From little things big things grow – translation of knowledge into practice

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Pregnancy and oral health – the facts

- Physiological changes in pregnancy affect oral health (Dasanayake, Gennaro et al 2008).

- Gingivitis affects 60 to 75% of pregnant women (Silk and Douglass et al 2008).

- Periodontitis affects about 30% of women of child-bearing age (Silk and Douglass et al 2008).

- Possible negative impact of poor maternal oral health on pregnancy outcomes (Kim, Lo, Pullin et al 2012).

- Less than a third of pregnant women in Australia consult a dentist when a dental problem exists (George, Johnson, Blinkhorn et al 2013).
Oral health in antenatal care

- The role of antenatal care providers in promoting maternal oral health has not been clearly defined.
- Referral pathways and links between antenatal care (midwives) and public dental services are currently ad hoc.
- Misconceptions about safety of dental treatment during pregnancy.
- Lack of education and training in oral health among midwives (based on research in NSW and VIC ).
Addressing the problem

• Midwifery Initiated Oral Health Education Program (MIOH).
• On-line oral health education program for antenatal care midwives
  – Evidence based content on pregnancy and oral health, oral health screening and referral.
• Developed by University of Western Sydney and associated partners.
• Endorsed by the Australian College of Midwives with 16 CPD points (George, Duff et al. 2012).
Midwifery Initiated Oral Health Education Program piloted in Victoria

“This course has improved my knowledge about oral health in pregnancy, vastly. It was comprehensive, easily understood and hugely important to pregnant women and their families. I immediately used this information when I booked women into our clinic.”

“The subject of oral health in pregnancy was made a lot clearer and the link between poor pregnancy outcomes [which] can be prevented easily.”

“I now talk to women about oral care at their 1st visit and ask the questions set out in the study course.”
Improvement in knowledge and confidence

*Based on nurses who responded ‘confident’ (rather than somewhat or not confident), n=33
116 Victorian midwives trained in MIOH 2012 – 2015
Embedding oral health into practice

1. Policy to support transfer of knowledge into practice

Oral health promotion is now within the midwifery scope of practice for the antenatal booking visit
Embedding oral health into practice

2. Recording systems to include oral health

Oral health questions now in the BOS database
Embedding oral health into practice

3. An accessible referral pathway to dental care is critical for midwives to include oral health in their practice

The Peninsula Health Model for accessible referral pathway
The Peninsula Health Model
Embedding oral health into midwifery practice

• All midwives involved with antenatal booking visit completed the MIOH Education Program.
Local partnership development
The meeting of minds @ Peninsula Health

Peninsula Health – Health Promotion (Community Health)

Peninsula Health - Women’s Services

Peninsula Health - Dental Services (Community Health)

Peninsula Health Koori Services

DHSV – Healthy Families, Healthy Smiles (Health Promotion Unit)
The Peninsula Health dental referral form

Accessed by midwives
August 2014
Preparing the midwives for e-referral

• Training session delivered at a scheduled staff meeting.
• Session covered impact of oral health on pregnant women and referral pathways.
• Provided opportunity to play with iPads to access the e-referral and practice completing the form.
• e-referral placed on midwives desktop.
What the midwives said

“Before oral health training and support, oral health was not a large component of our work with clients.”

“If a client raised oral health concerns we passed on contact details of local dentists but the onus was on the client to follow up.”

“A big difference! Oral health conversations happen with clients every day.”

“We have the ability to refer clients directly to community dental services within our appointment times.”

Before oral health training and e-referral support

Difference in daily practice with clients post training and e-referral support

“Having a quick link on our desk top to the community dental e-referral makes referrals quick and easy.”
Outcomes: 1. Increase in access to dental services by pregnant women
Outcomes: 2. Changes to practice

• Midwives have incorporated oral health assessment and referral into the antenatal care booking visit.

• Strengthened relationship between Women’s Services, Health Promotion and Community Dental Services building foundations to support sustainable reflective practice.
Outcomes: 3. Easy access oral health referral pathway for all

- E-referral process and system
  - includes paper based referral form for services that do not use e-referral
- Improved referral pathway for all eligible populations
- Flow on benefits to the wider community as the e-referral is accessible to organisations, community groups and individuals
Critical success factors

• Midwives were equipped with the knowledge and confidence to include oral health assessment in the booking visit.
• Unit Manager committed to working in partnership to develop a clear referral pathway for pregnant women.
• Peninsula Health promoting both intra and inter-sectoral collaboration to an e-referral pathway.
• E-referral was an organisational priority for Peninsula Health and integrated into the Oral Health Promotion plan for the organisation.
The other key members of the Peninsula Health oral health working group re midwives and e-referral.

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<th>Name</th>
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<tr>
<td>Sue McKinlay, Community Dental Program Manager Peninsula Health</td>
<td>Keegan Crow, Team Leader Frankston Community Dental Service Peninsula Health</td>
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<td>Courtney Zohs &amp; Kristen Young, Health Promotion Practitioners Peninsula Health</td>
<td>Emma Dunstan, Health Promotion Team Leader Peninsula Health</td>
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<td>Della Attwood, Manager Women’s Services Frankston Hospital Peninsula Health</td>
<td>Allison Ridge, Program Manager Healthy Families, Healthy Smiles Dental Health Services Victoria</td>
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Dear midwives thank you for looking at mum’s teeth and referring her to the dentist. That was a best start for me and my teeth!
References

- George A, Duff M, Ajwani S, Johnson M, Dahlen H, Blinkhorn A, Ellis S, Bhole S.
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