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MANAGEMENT OF INCONTINENCE IN THE NURSING HOME USING TOILETING REGIMES.

Hypothesis / aims of study

This project is to assist the staff of the Nursing Home to:-

- 1) Improve continence of the residents in the Nursing Home
- 2) Equip Nurses with the knowledge and skills to better manage incontinence and promote continence through toileting regime and weaning of diapers
- 3) Enhance the self esteem and dignity of the residents, leading to an improved quality of life
- 4) Reduce the risk of urinary tract infection and skin problems.

Study design, materials and methods

We selected residents who are on diapers, able to indicate or aware of the need to pass urine, need only one person to assist in transfer and mobility. Majority of these residents had functional incontinence because of compromised mobility and /or cognitive impairments.

The programme involves training and supervising nursing home nurses in:

- (a) conduct a basic continence assessment
- (b) determine the type and probable cause/s of incontinence
- (c) rule out transient causes of incontinence
- (d) refer to the Dr and the Rehabilitation team when needed
- (e) perform bladder scan to determine whether there is urinary retention
- (f) chart voiding pattern
- (g) develop a toileting regime for the resident. The toileting regimes used included **prompted voiding, timed voiding** and self schedule toileting regimes.^{1,2}

Results

In the 4 months' project, we selected 16 residents for this programme.

We managed to wean off diapers for 12 residents. 10 of them were weaned off diapers day and night time. The toileting regimes were used to help them stay dry.

All 16 residents were prompted³ to void initially and the schedule was based on their bladder charting recorded for three days, 3 refused to continue on the programme and wanted to remain on diapers, 1 case failed and 12 residents stayed dry with the toileting regimes.

11 of them can self schedule their toileting needs but 3 are dependent on staff for assistance. 1 resident is on regular timed voiding. 1,2,3

4 residents were detected to have urinary tract infections early and treatment was prescribed in the nursing homes. This had helped to reduce the potential risk of residents becoming sick and hence reduce the need for hospitalisation.

Interpretation of results

The toileting regimes used by the nurses had helped the residents with functional incontinence to stay dry. Hence they saved on the use of diapers and the nurses did not have to change diapers for 12 residents after that. This amount to 56 diaper change each day.

The cost savings included diapers, wipes, water supply, disinfectants for handwashing, hand towels for wiping hands, reduced disposal fees. This is also a "go green" project with the reduction in disposal items.

Nurses also save time for changing the diapers for these 12 residents and this time can be used for other quality nursing care.

Without diapers, the residents verbalised that their skin is not itchy and they have less rashes, hence we also reduced the potential risk for skin breakdown and pressure sores. We also reduced the potential risk of urinary tract infection. We can also help these residents to improve in their functional abilities with the increased in mobility and transfer for their toileting needs.

Concluding message

With this project, we had demonstrated that by using toileting regimes we can help the residents in the Nursing Home to manage incontinence and stay dry.

We hope that the project can be shared with staff in the other nursing homes so that we can improve the quality of life for the seniors with functional incontinence. 1,2

	Home on a contract with the Agency for Integrated Care.
Is this a clinical trial?	No
What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	No
This study did not require ethics committee approval because	This project does not involve any blood tests or medications to be given to the resident. The manangemnt of incontinence is a part of nursing care.
Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes