

# FoNS Improvement Insights

# Oral Care Management for Children, Young People and their Families in the Palliative Care Setting

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**Duration of project:** June 2008 – July 2011

**Keywords:** Action research, action learning, fourth generation evaluation, oral care management, paediatric palliative care, practice development

# **Project background**

Children with complex health care needs often experience poor oral health and the impact on quality of life can be profound. For children receiving palliative care, oral care management can be further complicated by disease processes as well as psychosocial and behavioural factors. A benchmarking exercise in 2007 and a subsequent literature review highlighted the need for an improvement in oral care management and showed that no oral assessment guide exists for children with disabilities in the palliative care setting. The East Anglia's Children's Hospices (EACH) Practice Development Team believed that without an assessment guide for stakeholders, oral health needs would remain unmet and improvements in care would be difficult to implement and evaluate.

#### Aim and objectives of the project

The aim of the project was to improve oral care for all children with complex needs in the hospice setting by raising the profile, increasing knowledge and developing oral care practice. To achieve this, the objectives of the project were that:

- All children/young people will have an oral care assessment which will be reviewed during each admission to the hospice or episode of community care
- Every child/young person receiving care in EACH will have an individual oral care management plan
- Children/young people and their families/carers will increase their knowledge and skills in their own oral health management
- Every child/young person and their family/carer will know how to access emergency dental care

Additional objectives related to the improvement of nursing care practice, which included the development of an oral care proficiency document, increased competence in oral care management and broader dissemination of project outcomes.

### **Key activities and outcomes from the project**

A number of practice development methods were employed to support the intended outcomes of the project based on the four stages of an action research cycle; gathering knowledge, reflecting and 'looking'; development of strategies; implementation and reflection. The first cycle of activity included

the team developing skills in leading practice development and action research with external support. Baseline data was collected through a claims, concerns and issues exercise for care team members, auditing 32 oral care documents, staff narratives, action learning workshops and development of a parental questionnaire (n=51). This stage developed a deeper understanding of current practice by gathering knowledge and information but importantly engaging with staff, service users and other health professionals about the project.

The second cycle involved examining the findings to identify three key strategies for change. These were:

- Developing the care team, including their knowledge and skills e.g. preparing an EACH training strategy
- Creating an oral assessment tool/care plan documentation
- Continuing collaborative working with external professionals including the special needs dentists

Cycle three focused on implementation. This included developing the facilitation skills of the palliative care managers to support practice change, identifying oral care champions and planning training of core knowledge and skills in oral management and care.

Cycle four was a period for reflection on the project to date. In terms of outcomes, the work undoubtedly raised awareness of the issues surrounding oral health and care of children and young people spending time in the hospices. Whilst improvements have been achieved, the team also recognise the need to develop a more strategic approach to oral care in the service provision.

## **Implications for practice:**

- Being action oriented and collaborative was key to developing knowledge and skills and improving care
- Action learning sets enabled staff to develop critical thinking skills and generate ideas to change practice
- Greater communication with families ensured that oral care introduced in the hospice continued at home
- External support helped the team develop skills in leading practice development
- The sharing of tools and resources as a result of the project has raised the profile of oral care in palliative care in the region

A full project report including references can be accessed from: http://www.fons.org/library/report-details.aspx?nstid=25826

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