## Managing Faecal INcontinence in people with advanced dementia resident in Care Homes (FINCH) study: a realist synthesis of the evidence

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**Disclaimer:** This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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# Plain English summary

## The FINCH study

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## **Plain English summary**

O ne-third of people living with dementia are care home residents. Many experience faecal incontinence (FI). Using a method called realist synthesis, we considered which ways to improve continence care in care home settings were best supported by the evidence.

The review found that the majority of care home residents with FI will also be incontinent of urine. This suggests that there is limited value in focusing only on FI or on one possible cause of FI such as constipation. The research recognised that having dementia meant that a person was more likely to be incontinent, but how the symptoms of dementia affected a person's ability to benefit from different types of interventions was not assessed.

Staff knowledge, person-centred approaches to care and clinician involvement in assessing possible causes of FI are important in preventing, reducing and managing FI. Prompted toileting is an approach that is worth trying and may be particularly beneficial for some residents. However, staff need to have the authority to act on this knowledge and training, and the intervention needs to 'fit' into their everyday work patterns.

Interventions need to recognise that, in care homes, continence care is intimate work, linked to taking someone to the toilet or helping them wash. This work may be seen as routine but the evidence demonstrates that to prevent, reduce and manage FI, particular skills and expertise in dementia and continence care are required. This should be recognised within the organisation, supported with clinician input and be incorporated into future research and practice development.

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