

The background of the slide is a light gray gradient with several realistic water droplets of various sizes scattered across it. The droplets have highlights and shadows, giving them a three-dimensional appearance.

# **PATIENT CHOICE FOR BLADDER EMPTYING POST TRIAL WITHOUT CATHETER FOR ACUTE URINARY RETENTION**

**SARAH WILSON**

**REGISTERED GENERAL NURSE**

# THE NHS CONSTITUTION (2015)

## 7 KEY PRINCIPLES

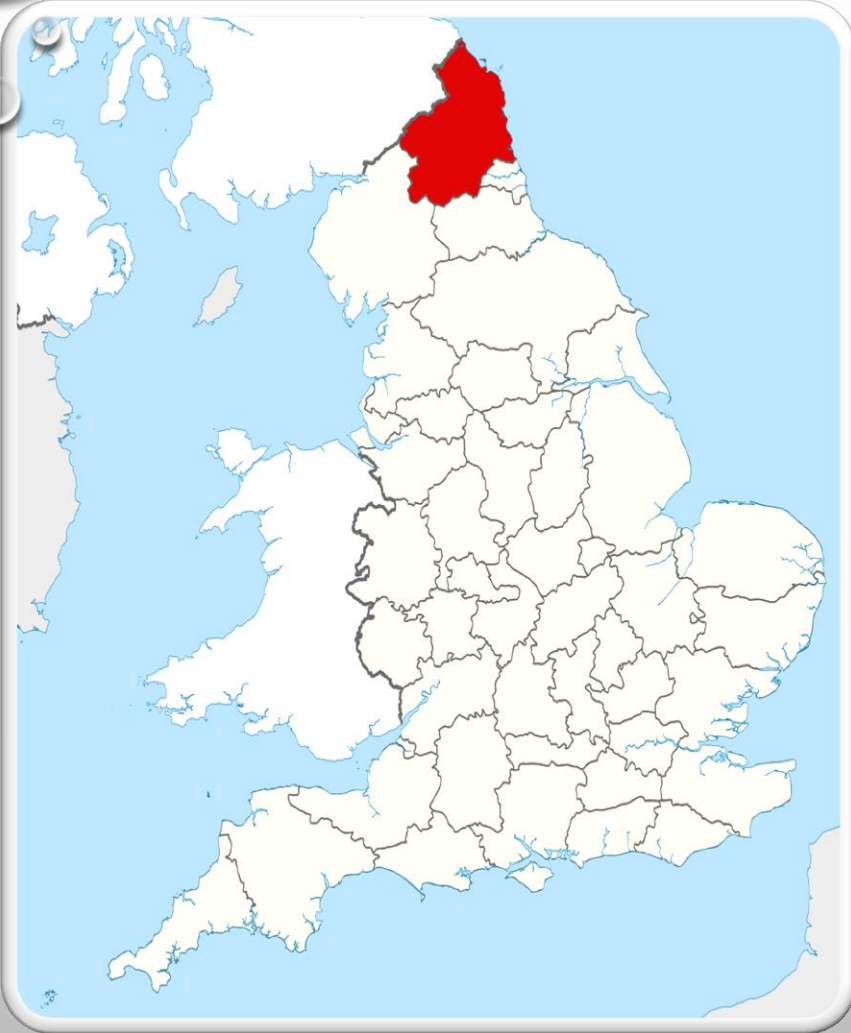
- THE NHS PROVIDES A COMPREHENSIVE SERVICE, AVAILABLE TO ALL
- ACCESS TO NHS SERVICES IS BASED ON A CLINICAL NEED, NOT AN INDIVIDUALS ABILITY TO PAY
- **THE NHS ASPIRES TO THE HIGHEST STANDARDS OF EXCELLENCE AND PROFESSIONALISM**
- **THE PATIENT WILL BE AT THE HEART OF EVERYTHING THE NHS DOES**
- THE NHS WORKS ACROSS ORGANISATIONAL BOUNDRIES
- THE NHS IS COMMITTED TO PROVIDING BEST VALUE FOR TAXPAYERS' MONEY
- THE NHS IS ACCOUNTABLE TO THE PUBLIC, COMMUNITIES AND PATIENTS THAT IT SERVES

# PATIENT CHOICE

- PATIENT CHOICE SHOULD BE FOREMOST IN CLINICIANS THOUGHTS
- PATIENTS SHOULD BE GIVEN CLEAR AND CONCISE INFORMATION TO BE ABLE TO MAKE AN INFORMED DECISION ABOUT HOW TO PROCEED WITH THEIR CARE
- THE MORE A PATIENT FEELS INVOLVED IN THE DECISION MAKING PROCESS, THE MORE COMPLIANT THEY WILL BE WITH THEIR TREATMENT

# STUDY

- TYPE - RETROSPECTIVE STUDY OVER 12 MONTHS
- LOCATION – NORTHUMBRIA NHS FOUNDATION TRUST, NORTHUMBERLAND, ENGLAND
- WHY – TO BENCHMARK AGAINST A NEIGHBOURING TRUST WHO DO NOT OFFER PATIENTS CLEAN INTERMITTENT SELF CATHETERISATION (CISC) IMMEDIATELY POST TRIAL WITHOUT CATHETER (TWOC)
- SAMPLE SIZE – 222 PATIENTS (191 MALE, 30 FEMALE)
- AVERAGE AGE – MALE = 71.5, FEMALE = 63.8



# TRIAL WITHOUT CATHETER PROTOCOL

- ALL DAY APPOINTMENT (08.30 – 16.00)
- IDENTIFY IF ON ALPHA BLOCKER
- IDENTIFY IF CONSTIPATED
- ADVISE TO DRINK ONE GLASS OF FLUID PER HOUR (250ML)
- DISCUSS OPTIONS IF TWOC UNSUCCESSFUL (RECATETERISATION OR CLEAN INTERMITTENT SELF CATHETERISATION (CISC))
- GIVE GENERIC SUPPORTIVE LITERATURE ON CISC
- AFTER THREE VOIDS BLADDER SCAN PERFORMED

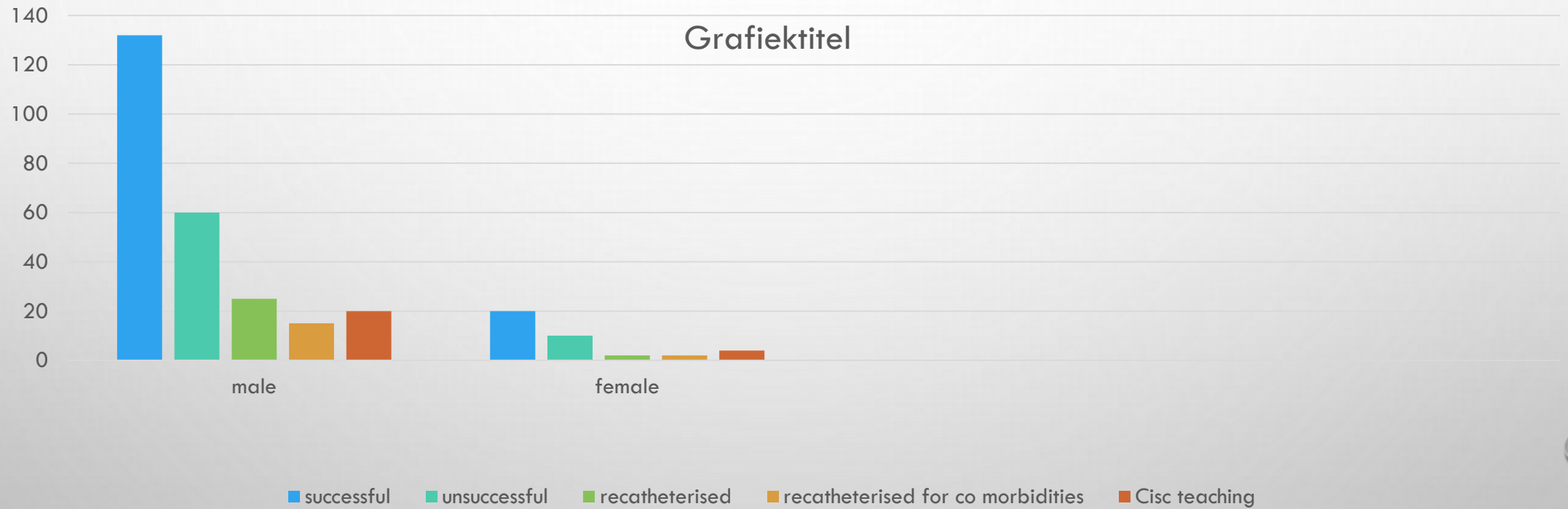
# THE STUDY

- 131 PATIENTS WERE GIVEN GENERIC CISC LITERATURE WITH DISCUSSION
- 72 HAD DISCUSSION ONLY
- 19 WITH CO-MORBIDITIES WERE AWARE RE-CATHETERISATION WAS ONLY OPTION IF TWOC UNSUCCESSFUL FOLLOWING PREVIOUS DISCUSSION WITH MEDICAL STAFF PRIOR TO APPOINTMENT

# RESULTS

- 152 PATIENTS HAD SUCCESSFUL TWOC (132 MALE, 20 FEMALE) DISCHARGED WITH ROUTINE FOLLOW UP
- 70 HAD UNSUCCESSFUL TWOC (60 MALE, 10 FEMALE)
- 19 OF THESE WERE RE-CATHETERISED FOR CO-MORBIDITIES (15 MALE, 4 FEMALE)
- 27 CHOSE RE-CATHETERISATION (25 MALE, 2 FEMALE)
- 24 CHOSE CISC (20 MALE, 4 FEMALE)

# RESULTS





# THOSE WHO CHOSE RE-CATHETERISATION

- GIVEN THE CHOICE OF CATHETER VALVE OR CATHETER BAG
- GIVEN CHOICE OF CATHETER STRAP OR LEG SLEEVE
- GIVEN G STRAP
- LISTED FOR PROSTATE SURGERY OR FURTHER TWOC

# THOSE WHO CHOSE CISC

- ASKED WHAT IS MOST IMPORTANT TO THE PATIENT WITH REGARDS TO STARTING CISC ( SIMPLICITY, COMFORT, INFECTION REDUCTION, DISCREETNESS ETC)
- SHOWN A RANGE OF CATHETERS FROM DIFFERENT COMPANIES (B BRAUN, COLOPLAST, HOLLISTER, WELLSPECT)
- BENEFITS OF EACH CATHETER DISCUSSED
- EDUCATED IN CISC TECHNIQUE
- OBSERVED TO CATHETERISE WITH CATHETER OF CHOICE
- SUPPLIES OF CHOSEN CATHETER TAKEN HOME WITH SUPPORTIVE LITERATURE AND NURSE CONTACT DETAILS
- CONTACTED VIA TELEPHONE 1-2 DAYS LATER AND IF HAPPY USING THE CATHETER THEN REGISTERED WITH DELIVERY COMPANY
- FOLLOW UP ARRANGED FOR 6-8 WEEKS THEN 3-6 MONTHLY FOR A YEAR OR MORE IF REQUIRED

# WHAT HAPPENED NEXT RE-CATHETERISED PATIENTS

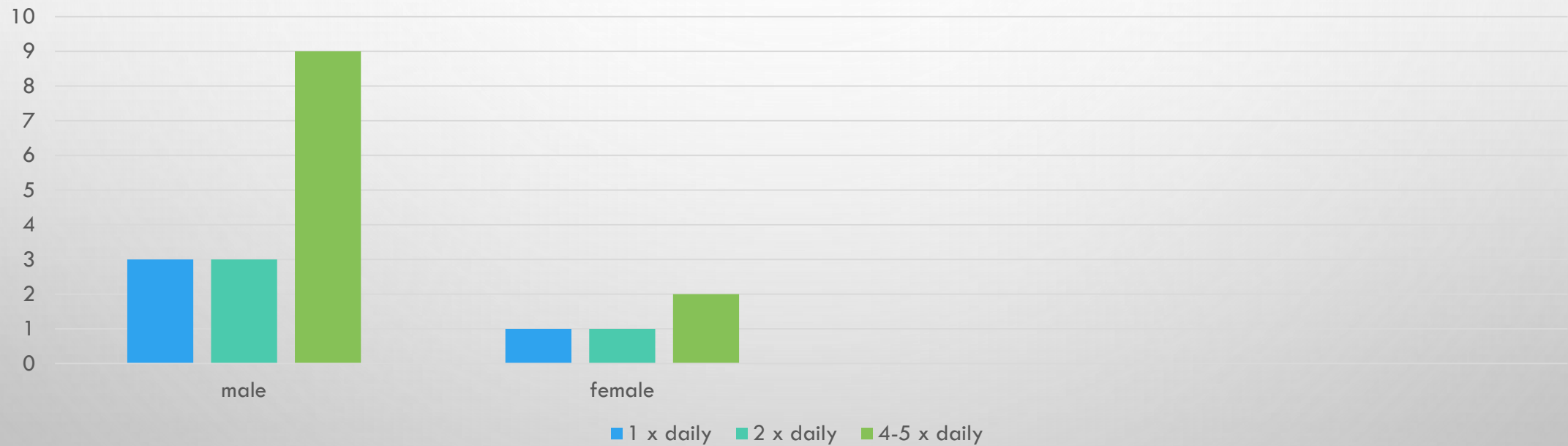
- FROM THOSE WHO CHOSE RE-CATHETERISATION (25 MALE, 2 FEMALE)
- 20 HAD PROSTATE SURGERY (MALE)
- 3 HAD REPEAT TWOC AND WERE SUCCESSFUL (MALE)
- 4 CHOSE TO BE TAUGHT CISC (2 MALE, 2 FEMALE)

# WHAT HAPPENED NEXT FOR THOSE WHO CHOSE CISC

- 4 HAD PROSTATE SURGERY (MALE)
- 1 WAS DISCONTINUED AFTER REVIEW (MALE)
- 19 CONTINUED WITH CISC (15 MALE, 4 FEMALE)

# FREQUENCY OF CISC

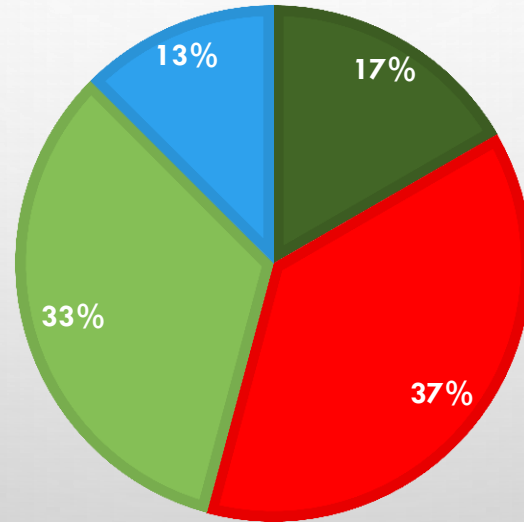
Grafiektitel



# CATHETERS CHOSEN

## COLUMN1

■ B BRAUN ■ HOLLISTER ■ COLOPLAST ■ WELLSPECT



# CONCLUSION

- SUCCESSFUL STUDY WHICH SHOWED THAT PATIENT CHOICE WAS FIRST AND FOREMOST IN DECISION MAKING PROCESS
- CHOICE WAS GIVEN AT ALL STAGES
- FROM THE 222 SUBJECTS,
- EVENTUALLY 180 BECAME CATHETER FREE (EITHER IMMEDIATELY POST/REPEAT TWOC OR PROSTATE SURGERY)
- 23 PATIENTS CONTINUED WITH CISC
- 19 WERE LEFT WITH LONG TERM SRC DUE TO CO MORBIDITIES