

Constipation: Not a Problem!

except when treatment is ineffective

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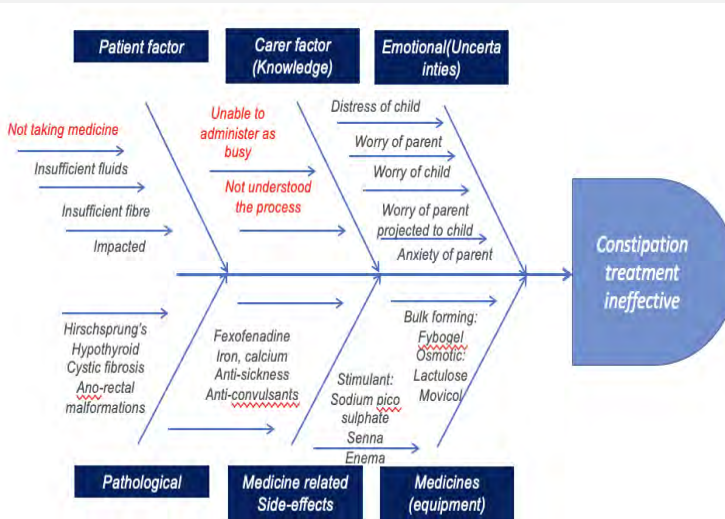
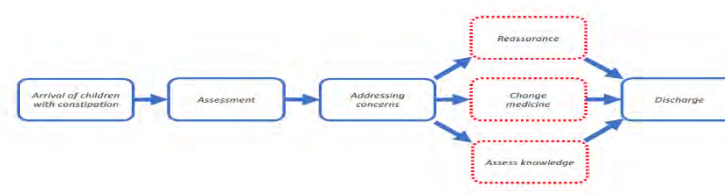
BACKGROUND

Constipation is painful infrequent passing of small hard stools.

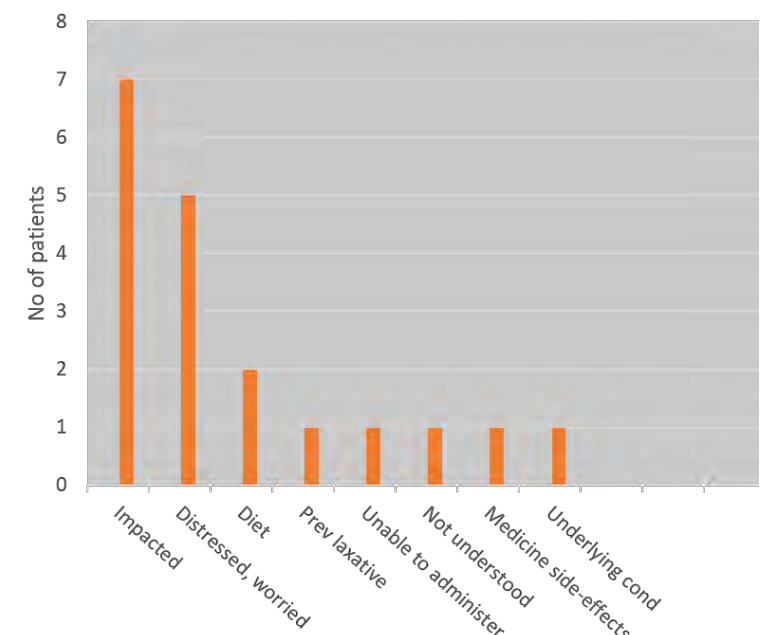
- Affecting 1 in 3 children
- 5% of general paediatric visits
- 25% of paediatric gastroenterology visits

PROBLEM

Children returning to the Acute Unit after prior treatment for constipation. They don't understand the treatment, so have worsened. This causes the child further distress and discomfort. Parents worry too.



Constipation causes
Source: Patient notes, multiple answers allowed (n=8)



AIM & MEASUREMENT DEFINITION

AIM

By August 2023, there will be 50% fewer returning children to our Admission Unit with constipation, impaction and distress

Chosen measure

No. of children returning to the unit with constipation within 4 weeks of 1st presentation

Inclusions

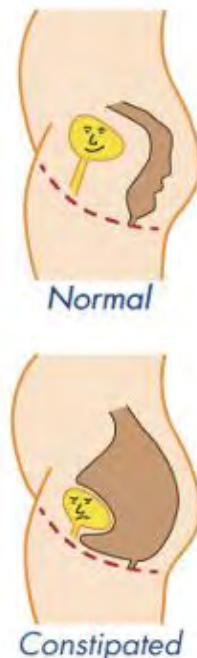
Children attending children's acute unit with constipation within 4 weeks of previous attendance for constipation.

Exclusions

First Visit
Syndromic conditions
Pathological diagnosis
Emergencies

Sampling method and frequency

All returning children attending the acute unit during the week with constipation, the frequency will be weekly



CHANGE IDEAS

- Use Eric/hospital leaflet
- Use of the disimpaction regime
- Appropriate follow-up arranged
- Use a new diagram in the hospital leaflet.
- Encourage plenty of fluids by showing POO Monster washed away with water/rain
- Diagram of Flush The POO Monster
- Superman combating poo poster
- Make gummies of laxatives or drinks of laxatives
- Stepwise approach to the use of different laxatives one after the other



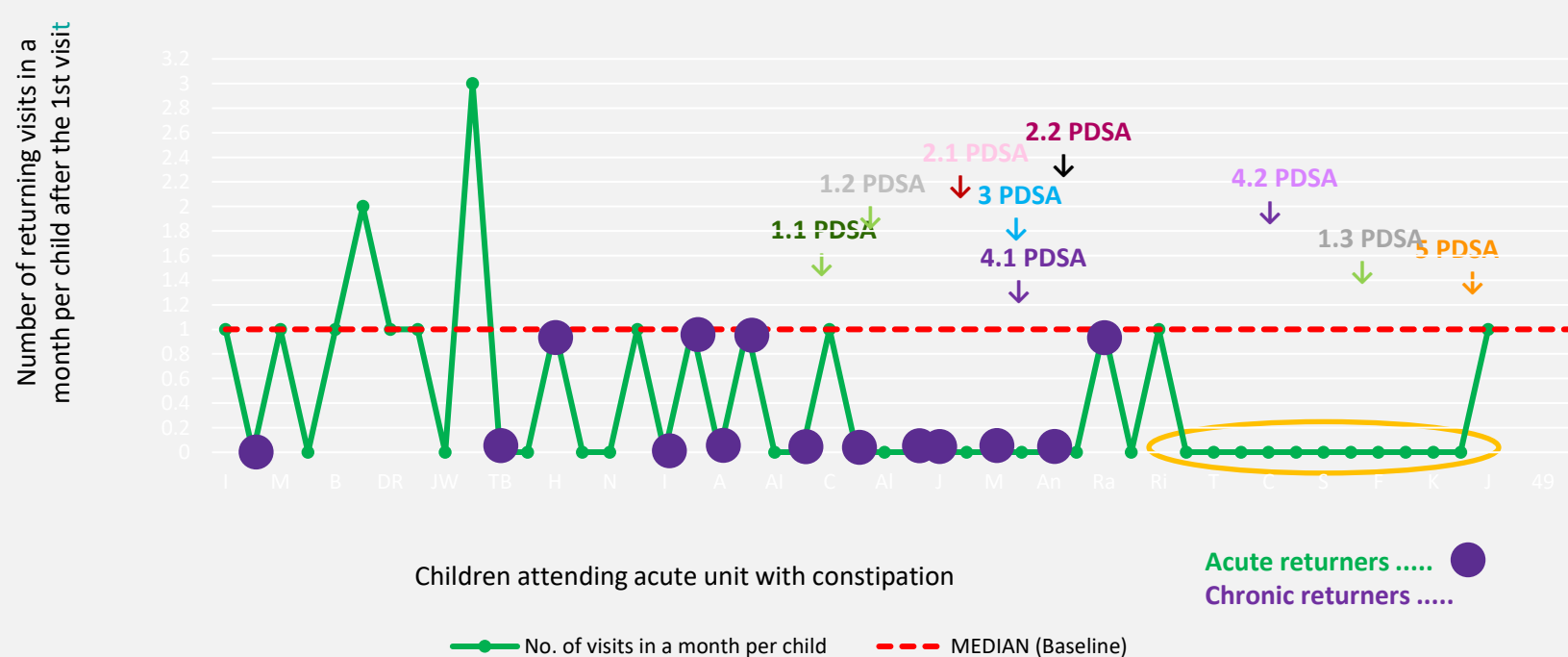
PDSA cycles



PDSA Test #	PLAN	Do	STUDY	ACT	PDSA Test #	PLAN	Do	STUDY	ACT
1.1	Use Eric leaflets for better understanding and resolution of constipation.	Provide leaflets and making leaflets available	The availability of leaflets led to easy information sharing with carers. Not all colleagues were aware.	Extending the period of provision of Eric leaflets onto the next week.	3.	Providing disimpaction regime along with leaflets	Use of appropriate disimpaction regime with marking. This overlapped with PDSA cycle 2 and 4	Carers were able to follow the disimpaction regime correctly	Extend the week for provision of disimpaction regime
1.2	Dissemination of information among colleagues	Creating awareness by word of mouth, and chatting with those who were in CAU. 8 of my colleagues received information on this.	Those in the acute unit were aware. With the change in rota, not all the colleagues were aware.	Extending the period of provision of Eric leaflets onto the next week.	4.1	Ensuring continuation of maintenance dose for chronic returners	Highlighting the maintenance dose. This overlapped with PDSA cycle 3.	Carers able to determine the right dose of maintenance	Extend the week of provision of highlighted maintenance regime
1.3	Taking a small face to face teaching session on the QI project	Power point presentation	Able to reach more colleagues.	However, this was challenging as few were not working.	4.2	Appropriate pathway for children returning with impaction to check on their symptoms.	Arrange follow up with GP/gastro CNS	Acute returners were arranged follow up with GP and chronic returners with gastro CNS	Extending the period of arranging follow up
2.1	Use highlighted diagram showing impaction on Eric leaflet	Provide highlighted leaflets. 4 carers understood about constipation in a better way.	Carers were able to understand what impaction meant. But not all my colleagues aware	Extending the period of provision of highlighted Eric leaflets onto next week	5	Guide carers to Eric website/use of QR code	ongoing		
2.2	Dissemination of information among nursing staff	Provide highlighted leaflets. Spoke to 5 of the nursing staff and senior nurse in charge to disseminate the information.	Better understanding continued. Capture of new staff allowed handing over of leaflets	Extending the period of provision of highlighted Eric leaflets onto next week					

RUN CHART

Review of returners



REFLECTIONS & LEARNING

- With the implementation of PDSAs there were fewer chronic as well as acute returners after their 1st visit, guiding them through an appropriate pathway.
- Use of leaflets with pictures of impaction led to differentiate impaction overflow from loose stool.
- Constipation is one of the common issues that comes across and explaining the process to carers helps in better understanding.
- Involving the carers in the treatment gives improved results.

