

inspiring



Behind these smiles are midwives who know the value of good oral health

Advancing oral health in midwifery practice

July 2022

Healthy Families, Healthy Smiles, delivered by Dental Health Service Victoria (DHSV), has been working with Victorian midwives since 2012 to include oral health as part of routine antenatal care. DHSV sponsors eligible Victorian midwives to participate in the Midwifery Initiated Oral Health program (MIOH) which provides the skills and confidence to include oral health promotion in the first antenatal care booking visit. Since our last newsletter (September 2021) another 17 midwives have completed the training, bringing the total to 399. We've completed 15 rounds of MIOH training since 2012 and round 16 is currently in progress.

Evaluating the impact of MIOH over time

Of the 392 midwives that participated rounds 1 to 15 of the MIOH program, 348 (89%) participated in the program evaluation. Recently our evaluation team analysed the pre and post survey results of 111 participants from training rounds 9-14 (TR: 9-14) to determine the program's impact on midwives' oral health knowledge, confidence, and translation into practice. Comparisons were also made against previous findings from training rounds 1-8 (TR: 1-8) to determine any important changes across time. We'd like to share some highlights of the analysis and comparisons with you.

Changes to oral health knowledge

Our findings showed only 7% of midwives had received oral health training prior to undertaking the MIOH course. This was consistent with past results for TR: 1-8 where 5% had received oral health training.

Before undertaking the MIOH course, 16% of midwives reported their oral health knowledge as good or very good, however post-training this improved to 96% (this was a statistically significant improvement). See *Figure 1*. Once again, these results are consistent with previous evaluations (TR: 1-8: Pre 18% versus Post 95%).

Midwives (%) reporting their oral health knowledge as good or very good

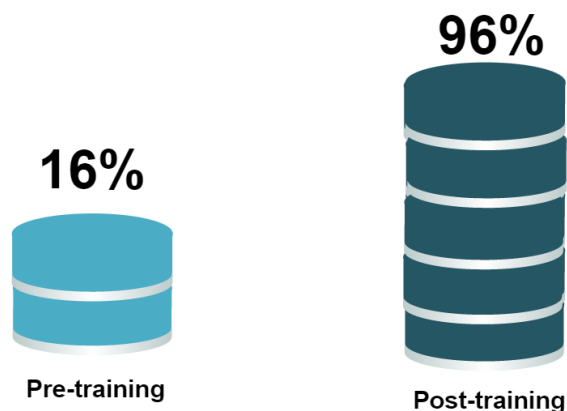


Figure 1: Midwives (%) reporting - oral health knowledge as good or very good pre/post training ($p < 0.001$) (TR: 9-14)

Improvements in confidence

From pre to post training, midwives showed statistically significant improvements in confidence on a range of oral health related topics as shown in *Figure 2*. Again, these findings were consistent with past evaluation findings.

Change in professional practice

Our analysis showed that post-training, 98% of midwives found the MIOH course useful for changing or informing professional and organisational practice. Many midwives felt more empowered to provide oral health information and resources to clients and incorporate the learnings into their professional practice.

Course feedback

The MIOH course was very well received with almost all (between 91-100%) midwives strongly agreeing or agreeing with statements such as 'I gained new knowledge and/or skills', 'I would recommend this training opportunity to other midwives' or 'I intend to use the learnings from the training in my practice'.



Figure 2: Improvements in midwives' confidence from pre to post training in a range of oral health related topics

Many reported their understanding of oral health before the course was limited or non-existent, and that this had improved post training

What is the evaluation telling us?

The findings indicate:

- The MIOH program is successful at improving midwives' oral health knowledge and confidence.
- There is strong intention to change professional practice following training which is anticipated to improve oral health outcomes among pregnant women.
- Time constraints within antenatal appointments are an ongoing barrier for midwives in delivering oral health promotion.
- There is continued relevancy and need for the course among midwives.
- Given the consistent lack of oral health education prior to undertaking the MIOH course, there is value in embedding oral health education into midwifery tertiary curricula.

Overall, the evaluation results are very positive, so thank you to everyone who has taken part in the course (and evaluation) throughout the years and is now embedding your knowledge into practice.

MIOH program - review and reflections

In addition to the quantitative data captured through our pre and post-test questionnaires, we assess the impact of MIOH through qualitative data gathered during 12-month follow up interviews. The findings offer valuable insights into the changes to midwives' organisational and professional practices as a result of the training.

This qualitative data is also being used to update the MIOH course. DHSV, Western Sydney University and the Australian College of Midwives have been working closely to review and refresh the course content, incorporating feedback from all rounds. We aim to create a more interactive, engaging learning experience with the most recent evidence and resources. The updated course will be piloted for our next round (Round 17). We can't wait to hear this group's feedback!

Are you reporting on oral health in the Birthing Outcomes System?

If you've completed the MIOH course you'll be aware that since 2015, the Birthing Outcomes System (BOS)*, has included questions about whether oral health checks and referrals have been made during antenatal assessments.

This data allows DHSV to assess the extent of oral health assessments conducted among pregnant women and subsequent referrals. It also provides insight into the translation of learning from MIOH into the daily practice of midwives. If your service uses the BOS, don't forget to fill in the BOS Maternal Details 2, and ask your service for these fields to become compulsory.

If your service uses an alternative client record system, ensure you are completing any oral health-related questions. If they are missing, advocate for their inclusion. Every piece of data entered makes a difference!

Antenatal Assessment - Maternal Details 2

Date of Interview:	<input type="text"/>	Preferred Name:	<input type="text"/>
Mother's Aboriginal Status:	<input type="text"/>	Partner's Name:	<input type="text"/>
Father's Aboriginal Status:	<input type="text"/>	Present at Interview:	<input type="text"/>
Baby's Aboriginal Status:	<input type="text"/>	Partner's Work:	<input type="text"/>
Preferred Language:	<input type="text"/>	Intended Feeding:	<input type="text"/>
Interpreter Required:	<input type="text"/>	Special Diet:	<input type="text"/>
Patient's Work:	<input type="text"/>	Antenatal Classes:	<input type="text"/>
Year of Arrival to Australia:	<input type="text"/>	Oral Health Assessed:	<input type="text"/>
Maternal Details Comments: 0 (250)		Dental Health Referral:	<input type="text"/>

* BOS is an integrated pregnancy, birthing and neonatal record used by the majority of Victorian maternity hospitals

MIOH Round 17 now open - DHSV sponsorships available



We are now taking sponsorship applications from eligible midwives for our next round of the MIOH course, which will begin in September-October. To be eligible, participants must be working in Victoria or serve the Victorian community, and:

- Midwives with positions in antenatal models of care
- Working within a Koori Maternity Service
- Midwifery lecturers and hospital based clinical educators
- Nurse Unit Managers of antenatal care services.

Click [here](#) to submit an expression of interest, or download our flyer [here](#) and share with your networks.

Research in the spotlight

Have you heard of the Midwifery Initiated Oral Health-Dental Service (MIOH-DS) program? The program involves pregnant women receiving care from MIOH-trained midwives in conjunction with a dental intervention (free and priority-access dental care). [A multi-centre randomised control trial](#) conducted in Sydney from 2012-2015 evaluated the effectiveness of the MIOH-DS program with 638 pregnant women. The addition of the dental component to MIOH care resulted in significant improvements in the oral health knowledge, quality of life, dental visits and oral health outcomes of pregnant women.



An economic evaluation of the MIOH-DS program has now been released.¹ The evaluation found that while the MIOH program alone (using existing dental referral pathways) is substantially more cost effective than the MIOH-DS program in the short term, the combination of MIOH care and the dental intervention was cost-effective over a longer period.

The evaluation highlights the short- and long-term economic benefits of the MIOH-DS program for health services across Australia and supports further funding for the program.

Read the full economic evaluation here:

1. Tannous KW, George A, Ahmed MU, et al. Economic evaluation of the Midwifery Initiated Oral Health-Dental Service programme in Australia. *BMJ Open* 2021;11:e047072. <http://dx.doi.org/10.1136/bmjopen-2020-047072>

We'd love to hear from you!

If you have any oral health success stories that you'd like included in the newsletter, MIOH feedback or other queries, please contact:

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