

Pol_001	Complex Bowel Care
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Bowel care is a routine part of personal support. It requires a specialist level of support where the participant is at risk of severe constipation or faecal incontinence.

Life Choice is committed to providing a high standard of care and excellence in support and service. Life Choice has developed the Complex Bowel Care policy, which is consistent with legislative requirements for a high intensity support activity, ensuring a safe, efficient and effective management service to our participants.

Record of policy development

Version	Date approved	Date for review
2020/3	February 2023	February 2025

Responsibilities and delegations

This policy applies to	All staff/support workers who work with our participants
Policy approval	Quality & Risk Committee

Policy context – this policy relates to:

Standards	NDIS Practice Standards and Quality Indicators NDIS (provider registration and practice standards) Rules 2018 NDIS (quality indicators) guidelines 2018
Legislation	National Disability Insurance Scheme Act
References	Continence foundation of Australia Premium Health – Bowel Management Workbook
Organisation policies	Medication Management Management of waste Incident Management Procedures
Forms, record keeping, other documents	Bowel Management Support Plan Bowel Management Guide Bowel Assessment and Tracking form Participant Support Plan Staff Training Plan – Complex Bowel Care Bowel habit diary

Scope:

This policy applies to any participant who is at risk of severe constipation or faecal incontinence and requires a support plan to manage this risk. This may apply, for example: participants with conditions causing muscle or nerve damage such as spinal injury; Cerebral palsy; some types of acquired brain injury; some neurological conditions; stroke; autism; and where the support plan involves non-routine treatment such as use of non routine PRN treatments.

Definitions:

Constipation: a condition of the digestive system characterised by hard faeces that are difficult to pass.

Diarrhoea: frequent and liquid bowel movements.

Faecal Incontinence: the inability to control bowel movements causing faeces to leak from the rectum. It can be a small or complete loss of bowel control.

Principles:

- Follow personal hygiene and infection control procedures
- Maintain dignity, respect and obtain consent from participant throughout all activities in complex care management
- Observe and record changes in bowel habits and report issues arising from the delivery of bowel care
- Administer laxatives, enemas or suppositories including non-routine medication as required according to procedure
- Identify when to seek health practitioner advice

Support Plan:

Each participant is involved in the assessment and development of a plan for their complex bowel care management. With their consent, the participant's health status is subject to regular and timely review by an appropriately qualified health practitioner. The plan identifies how risks, incidents and emergencies will be managed, including required actions and escalation to ensure participant wellbeing. The plan is communicated, where appropriate, and with the participant's consent, to their support network, other providers and relevant government agencies.

Included in the plan is:

- Information on normal stool appearance for the individual participant;
- How to identify symptoms that require action;
- The timing of interventions (how long before action is taken) and the action required;
- Detailed instructions on medication selection and administration procedures;
- Emergency management options and procedures.

Roles and Responsibilities:

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Life Choice will ensure that staff/support workers have the relevant knowledge and have received specific training in order to safely support the participants in the community.

Life Choice staff/support workers are required to:

- always obtain consent prior to complex bowel care and the administration of medications according to the participant's Complex Bowel Care Plan.
- monitor and record changes in bowel habits (at least daily, via the bowel habit diary)
- follow documented administration of laxatives, enemas or suppositories according to procedure
- follow documented administration of non-routine medication as required
- follow emergency management procedures
- record any changes requested by a health practitioner (e.g. Medical Doctor, Registered Nurse)
- document and communicate to their supervisor, the health practitioner (E.g Registered Nurse, GP) and participant/carer/advocate when there is a request for a change in bowel care.

Note: Any changes to a Complex Bowel Care Plan regarding medication management will be conducted by health practitioners (e.g. Medical doctor, Registered Nurse)

PROCESS

Whilst bowel care is a routine part of a support workers role when providing personal care to the participant, it requires a different level of support when the participant has been assessed as 'at risk' of faecal incontinence or severe constipation. Examples in the community are participants who require non-routine treatment such as PRN medications for their bowel care, some Acquired Brain Injury (ABI) participants and participants with spinal injuries.

Each participant's bowel program should be individualised to manage their specific requirements for bowel emptying e.g. digital ano-rectal stimulation, abdominal massage and rectal irrigation.

The main goals in bowel management include:

- Self-management of regular and predictable bowel emptying at a socially acceptable time and place
- Using a minimum of physical and pharmacological interventions to achieve complete bowel emptying within an acceptable timeframe
- The prevention of bowel accidents, constipation, autonomic dysreflexia and other complications

PROCEDURE

In the event that a participant requires complex bowel management, they must undergo an assessment with an appropriately qualified health practitioner. The health practitioner must develop a bowel management plan, in consultation with the participant, that can be utilised by Life Choice staff to guide support.

The bowel management plan must also include an Action Plan to address any incident or emergency in relation to the bowel e.g. constipation, dysreflexia, rectal bleeding, perforation and when to refer to a health practitioner e.g. infection, impaction, overflow and changes in bowel habits. The Action Plan must also identify a clear path for the escalation of any incident or emergency in a timely manner. This bowel management plan will continue to be overseen by a health professional. The regularity of plan reviews is at the discretion of the health professional and will be supported by Life Choice. Any changes in the participant's needs, including any incidents or emergencies, will require a plan review

STAFF TRAINING

All staff working with a participant requiring complex bowel care will receive mandatory training in relation to staff obligations under the NDIS Practice Standards and NDIS rules. The training will be specific to each participant's needs, type of complex bowel care and high intensity support skills descriptor for providing complex bowel care. This training will be delivered by an appropriately qualified health practitioner or person that meets the high intensity support skills descriptor for complex bowel care. Records are kept of all staff who are trained, the training provided, proof of competency and the type of training provided.

Appropriate policy and procedures are in place, including a training plan for staff, that relates to the support provided to each participant receiving complex bowel care.

A worker's competency to provide complex bowel care supports is reviewed annually to confirm the worker has the current skills and knowledge described in this skills descriptor. Where a worker has not delivered this support for a period of more than three months, or if a participant's support needs have changed and/or they have an updated support plan in place, the worker should be reassessed before supporting the participant and undertake refresher training if required; this timeframe may vary depending on the nature of supports required and worker experience.

Training and management support plans will detail (but are not limited to- see NDIS Practice Standards: High Intensity Support Skill Descriptors Nov 2022 for details):

- how to manage a related incident, including the development of an emergency management plan covering emergencies such as constipation, rectal bleeding, perforation, infections or autonomic dysreflexia
- basic anatomy of the digestive system;
- the importance of regular bowel care and understanding of stool characteristics indicating healthy bowel functioning with related signs and symptoms;

- identifying participants who may be at increased risk of severe constipation or faecal incontinence due to associated health conditions
- Understanding of intervention options and techniques
- Administering enemas and suppositories, digital stimulation, massage
- Nutrition and hydration requirements;
- Alteration in bowel habits that can result from decreased mobility, altered nutrition, medications and decreased fluid intake.

All incidents will be recorded and reported as per Incident Management policy.

Life Choice also has policies and procedures in place which identify, plan, facilitate, record and evaluate the effectiveness of training for their frontline staff to ensure that maximum participant safety and wellbeing is provided at all times.

Life Choice will ensure that their Staff have knowledge of and are trained in infection control procedures are per the Management of Waste policy, including how to correctly conduct complex bowel care using related equipment including the safe disposal of waste as per the Management of Waste policy and to monitor, chart and record participant's bowel habits and care.

Equipment in the home

This may include:

- Disposable gloves (powder free)
- Disposable apron
- Lubricant (water based)
- Incontinence pad or kylie
- Commode
- Bag for waste.
- Medications

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