



Service Priorities and Programmes Electronic Presentations

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Continence Promotion Services for Geriatric Patients

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Introduction

Incontinence is always a prevalent and costly problem in hospitalized geriatric patients. Diapers are common practice to seal off this problem. The Department of Rehabilitation and Extended Care (DREC) admits frail elders with majority having continence promotion care needs. Those patients and their carers distress and worry provoke the set up of Continence Promotion Team since 1994.

Objectives

Each year, more than 4,000 patients are admitted to the DREC. More than 90% of them are geriatric patients. DREC invests resources in the coping skills of both the patients and the carers needs through continence promotion services.

Methodology

Around 60% patients are found to have incontinence problems on admission. Many of them are caused by functional incontinence. They are identified, monitored and trained via the Ward-Based Continence Promotion Program (WBCPP). Health care workers may refer those patients to the Continence Promotion Clinic for further follow up. This clinic includes doctors and nurses provide further recommendations to the ward colleagues after detailed assessment and investigation done.

In 2015/2016, there were 104 new cases. 98 of them had retention of urine problem. 426 visits of patients and/or carers were followed up by the Continence Nurse Advisors. They were being assessed, educated, counseled and provided conservative treatment/procedure under holistic approach. The team also conducted 101 times of followed up those patients as planned

Result

The 'cured' rate is between 10% and 70% for the patients under the WBCPP. The result is most obvious in the group of patients mentally capable to express toilet needs but physically incapable to go to toilet.

The Continence Promotion Clinic had 117 cases completed program, 35 of them required long-term Foley catheter management, 74 weaned off Foley catheter

successfully (42 Foley off but incontinence and 32 Foley off and no incontinence), 2 cases had significant improvement, 3 cases became total continent, and 3 cases dropped out from the program due to various reasons.