

MDS Alert

Take Another Look: Save Time And Money With Prompted Voiding

These tips could save your team hours in changing residents' wet garments, and make residents much more comfortable.

Incontinence is a time-intensive and expensive issue, and especially difficult for staff. Consider a prompted voiding program to help streamline care efforts and make residents more comfortable. Your staff could save hours by following a prompted voiding program, reminding, and conditioning residents to use the restroom before a wet episode occurs. Plus, prompted voiding is the most cost-effective means of dealing with urinary incontinence in LTC facilities, according to decades of research.

Hint: Make the program work for your staff and facility. "In light of person-centered individualized care, the toileting program can be set up for daytime only. Waking resident from sleep (especially those with dementia) has not been shown to be effective. The value of a highly absorbent incontinence brief is very critical for this as well so that skin integrity is maintained," says **Jane Belt, Ms, Rn, RaC-Mt, QCP**, curriculum development specialist at **american association of nurse assessment Coordination (aanaC)** in Denver, Colorado.

The Vanderbilt University Center on Quality Aging offers these tips on establishing a three-day prompted voiding trial in your facility:

Set a timeframe and schedule, and stick with it. Vanderbilt University recommends prompting residents to void every two hours between 8 a.m. and 4 p.m., but adjust this schedule to fit your facility's realities. Two-hour reminders and check-ins are frequent enough to help residents make it to the toilet and prevent wet episodes, but shouldn't overwhelm your staff or annoy residents.

- Tell residents your plan. Explain to each resident that your team is going to be checking in and offering reminders to toilet. Ask each resident if she is interested in taking part in this program, lay out the "rules," and seek her agreement and permission.
- Choose a specific place to record results of each check-in during the program.

During the prompted voiding trial program, follow these Vanderbilt University recommendations:

- Get residents' focus in line with staff goals by starting each check-in asking the resident if she is wet or dry.
- Ask the resident if she minds if you double-check to see if she's wet or dry, and if your check aligns with her answer, affirm it: "You're right, Mrs. Black, you are dry."
- Regardless of whether the resident is wet or dry, ask whether she wants to use the toilet (or urinal), and provide any necessary assistance.
- Record the results whether resident was wet or dry, if she chose to use the toilet, if her void produces measurable results.
- If the resident hasn't voided in the past four hours and doesn't want to use the toilet, offer again.
- Remind the resident that you or another team member will be back in two hours to check in again, and ask her to try to delay voiding in the meantime.
- Think of these check-ins as valuable extra time to spend with residents; residents may be more on board with the program if they feel validated by an extra couple minutes of conversation with staff every couple of hours.

Tip: Although increasing residents' fluid intake sounds counterintuitive, this step could really help make your trial a success. "We often think about a resident's fluid intake having a negative impact on continence, but we need to remember that encouraging residents to drink sufficient fluids can have a positive impact on the success of such a

program □ so they will feel the need to empty their bladder. So, remember to include resident education in your plan, as cooperation of the resident is needed," says **Linda Elizaitis**, president of **CMSCompliance Group Inc.** in Melville, New York.

Evaluate the Results

"Divide the total number of successful toilets by the total number of toilets plus the number of incontinent voids. Multiply the quotient by 100 to convert it to a percentage," says the Vanderbilt University Center for Quality Aging training module on incontinence management. Consider residents with 66 percent success rate or higher in avoiding wet episodes during the program "responsive," and add continued prompted voiding into their care plans.

Residents who score less than 65 percent but are interested in using the toilet when prompted may need a longer trial □ they are, at least, motivated to stay dry, and motivated to work with staff to make that a reality.

A three-day prompted voiding program is best to establish a proper voiding habit, get residents fully on board with goals, and produce the most data, but a two-day program could be viable as well. "Staffing is a major issue working against being able to toilet patients/residents on schedule (if there is one)," says **Margaret Genendlis, Ms ed**, education coordinator at **Vanderbilt University Medical Center's Center for Quality Aging** in Nashville, Tennessee. Though the voiding program trial is time-intensive, it ultimately saves staff time and effort.

Remember: A prompted voiding program qualifies as a trial of a toileting program, so you would need to code H0200 (Urinary Toileting Program) accordingly.

For more information, visit here: [https://prd-medweb-cdn.s3.amazonaws.com/documents/cqa/files/Incontinence Management/Vanderbilt Incontinence Management Module.pdf](https://prd-medweb-cdn.s3.amazonaws.com/documents/cqa/files/Incontinence%20Management/Vanderbilt%20Incontinence%20Management%20Module.pdf).