Applying Mouth Care Matters in Critical Care

Julie Nichols¹, Maria Milburn²
¹Clinical Nurse Educator. ²Research Intern
Royal National Orthopaedic Hospital NHS Trust

BACCN Conference 2019
16 & 17 September
Edinburgh

Introduction
The poster presents the findings of a rapid review of the literature and an audit that examined the factors affecting nurses’ delivery of oral hygiene in adult critical care clinical setting.

Method
A rapid review of the literature (Mohr et al., 2014) was undertaken. Relevant studies were identified using the databases CINAHL and EMBASE using search terms: mouth care; oral hygiene; mouth hygiene; ventilated patient; intensive care nursing; critical care nursing and enteral feeding failure. The search was limited to peer reviewed studies or reviews published 2008-2018 in English on adult patients. Thirteen primary studies and/or systematic reviews met the inclusion criteria. The findings included studies were subjected to a narrative synthesis. In line with rapid review methodology, no formal critical appraisal was performed. A structured audit was done over 3 week period using Health Education England’s Mouth Care Matters survey for Nursing Staff.

Results
- 21 responses over a 3 week period
  - 86% were registered nurses.
  - 66% had received previous training (Figure 1)

  - 52% stated that barriers such as lack of equipment and patient compliance prevented them from providing mouth care.
  - Products routinely used to provide mouth care: toothbrush, toothpaste, water (Figure 2)
  - 10 respondents would document mouth care occasionally (1-10)
  - All respondents felt confident in delivering mouth care and recognising signs of dry mouth, ulcers and thrush.
  - 85% indicated that they would benefit from more training in mouth care and assessing the mouth.

Discussion and Conclusion
The mouth care ‘pack’ provided by HEE gave us an opportunity to ascertain the uptake of mouth care in a Critical Care Unit. The audit corroborate the findings of the literature review: lack of time, equipment and patient compliance and confirms the tenet of the Mouth Care Matters initiative. Mouth care is an essential aspect of basic care and the standardisation of auditing, documentation, provision of essential equipment coupled with training and support will augment the development of staffs’ confidence in care provision.

Recommendations
- Audit mouth care, using the HEE standardised tool to conduct a Trust-wide exercise
- Trust to invest in mouth care equipment for all clinical areas
- Standardise Trust-wide documentation for mouth care
- Provide training and support for all clinical staff

References: