5TH EUROPEAN NURSING CONGRESS: ROTTERDAM 2016

Presenter: Angela Kydd: Associate Professor, School of Health and Social Care, Edinburgh Napier University. a.kydd@napier.ac.uk



URETHRAL CATHETER MANAGEMENT IN THE COMMUNITY SETTING: PROVIDING AN EDUCATIONAL RESOURCE FOR PATIENTS AND CARERS

A collaboration between West Dunbartonshire Health and Social Care Partnership (HSCP) and the School of Health Nursing and Midwifery (UWS)

Dr G McKay, Dr A Kydd, Dr A Fleming, C O'Kane, T McIntosh, V McIver, A Shepherd, C Williams, C Russell C Rodgers, M MacLachlan, R Galbraith









Introduction

- Increasing numbers of health care staff call outs for indwelling urethral catheter issues
- High amount of resources
- •Patients with life effecting issues.

 Research conducted to look into the increasing call outs for health care workers.



Study Proposal

•Mixed method study: To explore the incidence of Health care staff callouts and the reasons for this call out.



Data Collection

District nurses recorded data relating to catheterised patients and the incidence of blocked urethral catheters (Clydebank and Vale of Leven/Dumbarton Clydebank and Vale of Leven/Dumbarton)

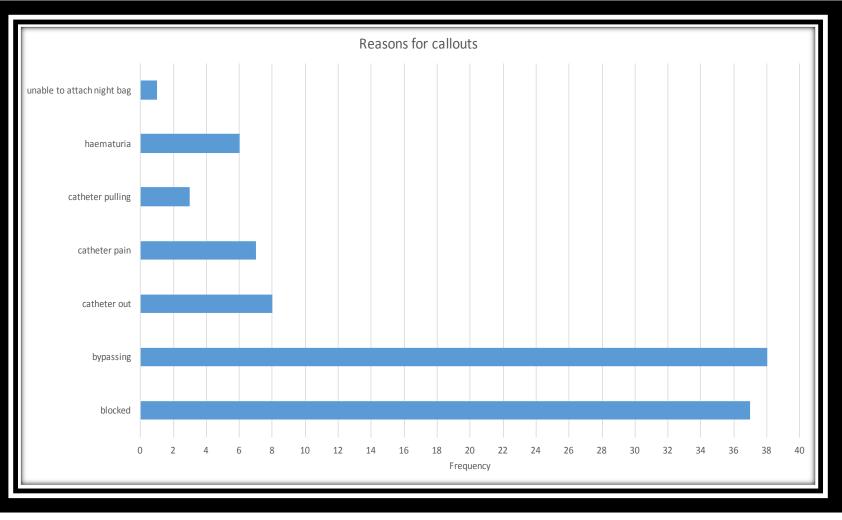
One to one interviews, either face to face or by telephone, were carried out with health and social care staff with a role in managing urethral catheter care in the community, catheterised community living patients and relatives/carers supporting a person with a catheter Edinburgh Napier

Reason for call outs

- Over a May June 2015 we recorded all cases of nurse out of hours callouts related to catheter care.
- 100 recorded calls (82 for urethral and 18 for supra pubic catheters).
- The two most common reasons for callouts were catheter blockage (n=37) and catheter bypassing (n=38).
- Bypassing is a common symptom of blockage and so the two taken together account for 75% of all catheter related callouts.

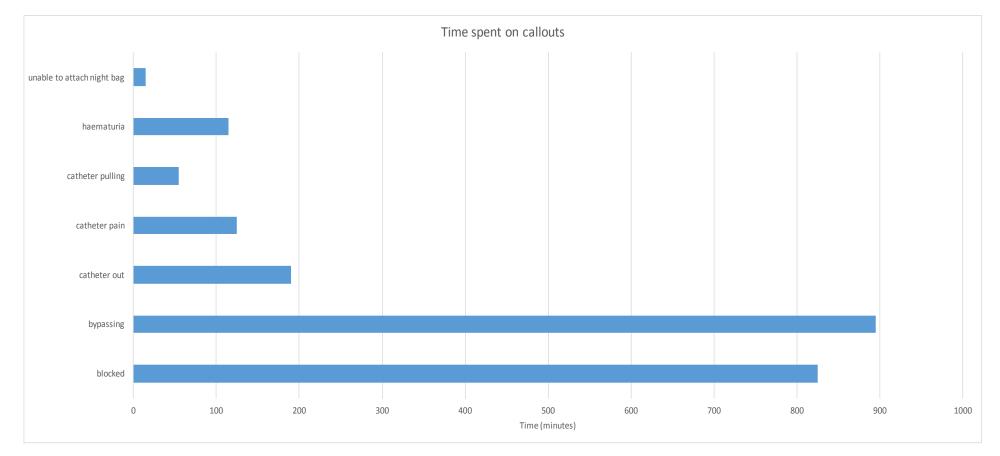


Reasons for call outs



Edinburgh Napier

Time spent on call outs





A total of 15 participants were interviewed

- 6 patients (a further 2 expressed interest then withdrew)
- 2 spouse/relative carers (wife or daughter, hereafter referred to as carers)
- 3 qualified nurses
- •1 health care assistant
- 3 augmented home carers



Qualitative Interview analysis

Lived Experience	Communication	Care delivery	Education
Catheter related concerns	Inconsistent transfer of care	Deciding when to phone for help	Lack of standardised training
Learning as they go along: the patient and carer experiences	Conflicting information	Lack of clarity in terms of who does what	Learning on the job
Therapeutic relationship	Variation in patient and carer expectations	Variation in experience and knowledge	Catheter care interventions

Quotes: Education

- 'to be honest...I didn't have much advice about how to use it or what to do. I just woke up with that there [catheter] and just accepted it'
- Patient (participant 4)
- 'I don't know how well explained sometimes it is before they [patients] leave the hospital and I don't know how well, how much they are shown of the care of the catheter before they leave hospital...some of them are quite happy with things and some of them aren't and I think possibly if, if they were taught maybe more or discussed more before they left hospital it might help'
- Nurse (participant, 9)

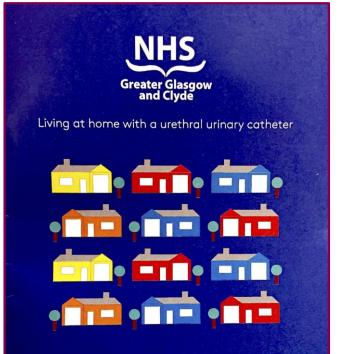


Education – Findings

- Health Care Staff
 - Lack of appreciation regarding annual updates and formal training
 - All staff felt resourced to undertake their role.
 - Training system in place
 - Catheter 'Passport' in patents homes.
- Patients and Carers
 - Stated they had little knowledge of how to care for their catheter
 - Lack of understanding of general catheter care
 - Lost relationship between hospital and community care.



What we did



A guide for patients and care givers Designed and produced a booklet to support people living with a catheter in the community

Evidence-based patient and carer resource, tailored towards the needs of people



Why do we need this new resource?

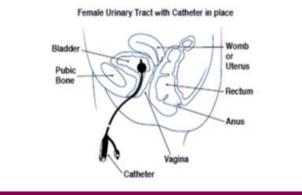
- Patients often learned about catheter care through experience, with the help of healthcare professionals
- There was a clear evidence-based argument for an education resource for patients to provide them with information on why they needed the catheter, how their catheter worked, and what issues and complications they may experience
- Empowering patients with information would allow them to take more control of their own care, which would benefit the patients as well as those who cared for them

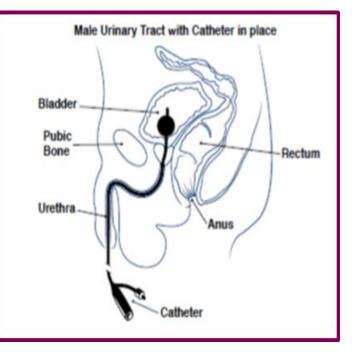
What this resource provides

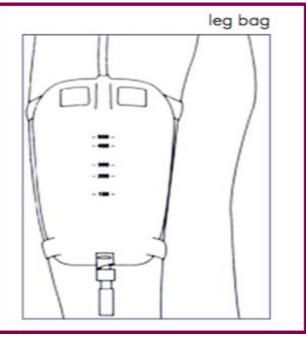
Practical information on how a catheter works.

WHAT IS A CATHETER?

A catheter is a hollow, flexible tube which is used to drain urine from your bladder into an external bag. The tip of the catheter (which sits inside your bladder) is held in place by a small balloon with sterile water in it. A catheter replaces the need to pass urine in the toilet.









What this resource provides

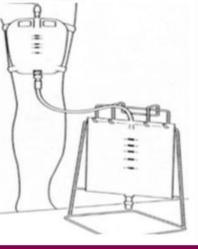
Practical advice on self management

WHAT HAPPENS AT NIGHT?

When you go to bed, connect your leg bag to a night bag. Your district nurse will show you how to do this. The night bag can hold more urine, so that you do not have to get up during the night to empty it. Loosen your leg bag straps when you get into bed.

Use a night bag hanger (see diagram) and never allow it to lie on the floor as this increases the risk of infection.

Always keep your catheter bag lower than your bladder. This reduces the risk of infection.



HOW DO I STORE CATHETERS AND BAGS?

It is important to store spare catheter equipment in its original packaging in a dry, safe place away from direct heat and sunlight.

IS MY PERSONAL HYGIENE IMPORTANT?

Good personal hygiene is important for reducing the risk if catheter related infections:

- Wash the skin in the areas where the catheter enters your body with mild soap and warm water at least twice a day.
- Dry the area thoroughly. Never use talcum powder, lotions, or creams.
- Wash your hands before and after connecting or changing a catheter bag, and after every bowel motion.
- Try to have a bath or shower every day. (You can do this with your leg bag attached.)
- Men should wash carefully under their foreskin.
- Women should, make sure they wash around their anus (back passage) to keep bacteria away from the catheter.

What this resource provides

Practical advice on what to do if things go wrong.

COMMON COMPLICATIONS What problems might I experience with my catheter?

The following section of this leaflet offers some problem solving information and advice should you experience catheter related discomfort or problems.

No urine in the leg bag:-

This may require a very simple action. If this does not help, please contact your district nurse.

LEAKING OR BYPASSING CATHETER:-

Catheters can leak because the flow of urine has bypassed the catheter at the neck of the bladder . If this does not resolve or gets worse contact your district nurse for further advice.

Possible Cause	Action
Tubing kinked	 Follow the steps above to help reduce any kinks and retain the flow of urine.
Bladder spasm	 This can settle on its own if not contact your District Nurse.
Constipation	 Pressure on the bladder may lead to leakage from the catheter. See advice above.

Conclusion

- This initiative will contributing to a person's quality of life.
- This research might serve to reduce health care staff callouts
- The booklet will empower patients and give them more control of their lives



Thank you from The Team Dr G McKay, Dr A Kydd, Dr A Fleming, C O'Kane, T McIntosh (academics)

 V McIver, A Shepherd, C Williams, C Russell C Rodgers, M MacLachlan, R Galbraith (clinicians)