

Brief Report of ICS Care Home Working Party

Members: Joan Ostaszkiwicz (Chair), Lene Blekken, Paul van Houten, Diane Newman, Adrian Wagg, Amanda Wells (ex-officio), Lesley Hanson (ex-officio)

Submitted by: Joan Ostaszkiwicz, Chair Report

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1. Introductions and overview of structure and proposed activities of the working party

AW provided an overview of the background to the establishment of the interdisciplinary ICS Care Home Working Party, initially chaired by Mary Palmer, and outlined the proposed activities, which included:

- 1st year...conducting a scoping and systematic review of the best available evidence about incontinence care in homes for older adults
- 2nd year...drafting Best-Evidence Guidelines for Incontinence Care in Homes for Older Adults
- 3rd year....distributing and publishing guidelines

JO explained the working party reports to the chair of the Nursing Practice Subcommittee, Lesley Hanson, which in turn, reports to the chair of the Nursing Committee, Amanda Wells. The chair of the working party will provide an annual report at the Nursing Forum at each ICS meeting. It is anticipated the working party will do its work mostly through electronic means and will have a face to face meeting at the ICS meeting and one telephone conference call.

2. Discussion about the development of guidelines

The members discussed the scope of the proposed guidelines. It was agreed that Best-Evidence Guidelines for Incontinence Care in Homes for Older Adults need to be sufficiently broad to address national and international differences in aged care policy and practice, and:

- a) Address evidence about knowledge translation/utilisation
- b) Accommodate the resource limitations of the aged care sector such as low staff to resident ratios, and staff with variable knowledge and skill Interventions – hence, need for pragmatic recommendations
- c) Accommodate residents' high levels of cognitive and physical dependence, and poor prognosis.

Challenges/barriers to developing such guidelines include:

- a) A lack of a funding source
- b) International and national differences in aged care regulation, policy and practice
- c) Limited information about the 'state of play' in managing incontinence in care homes in different countries
- d) Limited research about what constitutes quality continence care in care homes

- 1) **ACTION POINT:** Scale back the proposed activity of guideline development in order to a) conduct an international survey/scoping study to identify how continence care is delivered in different countries

- 2) ACTION POINT: Ensure proposed guidelines are informed by a conceptual understanding of 'quality continence care'.
- 3) ACTION PLAN: Investigate funding options to conduct the project/s