# Improving Urinary Incontinence in the over 65 years using a multi-disciplinary approach.

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## Background

Clontarf Orthopaedic Hospital is a 160 bedded rehabilitation hospital caring for patients with a multitude of rehabilitation needs such as orthopaedic, neurological and frail, older patients. In April 2021, Clontarf Hospital commenced a quality improvement project on urinary incontinence.

## Urinary Incontinence

Urinary incontinence (UI) is a common issue which affects people of all ages, however, it does become more predominant with older age. Unfortunately, it is poorly managed with limited assessments and treatment (1). Urinary incontinence can increase risk to patients of falls, particularly at night, moisture lesions, skin excoriation, pressure ulcers, and social isolation (2).

## Aims & Objectives:

- To decrease the incidence of urinary incontinence by accurately assessing, diagnosing and managing the condition.
- To decrease prevalence and incidence of Incontinence Associated Dermatitis (IAD)/moisture lesions.
- To improve staff knowledge on urinary incontinence
- To improve quality of care.

## Improvement Initiatives:

- A committee was formed composed of a multi disciplinary team and lead by the Tissue Viability Nurse Specialist
- A UI policy and a bowel and bladder assessment form was developed.
- A staff survey on Incontinence was carried out in May 2021. Staff knowledge on UI showed positive results, with physiotherapy staff achieving 93% and nursing staff achieving 90% scores.
- A containment device trial was carried out to compare products. Results showed that staff and patients were happy with current products.
- TVN, dietitian and catering manager implemented changes to patients nutrition and hydration. Caffeine free drinks, zero sugar cordial drinks, and apple juice were offered. Water jugs were changed twice per day. Laminated flyers were displayed on wards for patient information. Figure B
- The TVN and Physiotherapy developed education sessions for patients with UI. These focused on bladder training, pelvic floor exercises and skin hygiene and protection. These were very successful and feedback was positive. Figure C

**Outcomes/ Results**:

- Urine Incontinence was the most common incontinence noted on admission N=238 (31.6%). Figure A
- This decreased by 47% by patient discharge post interventions.
- More Female patients were admitted with Urinary Incontinence N =176 (23.4%) than Male patients =64 (8.5%).
- Incontinence Associated Dermatitis is the second most common skin disorder on patient admission N=58 (7.7%).

**Figure A**

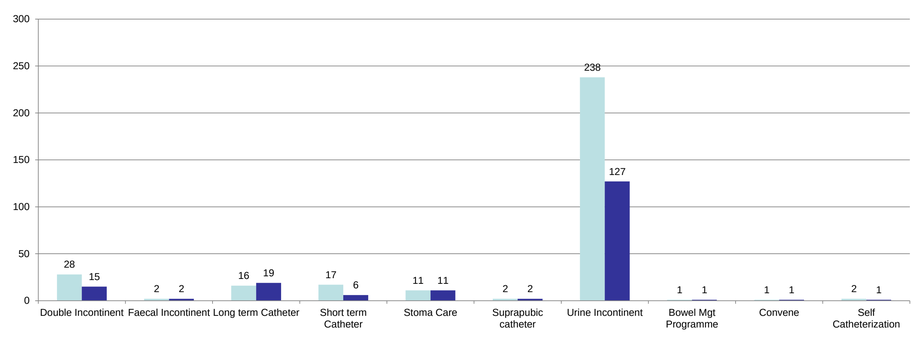



**Figure B**

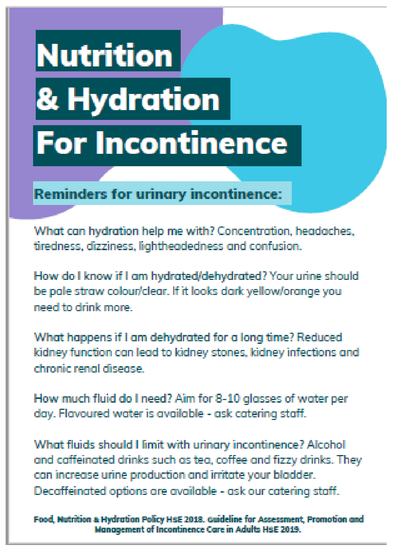
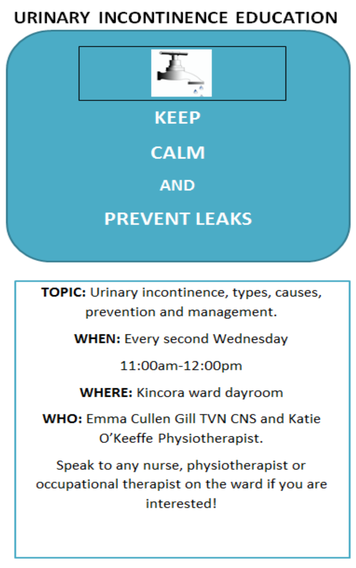



**Figure C**




**Plan for Sustainability/ Future plans**: Propose that a Clinical Nurse Specialist in Incontinence would be hugely beneficial to continue on the project and further develop a service.

## References

1. National Audit of Continence Care: Reports from 2010 & 2012 (2017) (accessed on line 10 June 2021)
2.Haider S. (2017) The Assessment, Treatment and Management of BLADDER PROBLEMS & URINARY INCONTINENCE in Adults across all health sectors in Mid-Trent (accessed on line July 23 2021)