Impact of the Continence Promotion Clinical Nurse Specialist on Improving Incontinence in Patients in a Post-Acute Rehabilitation setting

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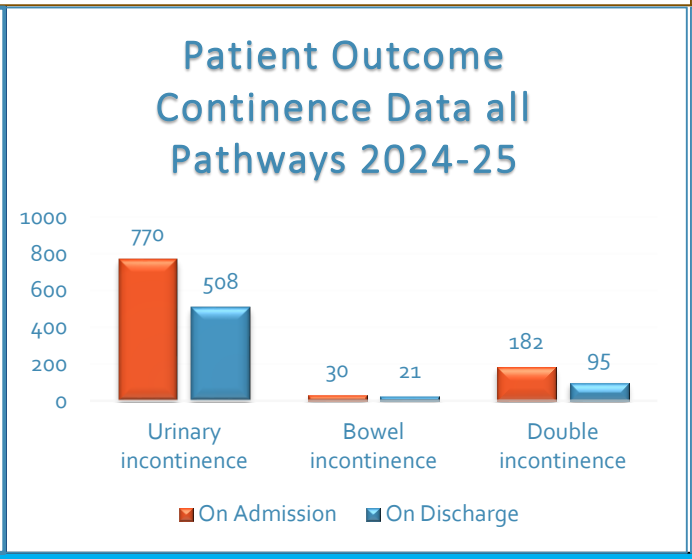
Background: Clontarf Hospital 160 beds provides post acute adult rehabilitation services to patients transferred from acute hospitals with a variety of medical and post operative conditions and rehabilitation needs. Incontinence is one of the widespread health problem affects people of all ages and can lead to significant psychological, social, and financial challenges for both individuals and the healthcare system. In 2024–25, 982 patients were admitted with continence-related concerns. Through a service led by the Continence CNS—focusing on conservative management, lifestyle modification, and patient education—358 (36.4%) patients were discharged home continent. This approach delivered substantial cost savings and reduced the need for home care package hours across the system.

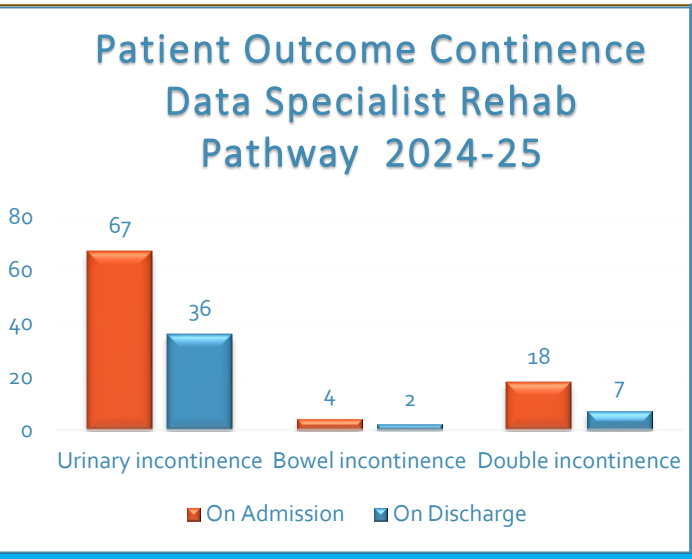
Aim /Objectives

- Improve patient's quality of life
- Improve Incontinence issues
- Reduce the number of home care packages
- Avoid admission to long-term residential care
- Reduce the number of PHN visits
- Reduce the usage of incontinence wear
- To develop an electronic dashboard to collect, monitor and compare data on patient outcomes

Methods

- Continence Assessment Pathway developed
- Continence screening form developed
- Ccontinence policy implementation
- Individualised treatment plan
- Conservative management- toilet training, double voiding, pelvic floor muscle exercises and Lifestyle modifications
- Staff, patient and family education





Outcomes

- Across all pathways 358 patients resolved the continence issues 36.4% improvement and discharged home continent. 44% of patient on the Specialist Pathway showed improvement.
- Staff knowledge and overall culture around the management of incontinence improved. 422 staff trained
- Incontinence wear requirement in the hospital dramatically decreased, with savings of approximately. €24,165 per year.
- Possible annual saving of 130,670 HCP hours to the system in 2024-25. Area for further research.

Conclusion

The Continence Clinical Nurse Specialist role promotes quality healthcare services, improves patient quality of life and decreases expenditures, reduces incontinence resource costs, and reduces the time invested in incontinence care across all rehab pathways.

Reference