Giving continence support to people with dementia

Nurses can offer understanding, assessment and a plan to manage incontinence

Health and social care staff have a vital role in managing continence for people in a variety of settings. When a person has dementia, incontinence can seem like the final straw. It can be a reason why some families decide on a move into long-term residential care.

Families want to be sure that their loved one’s health and care needs are met and they need to have the confidence to talk about continence with health and social care staff. To make this happen, we need to ensure that we are focused around;

» Prevention of unexpected incontinence.

» Managing it when it happens.

» Getting help.

Personalised plan
It is important that staff understand the difficulties that individuals with dementia may experience. Undertaking a continence assessment will gather the information necessary to ensure the person receives the continence care they need and their dignity is maintained.

Information can be gathered from the individual and family members. The assessment should cover physical health problems and medications that could affect continence.

Following the assessment, staff can create a personalised plan for continence management. This should...
include what the person is able to do for themselves and when they may need support, as well as their hydration and dietary requirements.

**Finding the toilets**

The plan should note any continence aids required and the need for the care setting to promote independence to use the toilet if the person is able to. Regular reviews of the plan are essential to ensure that the person’s continence needs are met.

In any care setting it is important to ensure that toilets are easy to identify. It can help to make toilet doors bold or brightly coloured, with easy-to-read signage directing people with dementia to the facilities.

Continence aids vary and it can be difficult to distinguish between them. If you are unsure, consult your local continence advisory service or the provider of the aids.

It is also important to establish the underlying cause of the incontinence, as it may not be the result of dementia. Delirium, for example, can sometimes lead to incontinence.

**Barrier of embarrassment**

An important part of managing incontinence in people with dementia is realising that they may be ashamed and embarrassed about the situation but are not able to express these feelings. Provide reassurance to people with dementia and their families whenever you can and respond promptly and with understanding whenever incontinence occurs.

Companies that supply continence products may offer free training for staff. Help and advice is also available from the Admiral Nurse Dementia Helpline, which is staffed by specialist dementia nurses who can offer practical suggestions.

For people with dementia and their families, embarrassment can be a barrier to seeking support. Armed with the knowledge of how to manage incontinence, health and social care professionals can empower families to talk more openly about it, and offer them the support they need.