Challenges & Special Needs of Ostomy, Wound & Continence Patients at Home

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A Difference in Venue

• You are on their turf not yours
• You are a guest in their home
• They are in control, not you
• Rapport and mutual respect is essential for success
• Their goals come first

Comprehensive Assessment

• Patient’s needs may be related to their wound, ostomy or continence challenges but a comprehensive assessment is fundamental
• To provide optimal care for the patient’s need a tunnel vision assessment must be prevented
Wound Care at Home

• What’s good for the goose **IS NOT** always good for the gander

Isolation = Independence

• Inaccessibility of supplies
• Inability to immediately collaborate with MD
• Challenges of peer networking
• Ergonomically challenged environments

Must be confident with your skills and assertive with your actions
Patient/Caregiver Participation

- Patient and caregiver education
- Teaching infection controls techniques
- Teaching dressing change techniques
- Observation of demonstrations
- Teaching signs and symptoms of complications to report to prevent re-hospitalization

Support Surface in the Hospital

Support Surface in the Home
Pressure Injury Prevention at Home

• Education, education, education!
• Provide written information
• Provide resources to obtain prevention products
• When qualifies for equipment through Medicare, assist with ordering
• Refer to physical therapy and occupational therapy

Job Satisfaction

• Helping patients in their environment
• Observation of wound healing from visit to visit
• Teaching patients healthier ways to live their life
• Helping patients make and succeed at their Smart Goals
• Meeting and helping really great people

The new Ostomate arrives home

• New Ostomates average a short stay in the hospital
• Less time for ostomy care education
• Often come home with very little knowledge of how to care for ostomy
• New Ostomates are anxious and scared when they get home
Challenges at home

- Fear of changing the appliance correctly
- Fear of leakage
- Fear of odor
- Fear of eating the right diet
- Fear of reactions from family and friends
- Fear of never living a “normal” lifestyle
- Fear of their future health

The Ostomy Nurse at Home

- An exceptional listener
- A problem solver
- Presents a hopeful spirit
- A patient teacher
- An encourager
- A skilled and knowledgeable clinician
- A manager of resources

WOCN Society

- The WOCN Society recently conducted a consensus conference that identified the outcome criteria for discharging a patient with a new ostomy from the home.
Emptying the Pouch

• Ability to empty gas or effluent from the pouch
• Demonstrate correct way to empty the pouch
• If using a closed end pouch, understand criteria for pouch and when to remove and replace the pouch

Changing the Pouch

• Verbalize and demonstrate patient specific guideline for changing the pouching system to include personalized wear time for their appliance
• Demonstrate ability to change pouching system, including removal, cleansing and application.

Stoma & Peristomal Skin

• Verbalize and demonstrate importance of measuring the stoma
• Verbalize and identify the normal stoma appearance and steps to take for changes
• Verbalize and demonstrate how to identify appearance of healthy skin and how to care for common skin irritations and when to seek medical attention
Stoma Output & Nutrition

- Verbalize and identify normal stoma output for their patient specific type of ostomy including frequency
- Verbalize when to seek medical attention secondary to change in their output
- Verbalize patient specific diet and fluid guidelines based on type of stoma

Independence

- Verbalize and demonstrate how to order ostomy supplies from vendor upon discharge from Home Health
- Verbalize issues related to living with an ostomy and communication with their ostomy nurse
- Identify resources to find a WOC Nurse in the future if needed

Incontinence in the Home
Identification of type of Incontinence

- Assess all patients for transient incontinence
- Home health clinician can assist patient determine their type of incontinence
- Teach primary steps to manage specific types of incontinence

Incontinence and Safety

- Teach all patients with incontinence to prevent falls from incontinence
- Teach how dietary elements can affect incontinence
- Teach skills that assist most types of incontinence such as double voiding plus other management tips

Awareness of Incontinence Type

- Those with urge incontinence
- The home health nurse can teach
  - Bladder Training Guideline
  - Controlling Urinary Urge
  - Refer to medical doctor to consider medication to decrease the urge and assist with disorder management
Awareness of Incontinence Type

• Those who suffer with stress incontinence

• The home health nurse can teach
  – Kegel and pelvic floor muscle exercises
  – Timed, habit and prompted voiding strategies
  – Isolating, recognizing and exercising pelvic floor muscles

Foley Catheters in the Home

• Indwelling catheters should only be used in the home when there is a verifiable need

• The use of a Suprapubic Catheter may be indicated for use in the home

• Prevention of Catheter Associated Urinary Tract Infection (CAUTI) is a key goal in the home

Verification of Need

• Indication for Urethral Catheter use in the Home
  – Current Stage 3 or Stage 4 Pressure Injury with incontinence
  – Urinary retention/obstruction
  – Comfort measure for the terminally ill
  – Severely impaired individuals with only option to remain in the home with caregiver
Indication for Suprapubic Catheter

- Patients at home who have experienced
  - Urinary tract and pelvic trauma
  - Urethral fistula
  - Severely impaired individuals with urination problems
  - Management of long-term urinary incontinence or retention

Prevention of CAUTI

- Choose the correct catheter tip, catheter size and balloon size
- Rationale must be available to use catheter size larger than 18Fr or balloon size larger than 5mL
- 5mL balloon must be filled with 10mL of sterile water
- Closed system should only be used in the home

Frequency of Catheter Change

- Changing out the catheter should be based on patient’s individual need vs. a pre-determined time
- Gritty deposits, recurrent CAUTI, pain with catheter and frequent irrigation are the indicators of need for catheter change
Patient/Caregiver Participation

- Daily personal care of the catheter and meatus in crucial
- Proper positioning of bedside bag and proper use of leg bags important factor to prevent CAUTI
- Re-evaluation of verification of ongoing need must be addressed with each catheter change

WOCN at Home

- The role of a WOCN in the home is a valuable member of the Home Health and Hospice Team
- Ability to consult and teach team nurses and caregivers needed skills is primary factor of this position
- Coach with the ability to educate and direct with compassion

References


