

Strategies for older people living in care homes to prevent urinary tract infection: the StOP UTI realist synthesis

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Plain language summary

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Plain language summary

This study was about how interventions to prevent and recognise urinary tract infections might work in care homes to reduce urinary tract infection in older people.

We used an approach called realist synthesis. This aims to understand everything that influences how care is delivered to find out what works in particular situations and settings. We did this by talking to care home staff, residents, family carers and other experts about how to reduce urinary tract infection in older people living in care homes. We combined their experiences and ideas with the evidence from the research literature.

From this, we developed three areas of focus:

1. care approaches to support accurate recognition of urinary tract infection
2. care approaches to prevent urinary tract infection/catheter-associated urinary tract infection
3. making best practice happen.

Our research shows that care staff are best placed to recognise subtle changes in a resident's behaviour or well-being which might indicate an infection. There are several things care staff can do to proactively help residents from developing a urinary tract infection such as prioritising residents' hydration needs and addressing poor fluid intake. Putting in place infection prevention measures such as caring for, or where possible, removing a urinary catheter can also help. Actively monitoring residents to determine reasons for changes in behaviour can increase the focus on preventative activities and help avoid inappropriate treatment.

The detection and prevention of urinary tract infection in older people could be improved in several ways, including:

- education tailored to the roles and work of care home staff
- leaders of care homes providing a culture of safety and improvement where urinary tract infection is recognised as something preventable rather than unavoidable
- having a safe and supportive environment where staff are confident to communicate their concerns
- all care team members, residents and their families and other professionals linked with the home having a common language and shared goals in the recognition, prevention and diagnosis of urinary tract infection.

The COVID-19 pandemic required us to adapt our approach and work mainly online both in our interactions with stakeholders and as a research team. While this provided opportunities to extend our reach to a wider group of stakeholders, it also limited some of our engagement work.

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This article

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