oral health in the quality of life is significant. Therefore, it is important to continue to develop strategies and join efforts to improve oral health and, consequently, the systemic health and quality of life of institutionalized elderly.
The study protocol was approved by the Ethics Commission for Health of the University (Comisssão de Ética para a Saúde da UCP, Report number 165, 21st of January 2022).
Informed consent was obtained from all participants and all methods were performed in accordance with the Declaration of Helsinki principles for medical research involving human subjects and following the requirements established by Portuguese Law nr 21/2014 for clinical research.

## P94

### - "Ser Criança" Project - oral health literacy strategies for the vulnerable children and families

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**Background**
Over the years, there has been an increasing and effective integration and participation of oral health in the concept of general health. The absence of educational interventions for more vulnerable children, as well as the application of behavioral strategies are still considered gaps in today's society and healthcare services. The main objective of this research was to define strategies of educational interventions in vulnerable children's and their families oral health.
**Materials and methods**
The interventive actions for the "Ser Criança" Project involves the development of a website - "Ser Criança – Aprender e Sorrir" for three target groups: children, parents and educators / teachers. With this goal, it is expected that children, families and school communities change behavioral habits related to oral health. Also the "Ser Criança" Project involves a specific protocol defining oral health literacy strategies and dental appointments among the children and families.
**Results**
It is crucial to emphasize that most recreational activities are beneficial in the transmission of motivational values. The use of educational games, exploration of macro dental models, theater and music are valid examples of these activities. Interventions based on digital media (applications or *"apps"* and the Internet) also prove to be a constant demonstration of success for children's personal and cognitive growth. The development of a digital tool aimed at pre-school and school education, through a web-based aspect allows, especially in the context of the difficult access to oral health services, an immeasurable access to multiple possibilities. A specific oral health appointment protocol was also developed and will be applied among children and their families. This protocol will permit to diagnose oral diseases by teledentistry method, formulating an on-line appointment. Both strategies will be applied among the most vulnerable communities in order to improve the oral health behaviors and diagnosis of oral diseases, mainly, among children.
**Conclusions**
Educating the next generation using attractive educational, didactic and, above all pedagogical interventions can revolutionize the current teaching landscape, especially in the field of oral health. These strategies shall be applied in the future to study the impact in the oral health and health literacy of vulnerable communities.
**Keywords**
Intervention, children, oral health literacy, digital education.

## P95

### - Understanding the barriers and opportunities for implementing serious games-based rehabilitation as a policy in Portuguese healthcare

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**Background**
Serious games (SG) are known to have a wide range of applications. Physical rehabilitation is one of them. As the aging index of the Portuguese population steadily increases, it is necessary to improve physical rehabilitation (as a line of therapy for pathologies and incapacities related to old age). This paper aims to find a relationship between the barriers to SG implementation and the way the current and future contexts will bridge the gap between aspirations, necessity and financial viability.
**Materials and methods**
A PEST (political, economical, social and technological) market analysis of the Portuguese context was conducted, along with an *in loco* investigation achieved through a series of three interviews (to a neurology clinic, to a physiatry clinic and rehabilitation center located in the north of Portugal, and to a Professor and researcher from the Medical School of Universidade do Minho), and a 24-question questionnaire targeted at healthcare professionals (ranging from doctors to nurses, and from heterogeneous specialization areas). 59 subjects participated in the questionnaire. The study in question was submitted and approved by CES-UCP. All participants gave their informed consent before participation in the study.
**Results**
Portugal has an aged population that needs suitable healthcare, which englobes adequate physical rehabilitation when needed. However, there is a lack of human and material resources. When looking at SG as a potential tool, the industry has a good growth rate, and SG present themselves as a way of channeling human and monetary resources. The lack of knowledge about SG, lack of appropriate SG to use for therapeutic purposes as well as access to them, their cost, the age and social status of the patients, or a prevalent preference towards traditional methods are seen as the main barriers to a wider implementation of SG for physical rehabilitation in the Portuguese territory.
**Conclusions**
SG proved to be widely unknown among the healthcare sector in Portugal. Additionally, as older generations show little to no interest in the potential of videogames as a form of entertainment, it will make them resistant towards learning about the clinical benefits of using SG for physical rehabilitation. Socially and financially, the Portuguese context supports the implementation of SG as a complementary tool, allowing physical rehabilitation to reach more people at a lower cost while stimulating therapy adherence and supporting a sustainable allocation of funds.

## P96

### - Experience reported by the person submitted to a hip or knee arthroplasty, related to the continuity of nursing care

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**Background**
Considering the experience of the person submitted to a hip or knee arthroplasty, related to the continuity of nursing care, namely the preparation of their return home, is a key result of quality in health. Therefore, the evaluation of the experience "is seen as a support to improve the quality of health care, management and public responsibility" [1]. Thus, the goal of this study is to identify the dimensions related to the person's experience who has been submitted to a hip or knee arthroplasty, towards nursing care, in the preparation of the return home.
**Materials and methods**
This is a qualitative, exploratory-descriptive study. Non-probabilistic convenience sampling. The participants were people submitted to a hip or knee arthroplasty, who found themselves at their home and freely agreed to participate in the study. The data was collected through a semi-structured interviews guide and analyzed through a deductive method [2], using the content analysis technique [3] and the cycle coding technique [4], supported by NVIVO1.7® software. Approved by the Ethics Committee - Document of the SESARAM Ethics Committee, EPE n. °: 29/2019.
**Results**
Eight dimensions were identified: prevention of complications and control of symptoms; prescribed therapeutic regimes; adaptability to changes; communication; accessibility; quality of life; participation and shared decision-making; feelings and emotions. These results show the real experience's dimensions, reported these people themselves, allowing to contribute to good nursing practices development, in order to guarantee a high level of self-experience, safety and health's quality of life.
**Conclusion**
Studying the person's experience, reported by themselves, means to place the person at the center of health care. As such, it proves to be pressing to investigate, in order to obtain metrics that allow not only to improve the person's own experience, but also to offer new answers, in a *continuum* of improvement, of nursing care in the preparation of returning home. Nurses, embedded in the healthcare team, are valued by people, in their continuum of care.
The authors declare under their responsibility that this article is original, has never been sent to another publication and in its elaboration all scientific, methodological and ethical rigor was taken into account (Document of the SESARAM Ethics Committee, EPE n. °: 29/2019). Furthermore, they declare that they don't have other conflicts of interest. Informed consent was obtained for publication.
**Keywords**
Continuity of Patient Care; Nursing Care; Arthroplasty; Quality of Life; Safety; Patient experience; Returning home preparation.

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