



# FoNS Improvement Insights

## Bladder Problems after Stroke – Meeting the Needs of Service Users

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**Duration of project:** March 2010 – March 2011

**Keywords:** Stroke, in-patients, patient experience, continence, emotional touch points, practice development, staff narratives, fourth generation evaluation, context assessment, patient centred care

### Project background

This project builds on a previously unpublished study by the project leader in 2009 that examined the experience of stroke in-patients (n=40) who developed a bladder problem post stroke. The 2009 study recommended; more proactive patient focused assessment with patients presenting with bladder problems post stroke; increased choice and options of toileting methods used; and formal opportunities for patients experiencing bladder problems following stroke to feedback to staff.

### Aim and objectives of the project

The aim of this project was to increase patient satisfaction with how bladder problems were managed post stroke, especially in relation to the method of toileting used. To achieve this aim the objectives of the project were to:

- Investigate the rationale for the toileting methods currently used in practice and compare these to another stroke unit
- Identify patient preferences in relation to treatment and method of toileting
- Promote communication strategies across the multidisciplinary team regarding assessment, diagnosis and management of bladder problems
- Provide support to nursing team members to enable and sustain any improvements in bladder care that might become necessary
- Identify and utilise the most appropriate mechanisms to monitor and evaluate any practice change including the use of patient feedback

### Key activities and outcomes from the project

To facilitate an examination of the rationale for toileting methods currently employed and increase understanding of the need for effective communication, the findings and recommendations of the previous 2009 study were discussed with the multidisciplinary team. A range of methods were used to engage and involve staff including information booklets, coffee mornings, graffiti boards, staff stories, emotional touch points, the Context Assessment Index (CAI), feedback sessions, and a stakeholder workshop to confirm actions and ways forward.

Coffee mornings were effective in gaining staff interest and engagement. The use of staff narratives or stories was recognised from the literature as a pivotal way of changing continence care practice. Transcribed staff narratives (n=9) revealed; the need for more specific guidance on bladder documentation, a lack of knowledge and confidence about managing bladder problems, the need for a more structured approach to toileting and how the shape and size of bedpans were a source of discomfort to patients. Emotional touch points were explored with some staff to provide further insights about caring for this group of patients. The CAI (n=17) identified a number of areas of weakness within the unit e.g. documentation, active patient discussion, availability of information and staff feeling empowered to change practice that resonated with other information collected.

Data collected throughout the project were presented at a final stakeholder workshop and revealed an obvious need to prioritise continence/elimination care management in the initial post stroke period. Key actions that have, or are now taking place in practice are:

- Staff updating and training on incontinence in stroke patients
- Enhanced continence/elimination documentation and increased awareness of individualised norms/parameters of stroke patients
- Improvements in patient/staff communication e.g. increased liaison with physiotherapists in assessing mobility
- Investment in more suitable equipment

Not all project objectives were achieved e.g. collecting feedback from patients about the changes in practice but work is on-going.

### Implications for practice:

- The project approach provided an important vehicle for the voices of both patients as well as staff to be heard
- The use of multiple approaches to engage staff in the project enabled opportunities for change to be identified by the team themselves rather than them being imposed externally
- Staff narratives helped to identify confusion in the documentation of bladder management problems leading to a constructive dialogue about ways of tackling this
- Increased staff communication resulting from staff coffee mornings led to hoists being used more frequently enabling patients using bedpans to empty their bladder more effectively

A full project report including references can be accessed from: <http://www.fons.org/library/report-details.aspx?nstdid=14915>

This project was supported by the FoNS Patients First Programme in partnership with The Burdett Trust for Nursing.