

TABLE 2 National Association of Social Workers (NASW) Objectives for Long-Term Care Social Workers Applied to Urinary Incontinence

NASW Objective*	Social Worker Response to Urinary Incontinence (UI)
Provide direct social services to residents and their families	<ul style="list-style-type: none"> ● Preadmission and admission assessments include questions about UI and psychosocial response to UI. ● Address psychological, behavioral, and social factors related to UI, for example: depression, anxiety, self-imposed social isolation, dignity, shame, sense of loss, guilt, anger, self-esteem, power dynamic with direct care staff, and self-determination. ● Discuss options and preferences with residents and/or family for UI interventions with quality of life and emotional well-being in mind. ● Recognize the need to discuss UI even with residents and family members not directly affected by UI as they should receive preparation in dealing with residents affected by UI, and all should know the facility stance toward addressing UI.
Assist residents and families to use and receive maximum benefit from the facility and community-based social and health resources	<ul style="list-style-type: none"> ● Advocate for the resident, the resident's and family's goals with regard to UI, and to achievement of optimal quality of life. ● Work with nursing and medical staff to educate residents, family, and staff members that UI is not a normal part of aging. ● Educate residents and families on the importance of determining the cause of UI, underscoring that there are reversible causes of UI. ● Help prepare residents/family for appointment with physician and advance practice nurses by articulating concerns, fears, and how to weigh intervention options in light of residents' goals of care. ● Address UI in care plan conferences including how to minimize psychosocial suffering associated with it. Ensure that resident and /or family are invited in care plan meetings. ● Help residents and family access community-based resources for preventing and coping with UI.
Strengthen communications among residents, families, and the staff	<ul style="list-style-type: none"> ● Advocacy ● Provide sensitivity training for residents, family and all staff members about the psychosocial implications of UI. ● Provide education about culturally competent approaches to incontinence episodes and care

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NASW Objective*	Social Worker Response to Urinary Incontinence (UI)
Assist facility to achieve and maintain a therapeutic environment essential to the optimal quality of life and independent functioning of each resident and to provide for maximum participation of residents in planning activities and policies	<ul style="list-style-type: none"> ● Acknowledge efforts by direct care staff in helping residents remain continent or achieve continence. ● Include resident and family input on intervention preferences (internal, external devices, pads, containment methods, etc.) ● Work with administrator, director of nursing, medical director, activities director, and direct care staff to decide on best way for facility to prevent and address UI (systemwide). Include resident council and family council input. ● Track effectiveness of interventions and adjust. ● Ensure that all staff members receive basic training about UI. ● Ensure all staff understand their role related to helping residents remain continent and/or manage incontinence. ● Using Minimum Data Set and other data, work with other staff members to track facilitywide measures related to UI. ● Work with activities staff, nursing staff, and direct care staff to identify residents who may be suffering because of UI. ● Look at systemic barriers that get in the way of resident continence
Promote facility–community interaction by encouraging community involvement	<ul style="list-style-type: none"> ● Advocacy ● Work with residents, family, and staff members on realizing the importance of resident continence (including <i>social continence</i>) for residents leaving the facility to enjoy community outings.

*NASW Standards for Social Work Services in Long-Term Care Facilities (2003).

Source: Sanders, S., Bern-Klug, M., Specht, J., Mobily, P.R., Bossen, A. (2012). Expanding the role of long-term care social workers: Assessment and intervention related to urinary incontinence. *Journal of Gerontological Social Work*, 55:262-281.