

Improving outcomes for care home residents with hydration

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Introduction

Dehydration is one of the most common causes of admission to hospital for nursing home residents. One in four nursing home patients admitted to hospital are dehydrated [1, 2]. Dehydration increases the risk of urinary tract infections (UTIs) which can lead to multiple complications including confusion, falls, acute kidney injury and hospital admission.

Aims

To reduce the incidence of urinary tract infections requiring antibiotics in care homes or admission to hospital.

Methods

The project was undertaken in three residential homes and a nursing home with a total of 150 beds. They had the highest UTI admissions to hospital in the region over the previous three years. Areas of improvement were identified in February 2016.

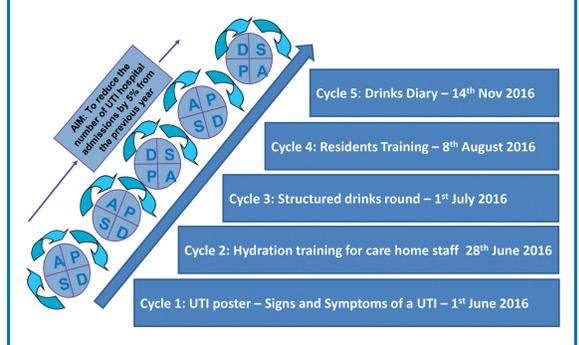
Hydration training was delivered to care home staff who designed and delivered structured drinks rounds. The trolleys were bright, inviting and offered multiple options of drinks, cups and glasses. Themed trolleys were encouraged and staff were creative in their design. Figure 1 shows the full list of interventions.

Data was collected on:

- Compliance with drinks rounds
- UTIs requiring antibiotics
- UTIs requiring admission to hospital.



Figure 1: PDSA Cycles of change within the project



Results

All four care homes demonstrated sustained compliance of 98% with the seven structured drinks rounds a day. Qualitative data from a focus group of managers and staff reported that residents were more alert and willing to participate in activities and more aware of the importance of hydration. Skin integrity also improved. Figures 2 and 3 demonstrate a reduction in both UTIs requiring hospital admission and UTIs requiring antibiotics.

Discussion

- Structured drinks rounds are designed by care home staff, easy to follow and low cost to implement.
- The project demonstrated a reduction in UTI admissions to hospital and UTIs requiring antibiotics.
- Raising hydration awareness was key and residents are benefiting with greater fluid intake, improving their physical and psychological wellbeing.
- Major strengths of the project were consistency provided by the care home pharmacist encouraging local teams and the drive of the managerial team.

This study won **three PrescQIPP** awards – Best Interface, Best Patient Safety and the overall Best Innovation Gold award (voted for by attendees), October 2017.

References: 1. Wilson, L., 2014. Hydration and older people in the UK: addressing the problem, understanding the solutions. 2. Schols, J.M.G.A., De Groot, C.P.G.M., Van Der Cammen, T.J.M. and Rikkert, M.O., 2009. Preventing and treating dehydration in the elderly during periods of illness and warm weather. JNHA-The Journal of Nutrition, Health and Aging, 13(2), pp.150-157.

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Figure 2: UTIs requiring admission to hospital

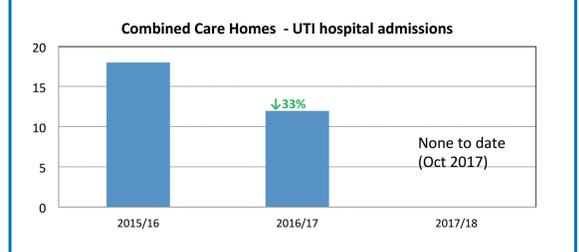


Figure 3: UTIs requiring antibiotics

