Continence Policy

Revised March 2013
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Care Home Name: Wellbeing Residential Group

Policy Statement
Wellbeing Residential Group recognises that incontinence—loss of bladder or bowel control—can be a difficult and embarrassing problem for those who suffer from it, and believe in a positive policy of continence promotion. The home believes that incontinence is not a normal or inevitable part of ageing, although it may happen to more people as they grow older, and that, with good advice and support, sufferers may be able to learn to manage their continence or be treated to reduce the effects of incontinence. Wellbeing Residential therefore aims to promote and maintain the continence of its service users for as long as possible, and believes that the management of incontinence should be based on high quality individualised care aimed at meeting the service user’s individual needs, maintaining their dignity and independence as far as is possible at all times.

Aim of the Policy
This policy is intended to set out the values, principles and policies underpinning this home’s approach to continence and incontinence.

Continence Policy
Wellbeing Residential Group believes in providing high quality continence promotion care based upon individual service users’ needs, as recorded in an individual Service User Care Plan for each service user. Each plan should be determined by a full needs assessment, drawn up in full partnership between the home and the service user, and should include an assessment of continence needs. The home believes that it is important that home care staff can identify developing continence problems in service users early so that they can be helped to get prompt and fair access to medical or other healthcare resources. Incontinence has many causes and many types can be treated or cured, no matter how old the person is, especially if diagnosed at an early stage.

Therefore, in this home:

- Where continence problems are identified, the service user should be fully assessed to establish the cause of the problem, and a plan of care should be agreed and entered in the Service User Plan. This should be conducted by someone qualified to perform such an assessment and should include specialist medical and nursing input wherever relevant. The plan of care should include help needed from care staff (eg help to get to the toilet) and the use of any incontinence aids.

- Where necessary, the plan of care should include referral to the local specialist continence advisory service. Referrals are made via the GP or District Nursing team.

- Initial or ongoing treatment options which should be available to service users and supported by home staff include:
  
  - general advice about healthy living, in particular diet and drinking appropriate fluids
  - improving access to toilet facilities and wearing easily removable clothing
  - reviewing existing medication
- bladder and bowel training programmes
- pelvic floor exercises
- Provision of pads, continence aids and other supplies to help manage incontinence.

- Service users who suffer from incontinence should be assisted by care staff to:
  - maintain dignity
  - maintain personal hygiene
  - use appropriate incontinence aids effectively.

- Service users should be regularly assisted to the toilet if it is indicated in their plan of care, either on demand or at frequent intervals.

- The home does not support a policy where all service users are routinely subjected to a rigid regime of toileting. All service users should be treated as individuals with help and assistance provided on the basis of assessed need.

- During the night, service users should be helped to use bedside commodes or urine bottles, if it is indicated in their plan of care, and all service users should be encouraged to call for assistance as required.

- All precautions should be taken to avoid accidents and spillage of urine, etc.

- Spillage and accidents should be cleaned up immediately using the materials and protective clothing available for this purpose.

- In bedrooms, where there is likelihood of spills on the carpet, steps should be taken to protect the carpet thus avoiding unpleasant odours building up.

Those with urinary incontinence may become dehydrated therefore it is important that staff encourage them to drink adequate amounts of fluids.

At all times, all home staff should be aware that incontinence can be a source of considerable embarrassment for many service users. Staff must therefore treat all service users with dignity, privacy and understanding at all times.

**Training**

All new staff should be encouraged to read the policy on continence as part of their induction process. Care staff must be aware of the incontinence aids available, their correct use, capacity, and when they need to be changed.

Signed:  

Date:  

Policy review date: