

## MDS Alert

### Reader Question: 'Continence' Defined by Intention, Not Location

**Question:** We have a resident who is fairly immobile and used to use a handheld urinal when he needed to void his bladder. He used the urinal independently (though needed assistance dumping it). Because of a recent arm injury, he can no longer hold the urinal himself, but he refuses to enlist help from staff. He is instead voiding in briefs and then paging staff to help him change. Is he continent or incontinent?

Codify Subscriber

**Answer:** The Resident Assessment Instrument (RAI) Manual defines continence and incontinence on the basis of intention - if the resident voids voluntarily, the resident is continent.

On page H-8, the RAI Manual says, defines urinary incontinence as "the involuntary loss of urine" and defines continence as "any void that occurs voluntarily, or as the result of prompted toileting, assisted toileting, or scheduled toileting."

Though your resident is voluntarily voiding in what staff believe to be inappropriate (or at least exasperating) location, which requires more staff assistance, you may need to care plan accordingly - with the interdisciplinary team (IDT) crafting a care plan as though the resident were incontinent.

The RAI Manual suggests the following, which can be found on page H-8:

"For many residents, incontinence can be resolved or minimized by

- - identifying and treating underlying potentially reversible causes, including medication side effects, urinary tract infection, constipation and fecal impaction, and immobility (especially among those with the new or recent onset of incontinence);
- - eliminating environmental physical barriers to accessing commodes, bedpans, and urinals; and
- - bladder retraining, prompted voiding, or scheduled toileting.

"For residents whose incontinence does not have a reversible cause and who do not respond to retraining, prompted voiding, or scheduled toileting, the interdisciplinary team should establish a plan to maintain skin dryness and minimize exposure to urine."

Help keep the resident dry while his arm heals - which will go a long way in preventing further problems - and adjust his care plans. But code the resident as "continent."