Introduction

The Saint Luke's Rehabilitation Institute (SLRI) opened in September 2019 with the goal of providing specialized rehabilitation services locally for those in the greater Kansas City and Missouri area. Within months of inception, SLRI identified a need for comprehensive Spinal Cord Injury/Disease SCI/D program development and created a specialized SCI team, beginning with the hire of a fellowship trained SCI/D physician. Therapy and nursing staff with an interest in caring for patients with SCI were provided system funded educational opportunities, followed by the development of SLRI SCI Care committee (SCIC) which addresses inconsistencies with NBD programming. SCIC, comprised of nurses, therapists, care coordinators and specialty physician, identified barriers in Neurogenic Bowel Disorder (NBD) management: staff apprehension, foundational knowledge gaps, interdisciplinary communication breakdown, and process flaws.

Background

NBD describes bowel dysfunction following injury to the spinal cord and affects greater than fifty percent of patients with SCI/D. Patients with SCI/D may experience bowel disruptions, such as constipation, fecal incontinence, hemorrhoids, or skin breakdown. Research indicates adjustment to NBD as a leading contributor to post-injury depression and reduced quality of life. In addition to psychological detriment, NBD presents risks for life threatening autonomic dysreflexia and other secondary conditions.

Purpose

- Ensure early activation of bowel program
- Bridge knowledge and communication gaps across disciplines and providers
- Increase continuity of care throughout admission
- Enhance patient comfortability, understanding, and ownership over their bowel program before discharge

Bowel Program info for nursing Bowel program at 9AM. Doff pants while in bed or chair using PWC tilt feature. Hover over to tilt in space shower chair/commode combo. While hovered, administer enemeez and provide dig stim x1 minute using gloved/lubricated finger. Lower to toilet and remain close by throughout as Pt has reduced core stability. Wait x10 minutes, then lift and hover again to check for full evacuation and provide peri care. Complete dig stim up to 3x. taken today

On a scale of 1 to 5 please rate your knowledge of bowel care programs now? In a scale of 1 to 5 please rate your knowledge of bowel care programs 1 year ago. 🔅 Insights ore Details More Details

2.50 Average Rating





ACADEMY OF SPINAL CORD INJURY PROFESSIONALS

Number 2 is Always Number 1: A Multidisciplinary Approach to Neurogenic Bowel Management

Mary Chipley, OTR/L Saint Luke's Rehabilitation Institute

Program Development

Electronic Medical Record Optimization:

Bowel Program Information for Nursing - Occupational Therapy to fill out at start of care and throughout stay as Patient presentation evolves. - Printed on nursing and nursing assistant schedules for easy access to information

Customizable Bowel Program Physician Order Sets

Bowel Program-Stimulation: Chemical rectal

Routine, Daily as Scheduled, First occurrence on Tue 6/6/23 at 0900, Until Specified Every morning 9 AM with digital stimulation and Enemeez. Up on commode if tolerated. Stimulation: Chemical rectal

Searchable Bowel Program patient Identifier in patient care lists - Serves as a quick glance for care team providers - Prints on Nurse and Nurse Assistant Schedules

Six month Staff Survey results indicate an increase in staff knowledge of bowel program effectiveness and overall satisfaction with bowel program as compared to previous practices.



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Collaboration:

Early OT Involvement

- OT responsible for identifying and communicating Durable Medical Equipment (DME), transfer status, and safety logistics for bowel program during the evaluation phase in order to promote bowel care execution from an upright position as early on as possible

- Act as resource/sounding board for future bowel program positioning needs throughout IRF admission

Bowel Program Time slots

- Identified both AM/PM timeslots
- Available timeslots offered to patients
- Reduces staffing issues and rushed bowel program efforts

Education:

- Nursing Education
- Bowel Care Course to be taken within 6 months of hire, current staff to take within the calendar year
- Includes 3B Scientific Bowel Stimulator for real life application digital stimulation training

Therapy Education

- 2 Specialized SCI/D OT to create and distribute cheat sheet for rotating SCI/D team members, serve as resource and mentor for onboarding OT.

Patient Education

- Each Patient to receive My Health Information Binder with SCI/D specific education and resources
- Handouts for bowel program importance and training offered in written format to ensure retention of skills, patient ownership, and transfer of care after discharge.

Observations

. How does the new bowel program protocol compare to the previous one in terms of effectiveness?

More Details











