

Good Practice Guidance for CARE STAFF^{1,2,3,4}: Management of UTIs for elderly patients residing in care homes



UTI - What is it?

- A urinary tract infection (UTI) is an infection in any part of the urinary system — the kidneys, ureters, bladder and urethra.
- UTIs are more common in women than in men. Urinary tract infection incidence increases with age for both sexes. *NICE CKS, NICE QS90*
- Urinary tract infections were the condition with the highest emergency hospital admissions rate in 2012/13 with 67 admissions per 100,000 population every 3 months on average. *NHSE 2014*
- UTIs in the elderly are often **over-diagnosed** and **over-treated**. *NICE QS90*

UTIs and the Elderly

- The diagnosis of UTIs is particularly difficult in older people, who are more likely to have asymptomatic bacteriuria (bacteria in the urine but no signs or symptoms of an infection)
- Older people in care homes frequently have unnecessary antibiotic treatment for asymptomatic bacteriuria
- Asymptomatic bacteriuria may be avoidable with increased volume of water or fluids. For good hydration, most people need 1500-2000mls of **fluid per day**.
- **In elderly patients (over 65 years of age), diagnosis of Urinary Tract Infections (UTIs) should be based on clinical signs and symptoms.**

Signs and Symptoms of a UTI

Does the patient/resident have two or more of following as new symptoms?

- **New onset or worsening of pre-existing confusion /agitation/drowsy**
- **shaking chills (rigors)/ high temperature >38°C/ low temperature of <36°C**
- **Dysuria** - (painful or difficult urination)
- **Urgency** - (needing to go to the toilet quickly)
- **Frequency** - (needing to go to urinate more often than normal)
- **Urinary incontinence** – (unintentional loss of urine)
- **Flank or suprapubic pain** – (pain in the side of the body or above the groin area)
- **Haematuria** (blood in the urine)

If your resident has two or more new symptoms as listed above, then:

- **Complete the Management of UTIs for elderly patients residing in care homes form (Form U1).**
- **Contact resident's GP to inform them of these symptoms**
- **Fax form for the attention of the GP and follow the advice given**
- **Once completed file the form in resident's care plan**
- **Place a copy of the form in the envelope provided by the CCG. This will be collected every 3 months.**

What can I do to help the residents in my care who are at risk of UTIs?

Dehydration can increase the risk of UTIs developing in the elderly. **Offer your residents plenty of fluids and keep them hydrated.**

What are the common causes of dehydration?

- The elderly have reduced thirst sensation so may not know when they are thirsty
- Unable to communicate (cannot say when they are thirsty)
- Pre-existing medical conditions e.g. diabetes, stroke.
- Dementia – may forget to drink or eat
- Cognitive impairment
- Medications e.g. diuretics, laxatives
- Illness
- Fear of incontinence due to drinking
- Mobility and dexterity issues – can physically go and get a drink
- Excessive fluid losses – diarrhoea, sweating, vomiting

How will I know if someone is dehydrated?

You client may have some of the following signs or symptoms if dehydrated:

- Dry mouth
- Headache
- Dizziness
- Tiredness
- Confusion or not wanting to take part in activities
- Constipation
- Pressure ulcers
- Falls
- Kidney stones
- Low blood pressure
- Medication toxicity
- UTI (urinary tract infection)
- Dark coloured urine



How can I help someone keep hydrated?

Remember, adults need to drink 6-8 large glasses of fluid each day to keep hydrated!

- ✓ Identify those with poor fluid intake/ are at risk of dehydration/ those that require assistance with drinking, make sure to monitor and record their fluid intake
- ✓ Provide ice-pops for the people who may not like drinking
- ✓ Give water with every meal
- ✓ As the weather gets warmer, increase the availability of drinking water and encourage patients to drink more
- ✓ Try serving water (hot or cold) with slices of orange, lime or lemon
- ✓ Many fruits and vegetables also contain water which can help with maintaining hydration
- ✓ Asking residents what their favourite drink is or serving it in a favourite cup/mug etc.
- ✓ Have signs around care homes to encourage people to drink plenty of fluids
- ✓ Encourage sips of fluid little and often in people with poor mouth control
- ✓ Serve water fresh and chilled
- ✓ Offer water and fluids throughout the day – at mealtimes and between meals- some people prefer to drink “little and often”. Ensure glasses are filled up!
- ✓ Ensure drinking water is visible and easily accessible



Colourful cups
and appealing
trolley

Offering a wide
variety of drinks



Serve drinks
fresh and
chilled



Themed trolley
for Halloween
including fruits
and vegetables



REFERENCES

¹ PHE, Diagnosis of urinary tract infections (UTIs), (accessed June 2017). [https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/619772/Urinary_tract_infection_UTI_guidance.pdf]

² NICE Quality Standard [QS90], June 2015. [<https://www.nice.org.uk/guidance/qs90/chapter/Quality-statement-1-Diagnosing-urinary-tract-infections-in-adults-aged-65-years-and-over>]

³ SIGN 88 • Management of suspected bacterial urinary tract infection in adults, July 2012. [<http://www.sign.ac.uk/assets/sign88.pdf>]

⁴ Berkshire East Antibiotic Guidelines, 2014. [<http://www.windsorascotmaidenheadccg.nhs.uk/wp-content/uploads/2013/09/Antibiotic-Guidelines-Berkshire-East-Primary-Care.pdf>]