# Evaluation and Impact of an Oral Health Education Program in a Mental Health In-Patient Setting



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# INTRODUCTION



The Oral Health Education Program was developed to bridge gaps in access to essential oral healthcare, particularly for high-priority populations who face significant barriers due to cost, lack of public programs, and systemic exclusion from primary care settings.

Patients with mental health conditions face significant barriers to oral healthcare, including dental phobia, medication-induced oral health conditions, and lack of access to regular treatment. Many avoid dental care altogether, leading to worsening conditions that impact overall health and well-being.

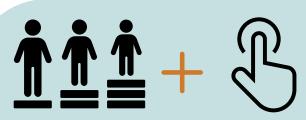




**Education Sess** 

By integrating oral health services directly within an inpatient mental health unit, we remove key barriers such as transportation and difficulty following through with care plans post-discharge. Co-location ensures patients receive immediate education, screenings, and referrals while already engaged in their mental health treatment, increasing compliance and access to care.

### **OBJECTIVES**



Reduce Disparities Increase Healthcare



Access

**Oral Health** Survey

OHIP-14 Survey

EMR Chart Abstraction







**Develop** Sustainable Oral Health Habits

**90-Day** 

Follow-

Up

30-Day

Follow-

Up

# **METHODS**

**Baseline** 



7-Day

Follow-

Up

Oral Health Jucation Session	
Consent Discussion	
	C
Baseline Collection	
Follow-Up #1	E A





90-Day

Follow-Up

# Reportables

- Oral health literacy
- Formation of oral hygiene habits
- Evolution of oral health related quality of life
- Social determinants of health

#### **Deliverables**

- Trauma-informed education
- Evidence-based resources
- Preventative screening
- Oral cancer assessments
- Referrals to community dental services

### **OUTCOMES**

By leveraging data-driven insights, we aim to revolutionize healthcare delivery, fill public health gaps, and improve access for vulnerable populations.



**Government and Policymakers** Support staffing, programming, and sustainable funding.

Knowledge **Mobilization** and **Interdisciplinary Collaborations** 



**Educational Institutions** Train future providers and integrate public oral health initiatives into curricula



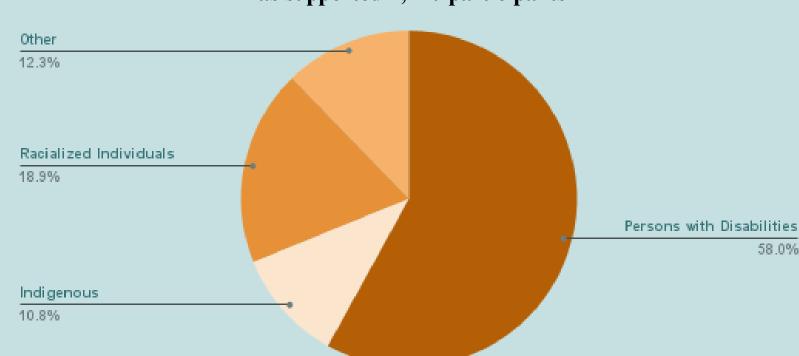
**Healthcare Professionals** Embed oral health practices in primary, acute, and community care settings



**Community Support Services** Collaborate with caregiving entities that have strong influence and involvement in patient well-being.

# **SIGNIFICANCE**

Since November 2022, the Oral Health Education Program has supported 1,117 participants





Aged 18-64: a group without access to publicly funded dental care



100% Expressed **Satisfaction** 



50% Received **Preventative Treatments** 



99% Reported Learning **Something New** 

# CONCLUSION

Oral health is essential to overall health. The Oral Health Education Program promotes comprehensive, preventative, and equitable healthcare for all. Through continued advocacy and research evaluation, oral health can be positioned in the first-line of care.

## **ACKNOWLEDGEMENTS**





