

MFEI Level of Care Tool

Module 8 - Continenence



Module 8: Continence

Covered in this module:

- Bladder continence
- Bowel continence
- Bladder manageability
- Bowel manageability



18. Bladder Contenance & 19. Bowel Contenance: Intent

- To determine and record the person's pattern of bladder and bowel continence **over the last 3 days, 24 hours per day, including weekends,** and how the person's bladder and bowel are being managed

18. Bladder Continence & 19. Bowel Continence: Definition

- The term “continence” refers to **control of the person’s bladder output or their bowel movements**, including any scheduled toileting plans, continence training programs or appliances
- It does **not** refer to the person’s ability to toilet themselves—for example, **a person may require extensive assistance in toileting and still be continent**
- Incontinence includes any level of dribbling, or wetting from urine, or discharge of stool

Dry and clean = Continent

18. Bladder Continence & 19. Bowel Continence: Process

- Review the person's bladder and bowel patterns with them in private, with validation as needed, and, with sensitivity, from an involved caregiver
- Remember that some people will be hesitant to discuss this issue due to embarrassment or fear, or dismiss it because they believe that incontinence is a natural part of aging or of their condition
- Many are relieved when a professional shows enough concern to ask about the problem in a sensitive, straightforward manner

18. Bladder Continence: Example Questions

- Do you have an ostomy or catheter?
- Do you ever have times when you don't make it to the toilet in time?
- When was the last time you didn't make it to the toilet before soiling yourself?

18. Bladder Continence: Coding

- Continent** - Complete control, does not use any type of catheter or urinary collection device
- Managed** with any catheter or ostomy over the last 3 days
- Infrequently incontinent** – Not incontinent over the last 3 days but does have incontinent episodes
- Occasionally incontinent** – Less than daily
- Frequently incontinent** – Daily, but some control present
- Incontinent** – No control present
- Did not occur** – No urine output from the bladder in the last 3 days (note, make a referral to a medical professional if the lack of urine output is not already being addressed)

18. Bladder Contenance: Coding Notes

- Code for the **actual bladder continence pattern with urinary device if used**; this pattern is the frequency with which the person is wet during the 3-day assessment period
- If you are unsure whether to use code “Frequently incontinent” or code “Incontinent,” decide based on the **presence of any bladder control (“Frequently incontinent”)** or **absence of any bladder control (“Incontinent”)**

18. Bladder Continence: Coding Examples

| Bladder Continence | |
|---|--|
| Continent (Complete control; DOES NOT USE any type of catheter or other urinary collection device) | Mr. C was taken to the toilet after every meal, before bed, and once during the night. He does not have incontinent episodes. |
| Managed with any catheter or ostomy | Mr. C had a catheter in place during the entire 3 day lookback period. He was never found soiled. |
| Infrequently incontinent (Not incontinent over last 3 days, but does have incontinent episodes) | Although he is generally continent, every once in a while Mr. C doesn't make it to the bathroom in time, resulting in wet undergarments (the most recent incident was 5 days ago). |

18. Bladder Continence: Coding Examples

| Bladder Continence | |
|---|---|
| Occasionally incontinent (less than daily) | Mr. C has an occasional episode of bladder incontinence (less than daily). He has been incontinent once during the last 3 days. |
| Frequently incontinent (Daily, but some control present) | Mr. C wears briefs daily. He was able to get to the toilet once during the last 3 days before wetting himself, however he has an incontinent episode at least once every day. |
| Incontinent (no control present) | Mr. C is very frail, has severe muscle contractures and advanced Alzheimer's disease. He is not able to use the toilet independently and does not ask anyone for assistance. He wears briefs all of the time and has not been taken to the toilet during the last 3 days. |
| Did not occur | In the last 3 days Mr. C has had no urinary output at all. |

19. Bowel Continence: Example Questions

- Do you have an ostomy or any type of collection device?
- Do you ever have times when you don't make it to the toilet in time and have an accident?
- When was the last time you didn't make it to the toilet on time?

19. Bowel Continence: Coding

- Continent:** Complete control; DOES NOT USE any ostomy device
- Control with ostomy:** Control with ostomy device over last 3 days
- Infrequently incontinent:** Not incontinent over the last 3 days
- Occasionally incontinent:** Less than daily incontinent episodes (1-2 of the past 3 days)
- Frequently incontinent:** Daily, but some control
- Incontinent:** No control present
- Did not occur:** NO bowel movement in past 3 days

19. Bowel Continence: Coding Notes

- Code for the **actual bowel continence pattern**; this pattern is the frequency with which the person is soiled during the 3-day assessment period
- The assessment for bowel continence should be completed concurrently with the bladder continence item, to raise these sensitive items at the same time

19. Bowel Continence: Coding Examples

Bowel Continence

Continent (Complete control; DOES NOT USE any type of catheter or other urinary collection device)

Mr. C was taken to the toilet after every meal, before bed, and once during the night. He does not have incontinent episodes.

Managed with any ostomy

Mr. C had a colostomy in place during the entire 3 day lookback period. He was never found soiled.

Infrequently incontinent (Not incontinent over last 3 days, but does have incontinent episodes)

Although he is generally continent, every once in a while Mr. C doesn't make it to the bathroom in time, resulting in soiled undergarments (the most recent incident was 5 days ago).

Occasionally incontinent (less than daily)

Mr. C has occasional episodes of bowel incontinence (less than daily). He has been incontinent once in the last 3 days.

19. Bowel Continence: Coding Examples

| Bowel Continence | |
|---|--|
| Frequently incontinent (Daily, but some control present) | Mr. C wears briefs daily. He is occasionally able to get to the toilet before soiling himself, however he has an incontinent episode at least once every day. |
| Incontinent (no control present) | Mr. C is very frail, has severe muscle contractures and advanced Alzheimer's disease. He is not able to use the toilet independently and is not able to indicate a need for assistance. He wears briefs all of the time and has not been taken to the toilet during the last 3 days. |
| Did not occur | In the last 3 days Mr. C has not had a bowel movement at all. |

20. Bladder Manageability & 21. Bowel Manageability: Definition

- These items refer to whether the person's bladder/bowel continence is being managed at a level that is acceptable to the person in their current setting and with their current supports
- Code these items based on how well the person being assessed believes their bladder/bowel continence is being managed
- If they are unable to respond, then consider the caregiver's response

20. Bladder Manageability & 21. Bowel Manageability: Example Questions

- Are you happy with how your bladder/bowel continence is managed?
- If you could change something about how your bladder/bowel continence is managed, what would it be?
- Do you have enough support to manage your bowel/bladder continence?
- Are you satisfied with your ability to clean up after an episode of incontinence?

20. Bladder Manageability: Coding

Is the person's bladder continence being managed at an acceptable level in the current setting?

Yes (well managed)

No (not well managed)

Yes (well managed)

Ms. Y does not have incontinence; or Ms. Y shares that she experiences incontinence, but is able to remain clean and hygienic.

No (not well managed)

Ms. Y shares that she has incontinence and that she is having a difficult time cleaning herself thoroughly after an incontinent episode.

21. Bowel Manageability: Coding

Is the person's bowel continence being managed at an acceptable level in the current setting?

Yes (well managed)

No (not well managed)

Yes (well managed)

Mr. W does not have bowel incontinence. Or, Mr. W has bowel continence, but is satisfied that it is well managed by his care team.

No (not well managed)

Mr. W. has stopped going to church because he has bowel incontinence and is concerned about his body odor. He would like more assistance with how to manage this condition because he does not feel confident that he is clean.

Practice Scenarios

Contenance Practice Scenario A:

Bladder Contenance

Mrs. B has spinal stenosis, resulting in increasing difficulty in ambulating due to pain. She uses no urinary appliances. She says that she is continent with rare episodes of leakage. However, her daughter notes that beginning about a month ago, she has frequently had to remind Mrs. B to get up to use the toilet. The daughter also advises that she finds her mother's underwear wet at least once daily.

Based on this information, how would you code item 18. *Bladder Contenance* for Mrs. B?

Continence Practice Scenario A:

Bladder Continence - Answer

Mrs. B has spinal stenosis, resulting in increasing difficulty in ambulating due to pain. She uses no urinary appliances. She says that she is continent with rare episodes of leakage. However, her daughter notes that beginning about a month ago, she has frequently had to remind Mrs. B to get up to use the toilet. The daughter also advises that she finds her mother's underwear wet at least once daily.

18. Frequently incontinent: Daily, but some control present

Continence Practice Scenario B:

Bowel Continence

Ms. K had surgery for a colostomy five years ago. She manages her appliances on her own and says that she is typically continent. However, she admits that swelling in her hands due to rheumatoid arthritis sometimes makes it difficult to manipulate and empty the colostomy pouch, and she experiences occasional leakage. This last happened three weeks ago.

Based on this information, how would you code item 19. *Bowel Continence* for Ms. K?

Continence Practice Scenario B: Bowel Continence - Answer

Ms. K had surgery for a colostomy five years ago. She manages her appliances on her own and says that she is **typically continent**. However, she admits that swelling in her hands due to rheumatoid arthritis sometimes makes it difficult to manipulate and empty the colostomy pouch, and she experiences **occasional leakage**. **This last happened three weeks ago.**

19. Infrequently incontinent – not incontinent over last 3 days

Contenance Practice Scenario C: Bladder Manageability

Mr. S wears a condom catheter all of the time to collect his urine. He and his caregiver advise that he is consistently dry, although he did have leakage and resulting skin problems six months ago. They changed to a different type of catheter and now he is clean and dry, and says that he is happy with the situation.

Based on this information, how would you code item 20. *Bladder Manageability* for Mr. S?

Contenance Practice Scenario C: Bladder Manageability - Answer

Mr. S wears a condom catheter all of the time to collect his urine. He and his caregiver advise that he is consistently dry, although he did have leakage and resulting skin problems six months ago. They changed to a different type of catheter and now he is clean and dry, and happy with the situation.

20. Yes (well managed)

Continence Practice Scenario D:

Bowel Manageability

Mr. A has quadriplegia due to a spinal cord injury, and says that he adheres to a strict bowel emptying program. He states that he is typically continent. However, he acknowledges having had incontinence episodes two days ago and several times over the last three weeks. He expresses concern about these episodes disrupting his employment, and he wonders if he should consult his physician about modifying his bowel program.

Based on this information, how would you code item 21. *Bowel Manageability* for Mr. A?

Continence Practice Scenario D: Bowel Manageability - Answer

Mr. A is quadriplegic due to a spinal cord injury, and says that he adheres to a strict bowel emptying program, and is typically continent. However, he acknowledges having had incontinence episodes two days ago and several times over the last three weeks. He is concerned about these episodes disrupting his employment, and he wonders if he should consult his physician about modifying his bowel program.

21. No (not well managed)