

Taste the Difference Challenge

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One team shared values



AIM:

To inspire care homes providers to introduce decaffeinated tea/coffee as the default option

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Objectives

What is the Taste the Difference Challenge?

How caffeine affects the bladder?

Caffeine and links to falls

Results of Taste the Difference Challenge in UHL

Implementing in a care home



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What is Taste the Difference Challenge?

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- Offering patients decaffeinated tea or coffee
- Education about the benefits of decaf
- Patient feedback from trying a decaffeinated drink
- Can you taste the difference?
- Would you switch to decaf?



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Feedback is the Key!

- Resident completes feedback form
- Collate data
- Present case for change

TASTE THE DIFFERENCE CHALLENGE!



What decaffeinated drink did you try?
Tea Coffee

Can you tell it's not caffeinated?
Yes No

What do you prefer?
Decaffeinated Caffeinated
No preference

Caffeine in tea and coffee can irritate the bladder and cause a need to rush to the toilet, and potentially increase your risk of falls. Knowing this, would you switch to decaffeinated tea or coffee?
Yes No

Ward: LRI LGH CH.

Housekeeper name:



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Background to the Project

- Reducing harms associated with continence in hospital
- Link between falls and lower urinary tract symptoms (Roggeman et al., 2020)
- In UHL 1:4 inpatient falls related to toileting
- Decaffeinated tea or coffee was never offered to patients

Harmfreecare



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Caffeine and Older People

1100 patients aged 60 years plus:-

- 50% of patients drinking >3 cups of coffee daily experiencing overactive bladder (OAB)
- 30% of patients drinking <3 cups of coffee OAB
- 10% of patients drinking <3 cups of coffee experiencing severe OAB



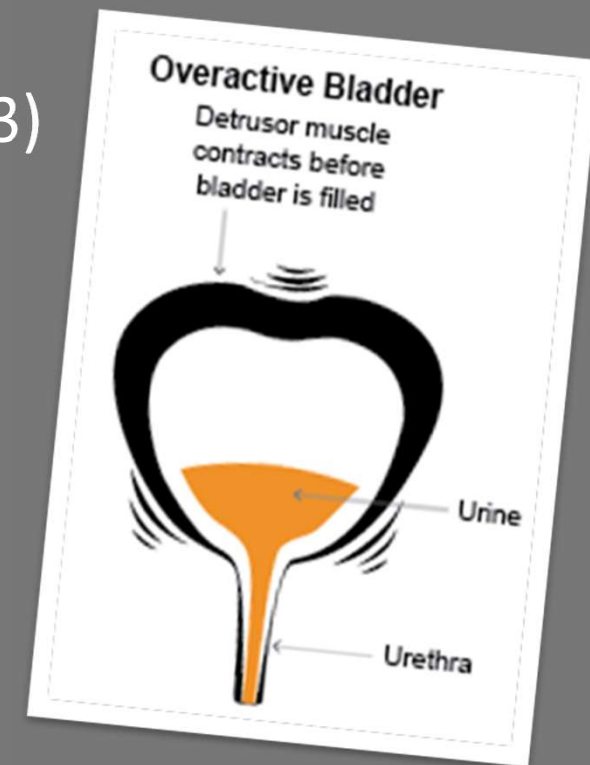
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(Caffeine as a Probable Factor for Increased Risk of Overactive Bladder Development in Elderly People (2016) Kosilov, Laparev, Ivanoskaya)



Caffeine and the Bladder

- Diuretic
- Accelerates urine production (Smith et al., 2013)
- Increases detrusor muscle overactivity (Davis et al., 2013)
- Lower threshold of the bladder filling phase (Lohsiriwat et al. 2011)
- Urinary urgency and frequency
- Rushing to the toilet
- Risk of Falls



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Falls and Older People

- 1/3 of people aged over 65 fall at least once a year.
- 1 in 2 of those over 80 years fall at least once per year.
- Most common cause of death from injury in the over 65s
- Cost the NHS £2bn a year and over 4 million bed days
- People living in care homes are 3 times more likely to fall than at home.



[The human cost of falls - UK Health Security Agency \(blog.gov.uk\)](http://blog.gov.uk)

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Other Ways Switching to Decaf Can Reduce Falls

- Improved Sleep
(NHS, Better Health, Every Mind Matters, 2023)
- Reduce risk of Osteoporosis
(Looking after Your Bones, NHS Reform, 2021)



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Other Benefits of Switching to Decaffeinated

- Reduce tachycardia and palpitation – NHS, (2023) [Heart palpitations - NHS \(www.nhs.uk\)](https://www.nhs.uk)
- Helps to prevent headaches and dehydration – NHS, (2023) [Tension headaches - NHS \(www.nhs.uk\)](https://www.nhs.uk)
- Reduce bowel irritation (diarrhoea) NICE, (2023) [Scenario: Chronic diarrhoea \(more than 4 weeks\) | Management | Diarrhoea - adult's assessment | CKS | NICE](#)
- Reduces indigestion – NHS (2023) [Indigestion - NHS \(www.nhs.uk\)](https://www.nhs.uk)

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Care Homes Promoting Continence

- Improve residents' continence - 50% of care home residents have urinary incontinence
- Reduce Pad Usage – NHS spend £80 million annually
- Reduce Moisture Associated Skin Damage
- Incontinence is not an inevitable part of ageing
- Continence can be improved by simple lifestyle changes, e.g., switching to decaffeinated tea and coffee.

(Excellence in Continence Care, 2018)

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Results of Taste the Difference Challenge

Caring at its best

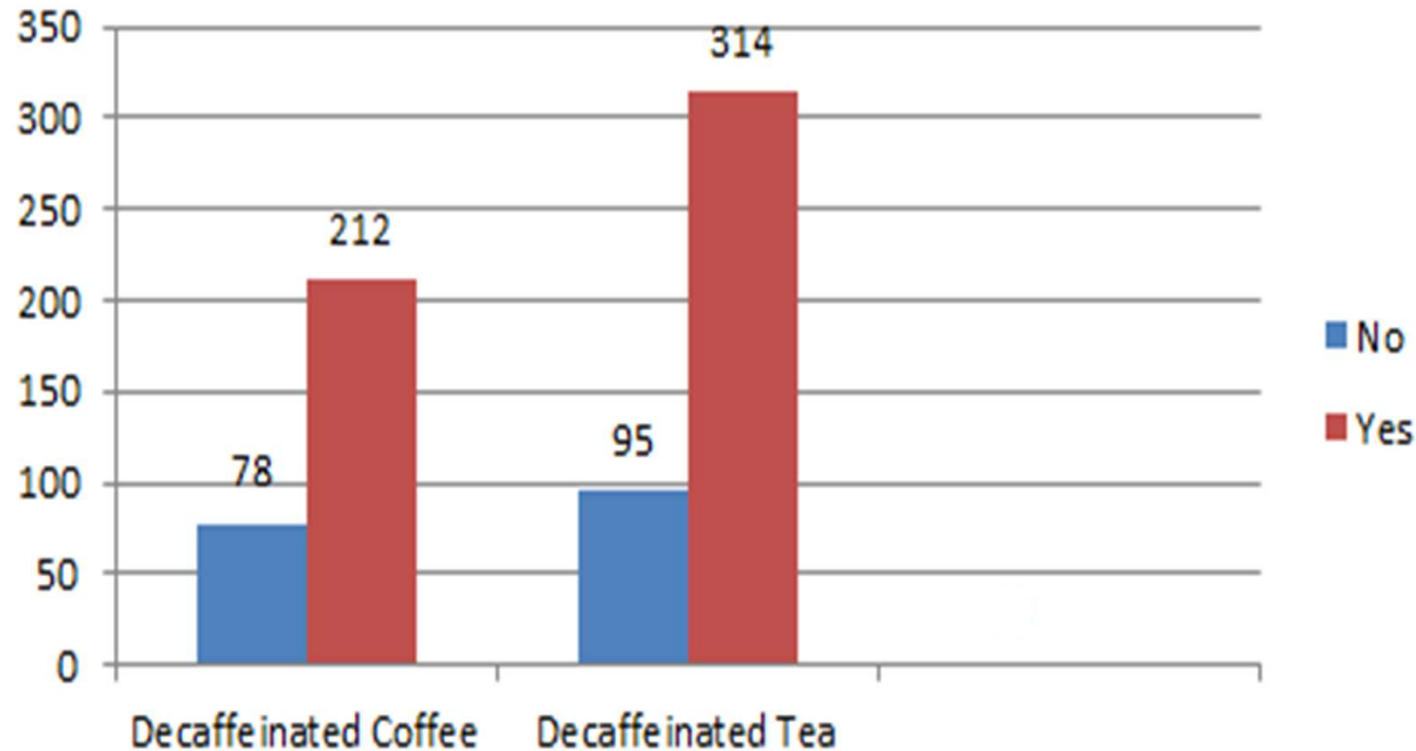
- 699 patients took part.
- 59% of patients could not taste the difference between decaffeinated coffee and caffeinated
- 56% of patients could not taste the difference between decaffeinated tea and caffeinated
- 73% of patients would switch to decaffeinated coffee and 77% would switch to decaffeinated tea having heard the health benefits.
- The health benefits of switching to decaffeinated tea and coffee are more important.

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Patient Feedback Driving Change

Caffeine in tea and coffee can irritate the bladder and cause a need to rush to the toilet, and potentially increase your risk of falls. Knowing this, would you switch to decaffeinated tea or coffee?



Caring at its best

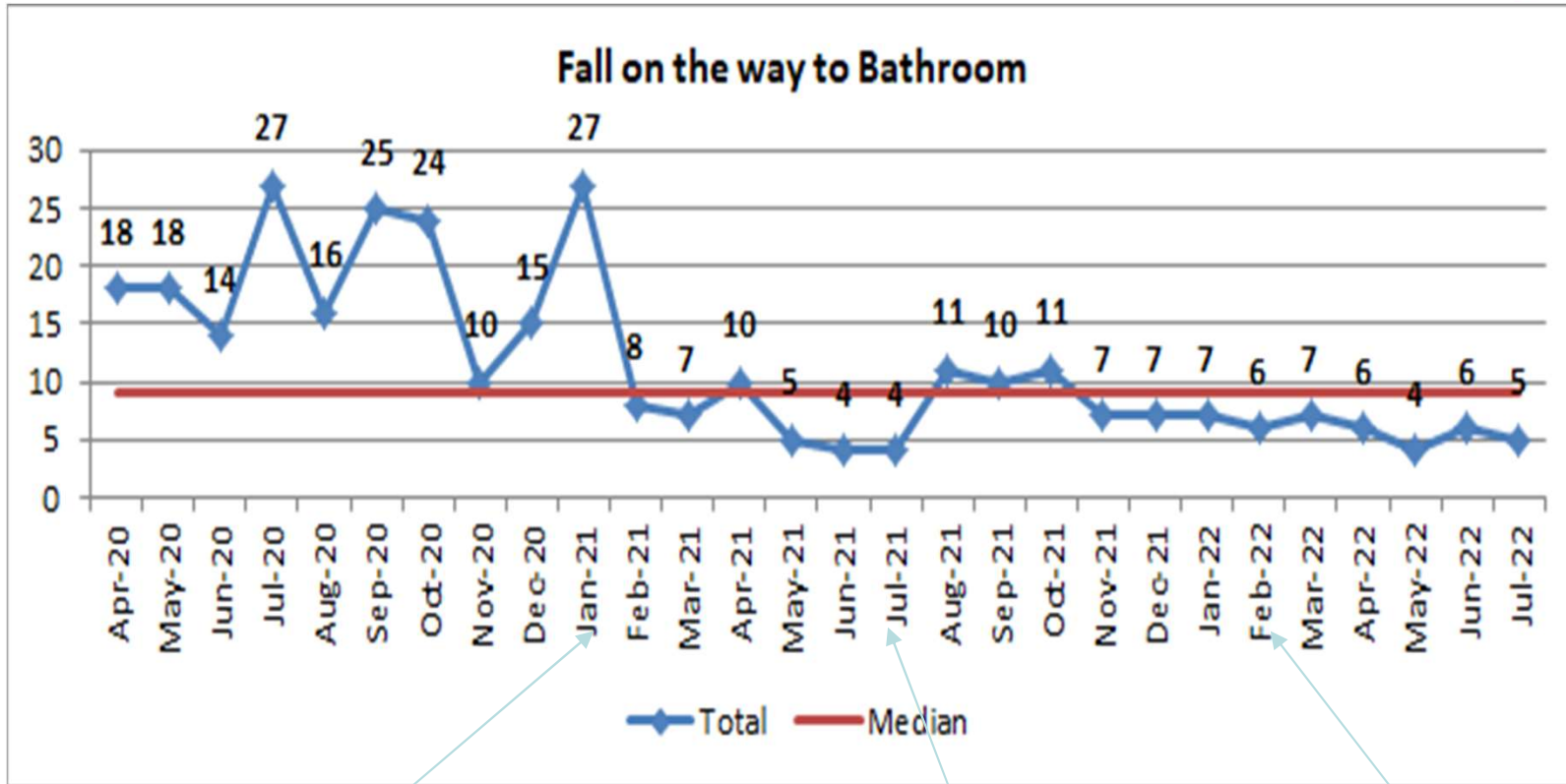


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Falls Reduction Since Implementing Decaf

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World Continence Week

Roll-out of Decaf across UHL as default option

1st Taste the Difference Challenge on Acute Medical Ward



Harmfreecare

One team shared values



Measuring Outcomes



Switching to Decaf Improves Bladder health

- 63% of patients report reduction in urinary urgency
- Positive feedback from wards
- Patients can't 'taste the decaf difference'
- Staff switching to decaf!
- 85 out of 90 wards serving decaf as default
- Withdrawal symptoms



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Managing Caffeine Withdrawal Symptoms

Withdrawal symptoms can include headaches, fatigue, low energy, irritability, anxiety, poor concentrations, depressed mood and tremors (Ogeil & Philips, 2015).

Withdrawal symptoms will depend on a person's normal levels of caffeine consumption.

3 Choices -

1. Stay stopped - fluids and analgesia as required
2. Switch back to drinking caffeinated tea/coffee
3. Gradual Caffeine Reduction Plan



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Taste the Difference Challenge in a Care Home *Caring at its best*

Data - Prevalence of Falls

Cost

Educating staff

Free resources

Educating Residents and their Families

Mental Capacity

Resident Feedback to Implement Change

Taste the Difference Champion

TASTE THE DIFFERENCE CHALLENGE!

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Summary – Why Switch to Decaf?

- Reduce falls
- Improve bladder health
- Lots of Health Benefits
- Quality of Life
- People can't taste the difference
- People want to switch because of the health benefits.
- Easy to implement
- **SAVE LIVES!!**



One team shared values



Thank you for Listening
Any Questions?



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