience challenges similar to those of older lowans in accessing dental/oral care.
- Pilot MCM with family caregivers in partnership with AARP lowa and the Family Caregiver Program.
- Advocate for an expanded direct care worker registry that would house permanent/portable credentials of all direct care workers. Until then IC will provide the assurances needed to maintain accurate MCM records.
- Work with Lifelong Smiles Coalition (LLSC) and other stakeholders to secure funding to implement public awareness activities including the distribution of the oral health campaign toolkits as part of Dental Hygiene Month, and use as an opportunity to also promote both MCM and I-Smile Silver™.
- Explore other ways to demonstrate additional evidence-based outcomes such as reduction in hospital readmissions or aspiration pneumonia.
- Explore other ways to demonstrate additional evidence-based outcomes that are tied to workforce stability/reduction in staff turnover.
- Expand stakeholder participation to include Long-Term Care (LTC) Medical Directors, Activity Coordinators, Substance
 Use Disorder Counselors, Dietitians, and Nutritionists to assist with promotion of oral care.
- Engage stakeholders in planning, advocacy and other efforts needed to sustain MCM.
- Consider establishing a MCM Oral Health Training Fund to provide low or no cost training.

Lifelong Smiles Coalition

To view information and partner organizations, please visit: http://www.lifelongsmilescoalition.com/

Mouth Care Matters: http://www.iowacaregivers.org/education/mouth-care-matters.php

Evaluation Yields Promising Results

You can view the initial evaluation report from National Resource Center for Family Centered Practice by visiting: http://www.iowacaregivers.org/uploads/pdf/EvaluationDistributionCopy.pdf

For more information, contact Iowa CareGivers:

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