Choice and Preference Toileting Assistance (CAPTA)

- offered by the Scripps Gerontology Center
- in consultation with the Vanderbilt Center for Quality Aging
- funded by the Retirement Research Foundation.

Housekeeping Details...



Your project liaison: Annie Rahman, MSW, ABD, co-Principal Investigator, Scripps Gerontology Center, Miami University

Please mute your phones: * 6 (to unmute: # 6)

Teleconferencing Features

Problems with the technology?

Call InterCall help desk at 877-769-7228. Give the operator our conference ID number: 1523306238.

Chatting:

•At the blue bar, choose your recipient(s)

•Enter your message at the prompt.

•Click the Send bubble-



Today's Agenda

- An overview of this distance learning project
- An overview of incontinence management and prompted voiding
- Question and answer session
- Wrap-up and ready for next teleconference

Course Overview

Jan. 20, 2010, Meeting 1: Overview of incontinence management; assessing resident preferences. Attendance by nurse aides strongly recommended.

Feb. 10, 2010, Meeting 2: Prompted Voiding Procedure and Assessment Trial. *Attendance by nurse aides strongly recommended.*

Mar. 10, 2010, Meeting 3: Staffing for Incontinence Management; Peer Experiences.

Apr. 14, 2010, Meeting 4: The Survey Process and Incontinence Management

May 12, 2010, Meeting 5: Monitoring Incontinence Care. Attendance by quality improvement nurses strongly recommended.

July 14, 2010, Meeting 6: Follow-up Session Progress reports by participating facilities, with Q&A session.

--Field assignments and coaching calls between sessions.--



- **Two-Way Communication:**
- •Emails (<u>rahmanan@muohio.edu</u>)
- •Faxes (513.561.0919)
- •Phone calls and coaching calls (513.258.4421)

Teleconferences

•Online discussion group (<u>CAPTA@yahoogroups.com</u>)

•Web site: www.cas.muohio.edu/bridgeproject

Course Goals

- To assess 1) the toileting preferences of and 2) the responsiveness to prompted voiding of as many incontinent residents as you deem feasible
- To continue to offer prompted voiding to responsive residents
- To continuously monitor the prompted voiding program and strive to improve it

Contact Hours

- This continuing education activity is approved by the Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. It has been approved for 13 CE, good in all states.
 - CEs are prorated. To receive all CEs, you must:
 - Attend all the teleconferences (or be excused in advance)
 - Complete all the homework assignments, including the preand post-training quizzes and evaluation.

Introducing: Dr. John F. Schnelle, Ph.D.



Director, Center for Quality Aging, Vanderbilt University

Author

•CMS consultant

Recipient of numerous NIH grants to improve care in nursing homes
Developer of the prompted voiding protocol

Overview: Incontinence Management

 Urinary incontinence is one of the most treatable yet prevalent problems in nursing homes

Why is Incontinence Such a Problem in NHs?

- The staff often does not know the most effective way to assess or maintain residents on toileting programs.
- So many residents have the problem it is taken for granted.
- It is more time consuming to toilet residents than to change them.

Why is Time-Consuming Toileting Assistance Needed?

- Risk factors:
 - Dementia
 - Mobility

Staffing

- Projected staff needed to provide toileting and 2-hour incontinence care:
 - 5 residents to 1 aide

Staffing, cont.

- What do you do if there are not enough staff members?
 - Target: Two-day trial toileting
 - Assess resident preferences

Is Targeting Consistent with Regulations?

- Interpretative guidelines:
 - If the resident is not on restorative program, how was it determined that resident could not benefit from interventions such as scheduled toileting?
 - Is plan consistent with resident choice and preferences?

What Do You Do First?

 Implement prompted voiding for 2-3 days and document the resident's response and preferences.

What is Prompted Voiding?

- 1. Check for wetness every 2 hours.
- 2. Ask the resident if he/she is wet or dry.
- 3. Prompt 3 times to determine whether the resident wants toileting assistance.

Case Study

 Ms. Smith, 85, recently suffered a stroke. She was admitted to the long-stay floor of your nursing home from a post-acute care facility. She is rated on the MDS as requiring level 3 assistance for toileting, transferring, and ambulation. She has good recall and communication skills, according to the MDS. She is also rated on the MDS as incontinent of bowel and bladder most of the time. There is no other information about her incontinence, which was not a focus of rehabilitation efforts during her post-acute stay. One question that should be immediately addressed about her incontinence is what this person's preference for incontinence care may be.

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CAPTA: Resident Preferences and Motivation for Using the Toilet

Directions: Both before and immediately following the prompted voiding trial, ask the resident the following questions.
Interviewer: "I want to ask you some questions about help with using the toilet."
1. Does it bother you to wet in your brief? ____yes ___no ___ DK/NR/RE
2. Do staff help you to the toilet as much as you would like? ___yes ___no ___ DK/NR/REF
3. Do you want to be helped to the bathroom more often? ___yes ___no ___ DK/NR/REF
3. If no, ask: Do you want to be helped to the toilet less often? ___yes ___no ___ DK/NR/REF
4. Do you want to be changed more often? ___yes ___no ___ DK/NR/REF
4. If no, ask: Do you want to be changed less often? ___yes ___no ___ DK/NR/REF
Post-trial Only: 5. Do you like the amount of changing and toileting assistance you have received in the last 3 days?

Post-trial Only: 5. Do you like the amount of changing and toileting assistance you have received in the last 3 days? _____yes _____no ____ DK/NR/REF

Scoring: Answers in bold indicate a preference and motivation to use the toileting.

Interpretation: Use your professional knowledge and experience to interpret assessment results. Some guidelines: * The more bolded answers given, the higher the resident's motivation and preference to use the toilet.

Be aware that not all residents want to use the toilet.

* An increase in bolded answers to items 1-4 from pre- to post-trial suggests the resident became more motivated and exhibited a greater preference tor toileting assistance/prompted voiding. A decrease signals a drop in motivation and preference.

* A "yes" response to Item 5 indicates a preference for toileting assistance; a "no" response indicates the opposite.

Recap Quiz: Question 1

There is no need to ask residents about their toileting preferences because:

- a) It can be assumed that all residents prefer to use the toilet
- b) Survey guidelines do not emphasis resident choice in this area
- c) Residents cannot reliably answer questions about their toileting preferences
- d) None of the above; preferences *should* be assessed.

Recap Quiz: Question 2

In order to stay dry, incontinent residents need toileting assistance how often during a 12-hour period:

- a. 1-2 times
- b. 3-4 times
- c. 5-6 times
- d. 7-8 times

Recap Quiz: Question 3

On average, how often is toileting assistance usually offered during the daytime to incontinent nursing home residents?:

- a) Less than once during the day
- b) 1-2 times
- c) 3-4 times
- d) 5-6 times

Homework

- Interview incontinent residents using the Preference Assessment form. <u>Recommended goal: 10</u> <u>residents</u>
- If you haven't done so already, complete the pretraining quiz (available on our Web site, www.cas.muohio.edu/bridgeproject)
- Reading assignments: <u>Introduction</u> and <u>Step 1</u> (from the training manual available on our Web site)

Follow-up and Next Teleconference

Between-Session Phone Call

• To answer your questions, check on progress, offer assistance, obtain feedback

Next Teleconference

• Wednesday, Feb. 10, 2:00-2:40 p.m. (Eastern time)