

#560: Knowledge, Beliefs, Attitudes, And Practices in Home Care Staff Regarding Urinary Incontinence: A Survey in a rural and remote area



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Introduction

Home care Staff (HCS) play a pivotal role in identifying and supporting individuals who experience urinary incontinence. However, the ability to identify and support such persons depends on their knowledge, beliefs, practices, and attitudes.

Gaps in HCS continence-related education and knowledge may contribute to sub-optimal assessment and management of UI. Likewise, negative or outdated attitudes, beliefs and practices may affect their engagement and provision of continence care.

There is limited research exploring home care staff's knowledge, attitudes, and education needs regarding UI and continence care. A recent systematic review identified only four studies for inclusion, highlighting this continuing gap.

Methods and Materials

This study employed a descriptive cross-sectional web-based survey design to assess the knowledge, attitudes, beliefs and practices of home care nursing staff in a rural region in Western Canada.

A web-based questionnaire was administered to home care staff in four rural towns using REDCap electronic data capture tools. The questionnaire was co-created with relevant home care administrators and providers. The survey was opened from 27th June 2022 to September 30th, 2022

Results

Table 1. Demographics (N=42)

Variable	N (Percentage)
Age (yrs.)	
Under 20	0 (0%)
21-40	16 (38.11%)
41-60	22 (52.37%)
Over 60	4 (9.52%)
Sex	
Male	0 (0%)
Female	42 (100%)
Highest level of education	
High school or equivalent	8 (19.05%)
College or vocational diploma or equivalent (24)	24 (57.14%)
Bachelor's degree (8)	8 (19.05%)
Master's degree (2)	2 (4.76%)
Job Title	
Health Care Aide (HCA)	20 (47.62%)
Licensed Practical Nurse (LPN)	6 (14.28%)
Registered Nurse/Registered Psychiatric Nurse (RPN)	15 (35.71%)
Nurse Practitioner	0 (0%)
Other (Home Care Manager)	1 (2.4%)
Number of years as a home care practitioner	
Less than 10 years	21 (50%)
11-20 years	11 (26.19%)
21-30 years	6 (14.29%)
31-40 years	3 (7.14%)
More than 40 years	1 (2.38%)
Number of hours of work per week	
Less than 20 hours	6 (14.3%)
21-30 hours	10 (23.8%)
31-40 hours	24 (57.1%)
More than 40 hours	2 (4.8%)

Table 2. Home Care Beliefs and Practices Regarding UI Assessment and Management

Question	Always (%)	Most of the time (%)	Sometimes (%)	Rarely (%)	Almost Never (%)
UI adversely impacts the quality of my clients' life?	26.2%	33.3	38.1%	0%	2.4%
When meeting a new client, I routinely ask about UI?	33.3%	21.4%	16.7%	9.5%	19%
I follow specific guidelines or protocols regarding continence care for your clients?	50%	9.5%	26.2%	7.1%	7.1%
My daily workload adversely impact the continence management of your clients?	7.1%	11.9%	38.1%	21.4%	21.4%
I am confident in assessing UI?	11.9%	23.8%	31%	9.5%	23.8%
I am confident managing UI?	26.2%	31%	31%	4.8%	7.1%
The assessment of UI a priority in my work as a home care staff?	21.4%	23.8%	28.6%	11.9%	14.3%
The management of UI a priority in my workplace as a home care staff?	35.7%	33.3%	21.4%	4.8%	4.8%
I feel embarrassed about your client's continence needs?	0%	0%	0%	9.5%	90.5%
I feel comfortable supporting clients with UI?	59.5%	19%	14.3%	0%	7.1%

Question	Strongly disagree (%)	Disagree (%)	Neither agree nor disagree (%)	Agree (%)	Strongly agree (%)
I have sufficient education and training to discuss, manage and support clients with UI	11.9%	23.8%	28.6%	35.7%	0%
Urinary incontinence is a normal part of ageing	4.8%	45.2%	21.4%	23.8%	4.8%
Urinary incontinence only affects older people	35.7%	52.4%	9.5%	2.4%	0%
Continence care is not my responsibility as a home care staff	61.9%	23.8%	7.1%	4.8%	2.4%
Nothing can be done about urinary incontinence	40.5%	38.1%	19.0%	2.4%	0%

Table 3. Home Care Staff Education/Training on UI Assessment and Management

Variable	N (percentage)	Variable	N (percentage)
Receive education/training on the management of UI?		Received education/training on the assessment of UI?	
Yes	15 (35.7%)	Yes	17 (40.5%)
No	27 (64.3%)	No	25 (59.5%)
Place you received your education/training on the management of UI?		Place you received your education/training on the assessment of UI?	
Educational Institution (post-secondary)	7 (46.7%)	Educational Institution (post-secondary)	9 (52.9%)
Current employer	8 (53.3%)	Current employer	10 (58.8%)
Previous employer	1 (6.7%)	Previous employer	3 (17.6%)
Continence product manufacturer	2 (13.3%)	Continence product manufacturer	8 (47.1%)
Other	5 (33.3%)	Other	5 (29.4%)
How recent did you receive your education/training on the management of UI?		How recent did you receive your education/training on the assessment of UI?	
Within the last 3 months	2 (13.3%)	Within the last 3 months	3 (17.6%)
Within the last 6 months	0 (0%)	Within the last 6 months	0 (0%)
Within the last year	3 (20%)	Within the last year	1 (5.9%)
Within the last 2-3 years	5 (33.3%)	Within the last 2-3 years	4 (23.5%)
Within the last 5 years	1 (6.7%)	Within the last 5 years	3 (17.6%)
Within the last 10 years	3 (20%)	Within the last 10 years	5 (29.4%)
Not applicable	1 (6.7%)	Not applicable	1 (5.9%)
Formal or informal education/training on the management of UI provided by current employer?		Formal or informal education/training on the assessment of UI provided by current employer?	
Yes	7 (16.7%)	Yes	7 (16.7%)
No	7 (16.7%)	No	6 (14.3%)
Do not know	28 (66.7%)	Do not know	29 (69%)

Conclusions

While more than half of home care staff in this study reported low levels of education and training in UI assessment or management, and 28.6% (n=12) felt that incontinence was normal in older adults, home care staff held positive attitudes towards UI, UI care and employed a variety of treatments, management and supports for clients living with UI.

Both formal and informal training should be developed and provided to home care staff who are frontline service providers to community dwelling older adults living with UI.

References

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