



Service Priorities and Programmes
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**A successful Urinary Catheter weaning Service for frail elderly in Geriatric
Continenence Nurse Clinic in HKWC**

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Introduction

A Geriatric Continenence Nurse Clinic attended by a Continenence Nurse Advisor was set up in Fung Yiu King Hospital (FYKH) to serve older persons. It was established in 2001 and has been accredited on 2009 with the objective to provide comprehensive continence nursing service, weaning urinary catheter and health education for clients with continence problem. Acute retention of Urine (AROU) increases with age and is commonly encountered among the hospitalized elderly. AROU has been associated with urinary tract infection, overly distended bladder; prolong length of stay and higher hospital mortality rates. To wean urinary catheter in a geriatric continence clinic will reduce the length of patient's hospital stay especially in the winter surge period.

Objectives

(1) To conduct initial assessment for all new referrals with urinary catheters. (2) To provide early intervention after the initial assessment. (3) To follow up clients with continence problem (4) To improve patient's quality of life

Methodology

The clinic is run by a Continenence Nurse Advisor. It provides out-patient nurse consultation service. (1) A management guideline was developed and endorsed by Consultant Geriatrician for the urinary catheter weaning at geriatric continence nurse clinic. (2) The number of patients weaned urinary catheter was captured (3) Patients and relatives' satisfaction surveys were also measured.

Result

Between October and December 2013, 13 consultation sessions were conducted. There were 75 cases attendance in which, 15 elderly were new cases. Most of our clients (mean score 4.22) and relatives (mean score 4.17, 1=much worse and 5=much better) were generally satisfied with the services and care support of the current Continenence Nurse clinic. 19 clients were discharged from the clinic with no more urinary symptoms, in which 14 patients initial referred for urinary catheter weaning and 12 (85.7%) patients discharged from the Continenence Nurse Clinic without urinary catheter, only 2 of them wearing a urinary catheter on discharge.

Conclusion The current Geriatric Continence Nurse Clinic is providing timely and comprehensive nursing support to clients who suffer from continence problems. To meet the increasing demand of clients with urinary catheters weaning in a geriatric continence nurse clinic and to reduce the patient's length of hospital stay, the services provided by the clinic have to be extended and enhanced in the future.