

Proactive Toileting:
Not asking if they have to go to the Bathroom on
rounds

When you ask patients if they have to go to the bathroom, they don't realize they really need to go, but you put the thought in their head and they decide they need to go after you leave.





What is Proactive Toileting

Why do we do it?

Proactive Toileting is monitoring the patient's Intake and Output Sheet so we can predict when a patient has enough urine in the bladder to go to the bathroom and before a patient attempts to go to the bathroom by themselves.

The purpose of the Proactive Toileting is to prevent 2/3 of the falls that occur in our Hospital. Yes, two-thirds of the falls have occurred when patients have gone to the Bathroom without assistance.

When patients are ill they don't always think about going to the bathroom until their bladder is full and then they have to make an urgent trip and cannot wait for caregiver to respond to a call light.

The elderly have decreased sensation which makes them more vulnerable to not feeling when their bladder is full until it is almost too late. Thus, we see incontinence on the way to the bathroom, which leads to slip and slide and fall, not to mention the embarrassment of the patient.





Who Needs Proactive Toileting

Consequences of Falls involve injury, death, law suits, and non-payment for a patient's stay. We should insure that we do not add any harm to a patient's stay.

Even if patients would be safe at home that is not always the case when they are in an unfamiliar location, impacted by medications, use of equipment, and not feeling well.

All patients can benefit from use of the I&O monitoring , to do Proactive Toileting , but high risk patients such as CVA, amputee, seizure patients, confused patients, End Stage Renal Disease patients are a must to include as some examples that require Proactive Toileting.





Explaining Proactive Toileting to Patients on Admission and on Rounding.

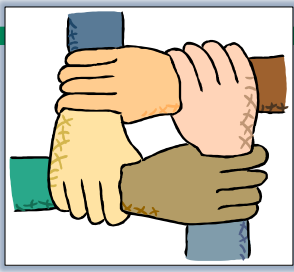
On admission, if they are scored a high risk patient, you should explain to the patient that we do Proactive toileting , meaning that we offer help to the bathroom based on intake to insure their safety.

These high risk patients also benefit from your close monitoring of intake and output to prevent fluid overload.



Proactive Toileting not only saves falls, it saves your time answering call lights when you are busy.

If the patient has had 400 ml or more to drink or in tube feeding or IV fluids, you will use the script or something similar to say, “I see you have had enough to drink and want to help you to the bathroom while I am here.” or “Let me help you to the bathroom, I am concerned for your safety.” (That helps to connect the dots)



Proactive Toileting: Prevents - FALLS

- Remember to stay with high risk patients when they are in the bathroom.
- Think about the use of a commode at night to prevent the patient from walking as far.
- Make sure there is a clear path to the bathroom and the floor is clean and dry.
- Check the mobility assessment done by Rehab that tells you what kind of an assist or equipment is needed to get up the high risk patient. (Found on Patient's White Board)
- Make sure the bed alarm is assessed on your hourly rounds.



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