TOWARDS HIGH PERCENTAGE OF EFFECTIVE TOOTH BRUSHING DRILL (TBD) AMONG STUDENTS AT SEKOLAH KEBANGSAAN JENGKA 25 (SKJ25)

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INTRODUCTION

- Tooth brushing drill (TBD) is carried out to encourage a good tooth brushing habits among students.
- A positive outcome would be a good oral hygiene status with Grade A plaque score.

Definitions

Effective TBD: Students achieved Grade A in total plaque score (Good oral hygiene) Ineffective TBD: Students achieved Grade C or E in total plaque score (Moderate-to-poor oral hygiene)



1. SELECTION OF OPPORTUNITIES FOR **IMPROVEMENT**

1.0 PROBLEM PRIORITIZATION Group members of 11 Scale : 1 = Low , 2 = Moderate, 3 = High							
No.	PROBLEM LIST	S	M	Α	R	T	TOTAL
1	High number of alveolar osteitis among patients in Klinik Pergigian Hospital Jengka	33	33	18	24	21	129
2	High percentage incomplete dental treatment among antenatal patients at Klinik Pergigian Maran	24	33	18	24	18	117
3	High percentage of early extractions of permanent molars among primary school children in Klinik Pergigian Bandar Jengka	27	26	28	22	18	121
4	High percentage of ineffective Tooth Brushing Drill (TBD) among students at Sekolah Kebangsaan Jengka 25	33	33	26	30	26 (148
5	High percentage of active caries among toddlers in Klinik Pergigian Pekan Awah	28	33	30	18	16	125

1.1 REASONS FOR SELECTION

Ineffective TBD among students could lead to poor oral health causing dental pain, low growth, worsen nutritional status, have a negative effect on speech development, and thus affecting social acceptance in adolescents.

MEASURABLE

Data of plaque score among students can be obtained based on status of Kebersihan Mulut in Reten PG 201 (2022), and PGS 201 from Gi-RET 2.0 (Gabungan Reten Pergigian,

APPROPRIATENESS

Problem existed in three consecutive years: 2019 (31%), 2021 (54%), 2022 (62%) SKJ25 had the highest percentage of ineffective TBD among 10 primary schools in

Maran with 62% **REMEDIABLE**

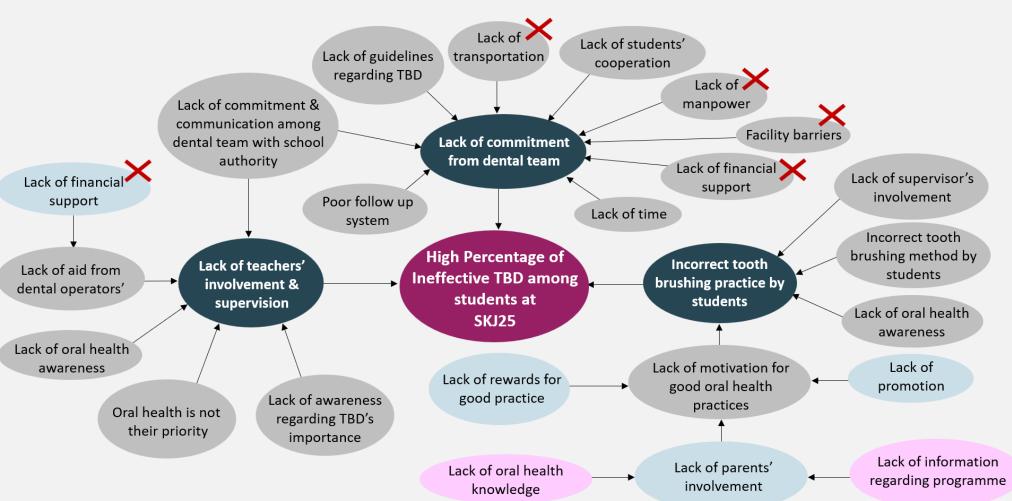
Possible causes can be identified and remedied

TIMELINESS

Study can be done within 1 year

2. KEY MEASURES FOR IMPROVEMENT

2.0 PROBLEM ANALYSIS CHART



2.1 PROBLEM STATEMENT

Tooth brushing drill (TBD) in school is aiming to improve student's oral hygiene status. Verification study in 2022 showed that the percentage of ineffective TBD in SK Jengka 25 was 62%. High percentage of ineffective TBD could lead to poor oral hygiene leading to dental caries and gum diseases. Multiple factors including lack of commitment from dental team, lack of teachers' involvement & supervision, and incorrect toothbrushing practice by students. This study will improve

2.2 OBJECTIVES

GENERAL OBJECTIVE

To improve the effectiveness of TBD among students at Sekolah Kebangsaan Jengka 25 from 38% in 2022 to 60% in 2024

SPECIFIC OBJECTIVES

REFERENCES

To determine the percentage of ineffective TBD

the effectiveness of TBD among students at SK Jengka 25.

To identify contributing factors which can lead to ineffective TBD To propose and conduct remedial actions to improve the effectiveness of TBD

To evaluate the effectiveness of the remedial actions

2.3 INDICATOR & STANDARD

Indicator Formula			Standard
Percentage of students with effective TBD in SKJ25	Total number of students with effective TBD Total number of students involved in TBD	X 100%	60%

* Based on a study done in 2013 by Macpherson et. al., and in consensus with our District Dental Officer

2.4 PROCESS OF CARE Incremental dental visit (IDV) Implementation of TBD programme Follow up & re-examination of students' oral Does TBD Do scaling & give oral effective? hygiene instructions Do other dental treatments

End

2.5 MODEL OF GOOD CARE

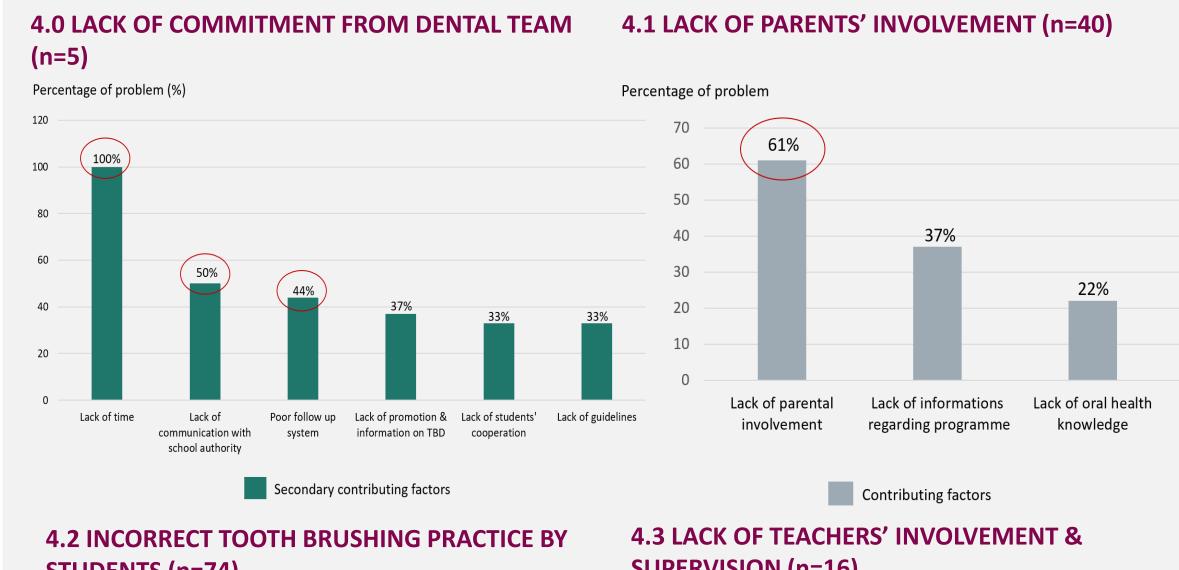
Process	Criteria	Standard	Pre- remedial	Post- cycle 1	Post- cycle 2
Implementation of TBD (SINAR)	1) Discussion with school authority regarding programme: • Students brush their teeth in a small group (maximum 20 students)	100%	33%	100%	100%
	TBD is conducted according to schedule & during recess time	100%	40%	100%	100%
	Duration needed for TBD programme to be around 10- 15 minutes	100%	67%	100%	100%
	Each TBD session should be supervised by trained teacher or student representative	100%	50%	100%	100%
	 2) Students follow TBD protocol: Apply an efficient tooth brushing technique that reaches all tooth surfaces and removes plaque 	100%	50%	88%	100%
	Wash hand before & after TBD	100%	43%	92%	100%
	Rinse once after tooth brushing	100%	0%	88%	100%
	Wash toothbrush & air dry before keep them back in a closed container for infection control	100%	0%	100%	100%
	3) Close monitoring by dental team once every 2 months	100%	0%	100%	100%
follow up & re- examination of students'	1) Follow-up with school authority at least once a month via phone call/WhatsApp Business	100%	0%	100%	100%
oral hygiene	2) Dental check-up after 6 months to examine oral hygiene status and effectiveness of programme	100%	0%	100%	100%
	3) Reporting of school children's oral health status to school authority and parents	100%	50%	50%	100%
Re-implement TBD in a focus group	Oral health education and tooth brushing coaching is done in small group according to student's oral health status (Grade C, E)	100%	0%	50%	90%
Continuation of TBD	Further monitoring and collection of feedback from dental team, school authority, students and parents every 6 months	100%	0%	100%	100%

3. PROCESS OF GATHERING INFORMATION

3.0 METHODOLOGY

	Dental Team	Teachers	Students	Parents		
Tools	Self-administered questionnaire • n = 5 (3 Dental officers + 2 Dental therapists) (Adapted by Muhammad et al 2020 & based on group consensus)	Self-administered questionnaire • n = 16 (Adapted by Garis Panduan Program Kesihatan Pergigian Untuk Bakal Guru: Perkasa Mulut Sihat, 2022, MOH)	Structured questionnaire • n = 37 (Level 2 students) (Adapted by KAP score, Vishwanathaiah et al 2016 & Ozturk et al 2020) Observation checklist • n = 37 (Level 1 students) (Adapted by United Kingdom's Supervised Tooth Brushing Programme, 2023) Review clinical record Data Kebersihan Mulut A from reten PG201 & PGS201	Self-administered questionnaire • n = 40 (Adapted by Singhal et al 2015)		
Place	SK Jengka 25 and KP Jengka 22					
Period of distribution	Pre-remedial: March – April 2023 Post-cycle 1: August – September 2023 Post-cycle 2: February 2024					
Study	Interventional study					
Sampling	Purposive sampling method					

4. ANALYSIS & INTERPRETATION

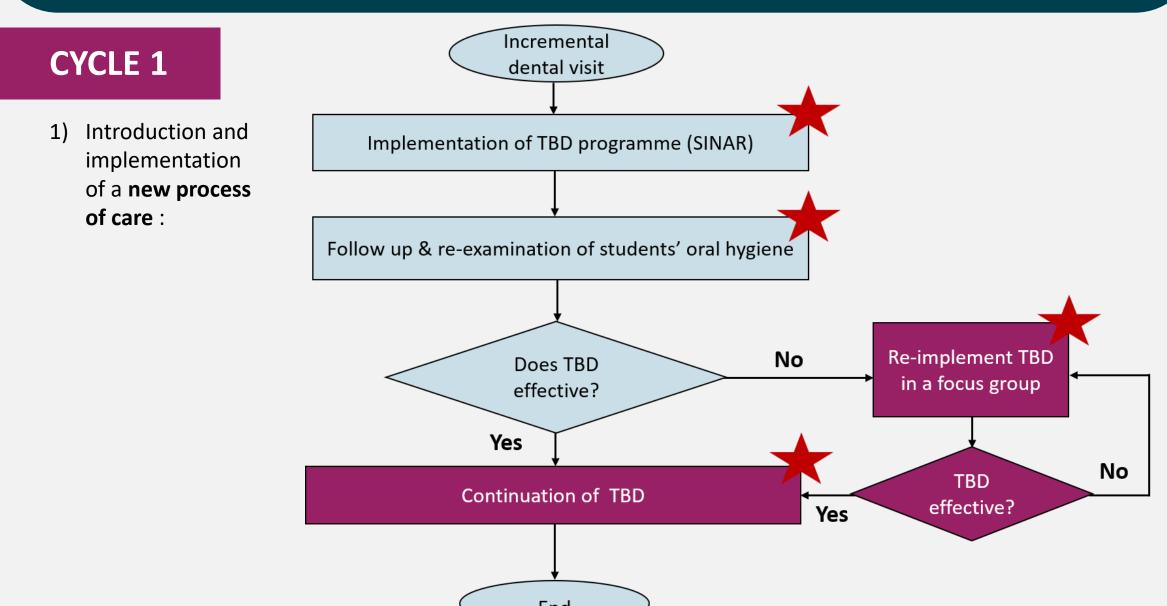


STUDENTS (n=74)

SUPERVISION (n=16) Percentage of problem (%) Percentage of problem (%) 86% awareness of dental operators communication supervision during TBD with dental during TBD importance

5. STRATEGIES FOR CHANGE

Secondary contributing factors

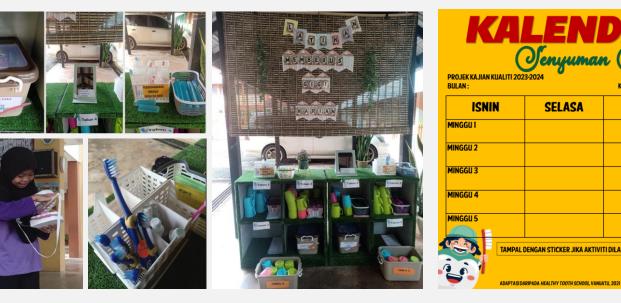


Improved communication WhatsApp Business, meeting sessions, and involvement in school's activity

3) Enhanced follow up system via monitoring schedule and TBD's checklist usage

	JADUAL PEMANTAUAN MIN	SENARAI SEMAK AKTIVITI LANGE Tarikh : Tahun			
		Terdapat guru/pengawas yang memantau munid sepanjang aktiviti dilaksana	skan		
Bil	Tarikh	Hari	Anggota	Semua murid yang hadir memberikan kerjasansa (Bilangan =)	
-				Murid membasuh tangan sebelum & selepas aktiviti	
1		Dr Muhammad Rahimi bin Ropli Khamis Dr Dzulfiqar bin Zulkifi Dr Paul Arvind a/l Pandian	Dr Dzulfigar bin Zulkifli	tienus gigi mudah dikenal pasti oleh setiap murid melaku sistem perlabelan s	rang jelas
	4/5/2023			Ubet gigi yang digunakan perlu mengandungi sebanyak 1350-1500 ppm fluorida	
			Ubat gigi yang diberikan hanya sebesar sala kacang hijau		
2	10/5/2023	Dr Aiman Syahirah binti Zulkiflee Dr Nur Alya Fariesha binti Izam	Dr Aiman Syahirah binti Zulkiflee	Murid tidak menelan ubat gigi semasa & selepas memberus gigi	
2	10/3/2023		Murid memberus gigi hingga sampai ke semua permukaan gigi		
4	18/5/2023	Khamis	Dr Nur Raihana binti Abd Razak	Selepas selessi memberus gigi, munid meludah keluar ubat gigi & digalakkan berkumur	rumtuk tid
			JP Suryani binti Ramli	Berus gigi dibasuh menggunakan air paip di siriki	
5	22/5/2022	Selasa	Dr Muhammad Rahimi bin Ropli	Berus gigl diblarkan kering secara oir dry	
0	23/5/2023	Selasa	Dr Dzulfiqar bin Zulkifli	Semasa menyimpan berus gigi, berus berada dalam keadaan tegak & jauh di sama lain bagi mengelakkan kontaminasi	antara si
6	31/5/2023	Rabu	Dr Aiman Syahirah binti Zulkiflee Dr Nur Alya Fariesha binti Izam	Benus gigi perlu-diganti secara berkala sekurangnya tiga bulan sekali/sekiran talah kembang	ia pnin pi
-			,	Sistem penyimpanan berus gigi berada dalam keadaan yang bersesualan laib mempunyai sistem pengularaan yang bali. & berada di tempat yang tinggi	u kering,
7	8/6/2023	Khamis	Dr Nur Raihana binti Abd Razak JP Suryani binti Ramli	One-journal nice yearle THE TREAT HE SET SEPREMINED TOOMS BELLEVING MODIFIED.	

4) Provided dental aid for TBD session, TBD corner & teeth brushing calendar



5) Promoted via rewards, flyers and banner



7) Conducted Senyuman Seindah Sinar (SINAR Training Programme)



CYCLE 2

Involvement in **Academic Appreciation Day**



Hub during TBD session

3) Introduction of Modul

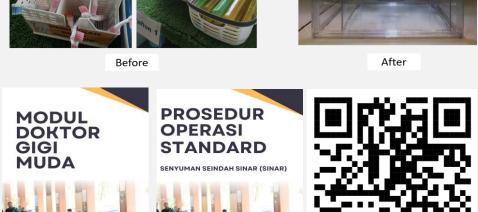
Doktor Gigi Muda &

Guideline of SINAR

Programme

parents

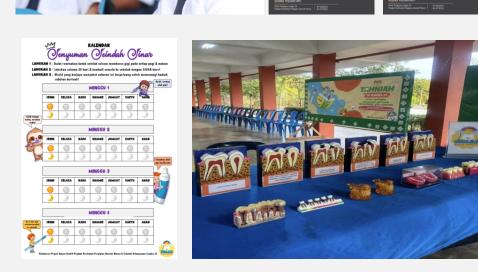
2) Utilization of **Hygiene**



Continuous dental education to dental tean & revised SINAR flyers to



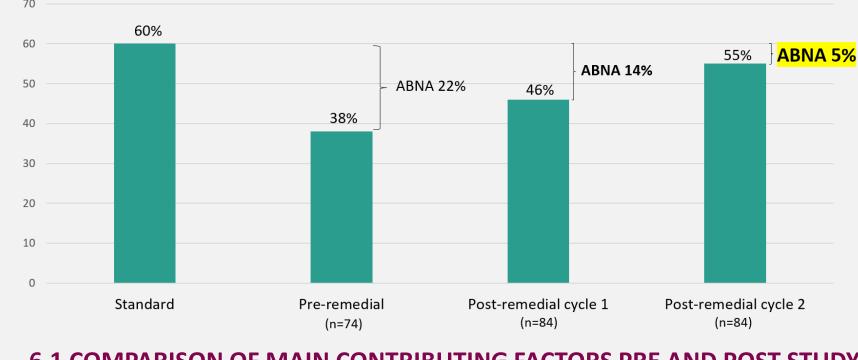
5) Improved parental involvement via distribution of teeth brushing calendar for home usage & opened up a promotional booth



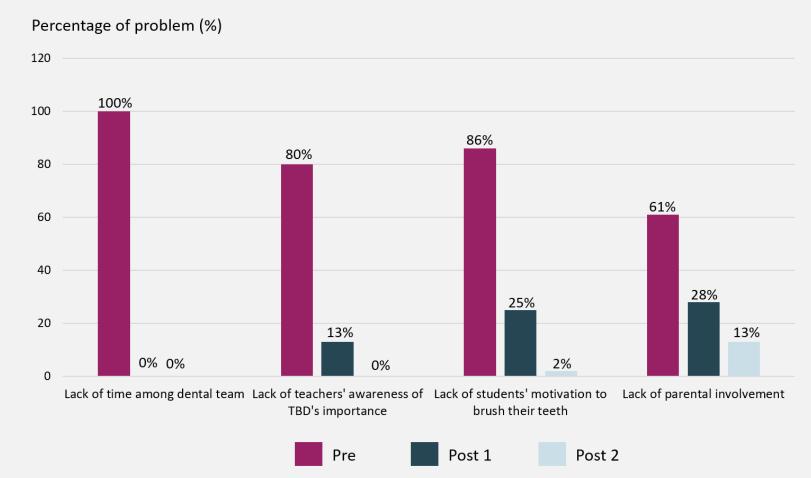
6. EFFECTS OF CHANGE

6.0 IMPROVEMENT ON ABNA

Percentage of effective Tooth Brushing Drill among students (%)



6.1 COMPARISON OF MAIN CONTRIBUTING FACTORS PRE AND POST STUDY



6.2 CONCLUSION

- 1) School's cooperation plays a major role in achieving our objectives to improve TBD's effectiveness
- 2) Innovation product of Hygiene Hub helps in shortening the time for TBD session, thus reducing teachers' workload during TBD session

6.3 LESSON LEARNT

It was challenging to do a frequent close monitoring as it depends on many factors such as time & transportation. Thus, next cycle will focus on strengthening the Kelab Doktor Gigi Muda for continuous TBD monitoring.

7. NEXT STEP

We aim to continually improve TBD's implementation, to replicate this study at other primary schools in Maran district as well as towards more collaborative efforts with

school authority. End

Secondary contributing factors

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