

P003

BOWEL CARE

Bowel Care

Bowel Care Management Plan

A bowel care management plan should be developed with the Customer/Client involved with the development of the plan. Concerns about a Customers/Clients bowel care management should be raised with discussed with the recipient and the Clinical Nurse Consultant/RN.

With the Customers/Clients consent regular and timely reviews by a qualified health practitioner will be conducted.

The method of bowel care can vary greatly. It may include:

- Oral aperients
- Suppositories
- Enemas
- Colostomy or other Osteotomies.

Consent

Bowel care is extremely personal in nature so all steps to maintain the Customer/Client dignity must be preserved. At all times you must inform and obtain consent for bowel care.

Hand Hygiene/PPE

When performing Bowel Care there is a strong likelihood of contact with body fluids, thorough and effective hand hygiene and disposable gloves must be used. Following the procedure thorough hand washing must be undertaken and proper disposal of contaminated items.

Risks/Injury

Any complex Bowel Care carries a degree of risk, bleeding, bowel perforation, Overflow, Impaction, diarrhea and infection. Where there are any signs or change of bowel habits these must be reported to the Clinical Nurse Consultant/Registered Nurse as soon as possible.

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As a part of any support delivered by Lifestyle Attendants/Support Workers (Care Workers), Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service will:

- Assess the initial needs with the Customer/Client
- Determine the areas of bowel care that the Care Worker may attend
- Develop an action plan with identified outcomes, the action plan is to include the required actions on any incident or emergency that may occur including issues outside of the scope of practice as demonstrated and assessed during training. If there is any form of bleeding, injury and or pain, the appropriate action as detailed in the plan is carried out then is immediately reported to the RN or Doctor.
- Provide written procedures on the provision of bowel care by the Care Worker - this may be included as part of the plan.
- Policies and procedures for bowel care should be clearly documented in the care plan and only changed by a Doctor or a Registered Nurse
- Identify education needs for Care Workers - Provide relevant competency-based training and assessment processes for the support worker/s to ensure they are competent to perform the prescribed duties, tasks and interventions.
- Monitor, review, evaluate and adapt as required the service, plans and outcomes with the involvement of the participant

Please note, this is provided the customer allow a written care plan to be produced.

Care Workers may:

- Perform any task on the plan or as directed by their customer apart from those that must be performed by a Registered Nurse.

Care Worker Must:

Must report any bleeding, severe constipation, change in bowel habit to service provider and in case of any emergency call 000

Procedures

Administering Oral Aperients/Laxatives

Oral aperients are frequently an over the counter medication but also supplied by prescription. These will be documented in the bowel care management plan and instructions for use must be followed. Over use of oral aperients or laxatives may cause overflow or diarrhoea.

Suppositories

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Suppositories are inserted into the rectum to stimulate or provide lubrication. It is advisable for the Customer/Client to lay on their side during the process. Using gloves ensure the rectum and suppository are lubricated. Insert the suppository using the pointed end with gentle pressure of your finger. Insert the suppository only until it is passed the sphincter to avoid bowel perforation. The customer/client should try and avoid using the toilet for as long as possible.

Enemas

An Enema is used to stimulate the bowel to facilitate a bowel action. With the Customer/Client preferably laying on their side, remove the plastic tip of the enema, and using gloves lubricate the rectum and the tip of the enema and insert at 90 degrees into the rectum. Insert the enema up to the line clearly marked on the enema gently squeeze the enema to insert the contents into the bowel, keep squeezing the enema as you withdraw it from the rectum to avoid drawing back the contents into the enema. Do not insert the enema beyond the line as this may cause the bowel to be perforated.

Stoma/ Colostomy Care:

A '**colostomy**' is a stoma formed by bringing part of your colon (large bowel) out on to the surface of your abdomen

- The stoma will be moist and pinkish red in colour and will protrude slightly from your abdomen
- Use PPE at all times
- Use plain warm water and dry wipe to gently clean around the stoma. Make sure you don't rub.
- Dry the skin thoroughly with a dry wipe. Pat gently, taking care not to rub.
- Place used wipes in the disposal bag with the used pouch.
- Wash your hands
- Put on new colostomy bag and make sure it is sealed properly to prevent any leak.
- Colostomy bags are single use only

Care Workers must:








- Complete competency training and assessment in the task by the service provider
- Follow the plan as provided by the customer and/or EL/LAAS
- Report to their supervisor any changes or variations for advice
- Not change any plan
- Report any issues arising from the delivery of bowel care (such as: bowels not open, bleeding, constipation, diarrhea) to the service provider for further advice
- Identify and report to their supervisor any gaps in their ability to deliver the required service

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Bristol Stool Chart

Bristol Stool Chart

Type 1		Separate hard lumps, like nuts (hard to pass)
Type 2		Sausage-shaped but lumpy
Type 3		Like a sausage but with cracks on its surface
Type 4		Like a sausage or snake, smooth and soft
Type 5		Soft blobs with clear-cut edges (passed easily)
Type 6		Fluffy pieces with ragged edges, a mushy stool
Type 7		Watery, no solid pieces. Entirely Liquid