Focus group

In the context of 'Process and outcome evaluation of the optimised oral health-related section of the interRAI instruments and the associated training'

Aim: The discussion seeks an answer to the use of the new oral health-related section of the interRAI. Central to this are 1) the use (convenience) of the new oral health-related section itself, 2) the activation of the CAPs and how they are used, 3) the influence of the training on the use of the oral health-related section and 4) the influence of the use of the oral health-related section on the knowledge and attitude of care providers towards oral care and oral health

Introduction: max 4 minutes

Good morning and welcome!

Thank you very much for taking the time to join our conversation about the new oral health-related section of the InterRAI. My name is ..... I am a researcher at KU Leuven in the field of 'oral health of care-dependent people'.

You have been invited today because you work with the InterRAI instruments within your organisation and your organisation participates in our project.

Today we will discuss the oral health-related section within the InterRAI as we would like to hear your opinion about it and get to know your experience with it. This will help us to further improve the section.

It is important to know, there are no right or wrong answers in this discussion. We expect that there will be different points of view. You are invited to share your opinion, even if it may differ from what other participants will say. We are interested in your opinion, because you can give us very useful information.

I'll start by asking a few questions to get the discussion going, but pleaqse feel free to talk openly among yourselves too. This is not meant to be a strict interview where I ask and you answer, think of it more as a group conversation.

I am here to listen and to make sure that everyone has the opportunity to share their experiences. (Of course, I will touch on a number of topics that we want to learn more about.) We would like everyone to contribute to the discussion. So if one person talks a lot, I will possibly interrupt them to let the other interlocutors speak as well. And if someone doesn't say anything, I'll probably invite them to give their opinion.

In order not to miss any information, we record the discussion and sometimes take notes. This information is completely confidential and can never be linked to your name during subsequent processing. That is why we use anonymous codes for each participant.

There is 1.5 hours for this conversation. The scheduled end time will be 11:30 am.

TEST GROUPS T1 AND T2: NEW ORAL HEALTH SECTION AND CAPS

1. Opening question:

Before starting the real conversation, I would like to hear very briefly who you are and what you do exactly. That's some general information that's important in processing the results and allows to draw general conclusions from the interviews.

- Can you just say your first name and professional position. How many years of experience do you have? Sketch the average client who is cared for by your organization.

2. Use of new oral health-related section 15'

Filling in the oral health section was probably a new task that came up for you. How did you experience filling in the new mouth section?

GENERAL

1. How did you approach filling it in?
    - Filling in the list itself: do you look in the mouth, do you look at the client how he/she eats, do you ask the client, do you look during the care? (–> inquire about the various items)
    - In terms of timing? Scheduling in daily care?
      Do you have enough time or do you take enough time to fill in the mouth section?
2. Do you find it easy or difficult to fill in that section?
    - Do you find it easy to look in the mouth?
    - Are you able to recognize the structures in the mouth?
    - How do you feel when filling out the oral health section?

Research shows that the oral health section is sometimes not completed. What would be the reason for leaving those questions open according to you?

- In your opinion, are there certain circumstances that lead to the mouth section not being completed?
- Are there groups of clients where you have more problems assessing oral health?

One of the innovative things about this oral health section is the use of photos to assess the mouth and prosthesis.

- Do the photos help fill out the section?
- What do you think of the photos? (Are they clear? Do they sufficiently reflect reality?)
- To what extent do you think it is possible to distinguish between healthy and non-healthy situations?

IMPROVEMENT

- What could help you to better assess the situation in the mouth?
- If you had the opportunity to give advice in relation to improving the oral health section – what would you advise?

3. Activation CAP's 15'

The new thing about this oral health assessment tool is the activation of CAPs that reveal a (potential) problem.

- What do you do when a CAP is activated?
    - Are the CAPs on oral health and oral hygiene used in the care plan?
    - Do you discuss the results? (Within the care team, with the resident, with the family?)
    - What makes it easy for you to use the CAPs and what makes it difficult?
    - Are you going to take action with the CAPs? Is the action you are taking with the CAP Oral Health comparable to the actions taken at other CAPs within the InterRAI?

- How do residents and/or their families react to activation of a CAP?
    - Are they open to advice on this?
    - Are they open to adjusting oral hygiene?
      To what level: just adjusting materials and products, helping hand-over-hand or completely taking over oral care?
    - Do they agree to consult a dentist?

- What would you like to improve/change in relation to the CAPs on oral health?

4. The influence of the training 10'

ON THE USE OF THE ORAL HEALTH-RELATED SECTION

- What do you miss in the training to be able to use the oral health section smoothly or are there certain things from the training that you find rather superfluous? What could be improved about the training?
- Was the way the content was presented good for learning how to use the mouth section?

ON KNOWLEDGE ABOUT ORAL HEALTH AND ORAL HYGIENE

- To what extent do you think the training is sufficient to make the importance of oral health and general health clear?
- To what extent do you think the training is sufficient to take on daily oral care with confidence?

IN WORK ORGANIsATION

- What do you like about the way the training is offered?
    - The working method used: webinar, e-learning,... => Which one do they experience as the best?
    - Its duration

5. Influence of physical training/extra support => only group T2

- To what extent do you think the on-site training and extra support are necessary?

6. Knowledge and attitude towards oral care and oral health 15'

- Were you aware of the link between oral health and general health before the start of the study?

AT ORGANISATION LEVEL

- Is attention paid to the oral health of the clients in your organization? How? (Protocol for oral health? Is there a point of contact for oral care within the organization?). (addition: For example, do you get guidelines to brush your teeth daily? Prosthesis?)

AT THE LEVEL OF THE HEALTHCARE PROVIDER

- What is your opinion about the oral health of the clients? Is this a low priority or rather a high priority?
- How important do you think oral care is in general care and can you justify it?
- Do you feel that you can sufficiently achieve your goal in the daily oral care of the residents?

Previous studies showed that caregivers in residential care centres who are not used to working with their mouth find it disrespectful (or too intimate) to look into their mouths, is this also the case with you?

- Does this improve with the systematic completion of the oral health section?
- What is your opinion about the vision that residents themselves have about their own oral health? Do most elderly people think this is important?
- Have you started to attach more importance to oral health for the elderly since you systematically completed the oral health section?

AT THE LEVEL OF RESIDENTS

- How do the residents experience that their mouths are looked at or are questions asked about this?

7. Concluding questions

A lot of valuable information came up during this conversation.

- Of all the things that have been discussed here, what is the most important to you?

Thanks. In summary, I have included the most important things from this conversation that: .... (Summary of main issues). (Possibly: We didn't talk about ...). What sticks with me is also ... (certain strong statement for example) => to match the atmosphere and ideas of participants.

Before we wrap up, I would like to ask if there are certain issues around this theme that have not been addressed? Is there anything else you would like to tell us about your experiences with the oral section or the CAPs or just something about oral hygiene and oral health in general?

Thank you very much for your active participation in this conversation and contribution to the research. If you would like more information afterwards, you can contact us about this. I sincerely wish you all the best in monitoring and improving oral care.