## Problems people with spinal cord injury experience accessing help with bowel care when hospitalised outside a specialist spinal injury service

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## **Aims and objectives:** To examine the nature of problems experienced by people with spinal cord injury (SCI) when accessing help to maintain recommended bowel regimes while hospitalised outside a specialist spinal injury service.

**Background:** Bowel dysfunction is one particularly undesirable aspect of life with a SCI, with constipation and incontinence common.

Design: Descriptive qualitative.

**Methods:** Accounts of problems encountered in hospitals in New South Wales Australia collected during interviews with 11 people living with SCI and 12 responses provided by spinal clinicians via an online survey were subjected to thematic analysis. The COREQ guidelines were followed for reporting.

**Results:** There were similarities across data collected from both sources. Individuals with SCI described instances where their bowel care needs did not fit with the pace and processes in acute hospitals. The clinician data pointed to a failure of healthcare professionals to assist people with SCI to maintain bowel care regimes recommended by specialist spinal services. Both groups described times when bowel care received was unreliable and fragmented, along with reports of staff who were unwilling and/or unable to provide the assistance required. Many and varied physical and psychosocial repercussions for individuals were associated with these system failures. In some instances, rather than restoring health, being admitted to hospital represented a significant health risk.

**Conclusion:** A failure of hospital systems to meet the bowel care needs of people with SCI when hospitalised outside a specialist spinal unit was identified. System and individual factors contributed to these problems, hence addressing them requires both system and individual responses.

**Relevance to clinical practice:** If this problem is left unaddressed, the health and quality of life of people with SCI will continue to be compromised. Nursing scope of practice needs to be clarified and communicated to nurses outside specialist spinal injury units in relation to their role in maintaining bowel care regimes recommended for their patients by spinal specialists, and nurses need to ensure they possess the skills required. To allocate the time needed to provide this care, individual nurses need the support of the whole nursing team, including managers who are prepared to arrange additional staff when needed.



## Areas for reflection

- What pathways and policies exist in your area to prevent such issues arising for your patients?
- How can we raise the importance of bowel care with general ward staff?

If you would like further information on bowel management following spinal cord injury please <u>click</u> <u>here</u>.

