**Suggested Curriculum for Educating Parents and School Professionals**

This is a step-by-step guide to utilizing the Vermont Continence Project video resource library. We recommend inviting parent/guardian(s) and relevant school personnel (classroom teacher, teaching assistant, special educators, etc.) to collaborate and strategize regarding the child’s incontinence concerns. Videos can be viewed by all parties before or during the meeting so that everyone has the same baseline knowledge.

**Meeting 1**:

**Goal**: Educate parent/guardian(s) and school team about why the child’s incontinence is likely a medical concern. Videos:

* [**Elimination Basics**](https://cdci.w3.uvm.edu/blog/continence/elimination-basics-video/)(11 minutes
* [**Could It Be Constipation?**](https://cdci.w3.uvm.edu/blog/continence/could-it-be-constipation-video/)(7 minutes)
* [**The Constipation Cycle**](https://cdci.w3.uvm.edu/blog/continence/the-constipation-cycle-video/)(6 minutes)

**Action Steps:**

1. Take bowel data both at home and at school.
2. Obtain release to communicate with PCP.
3. Parent/guardian makes appointment with child’s PCP.
4. Ask parents and school personnel to complete the Bowel Symptom Checklist.
5. Send bowel symptom checklist and blank Constipation Action Plan to PCP (1 copy faxed directly, 1 copy goes with parent/guardian to appointment)
6. Schedule next meeting after PCP appointment.

**Meeting 2**:

**Goal**: Discuss treatment plan from PCP with parent/guardian(s). Video(s)

* [**The Cleanout**](https://cdci.w3.uvm.edu/blog/continence/acute-phase-constipation-treatment-the-cleanout/)(7 minutes)
* [**Bowel Maintenance**](https://cdci.w3.uvm.edu/blog/continence/constipation-treatment-bowel-maintenance-video/)(6 minutes)
* [**Building a Sitting Schedule**](https://cdci.w3.uvm.edu/blog/continence/building-a-sitting-schedule/)(7 minutes)

**Action Steps:**

1. Develop IHP with appropriate individualized accommodations.
2. Identify an agreed upon plan to monitor bowel movements and soiling accidents at school and communicate this information to parent/guardian(s). Consider how this might be shared with the PCP to monitor effectiveness of treatment.
3. Schedule next meeting in 1 month to assess progress and trouble-shoot obstacles.

**Meeting 3**:

**Goal:** Discuss treatment progress. Consider the following:

* Are there any problems with consistent medication adherence? (Is the child willing to take the medication and is it being remembered every day?)
* Are there any challenges related to withholding or toilet avoidance?
* Is the current sitting schedule being adhered to and are there ways that it could be more convenient or more tailored to the child’s natural elimination patterns?
* How is the child’s nutrition? If medication and scheduled sits are consistent, now the team can consider focusing on some dietary interventions.
* Consider factors such as the child’s development, family constellation, socioeconomic status, culture, and personal history, as well as perceived benefits of action, perceived barriers to action, perceived self-efficacy, activity-related affect, interpersonal influences (family, peers, providers), and situational influences.

Depending on the needs that are identified, consider watching the following videos:

* [**The Toileting Toolbox**](https://cdci.w3.uvm.edu/blog/continence/the-toileting-toolbox/)(physical supports for more effective elimination)(5 minutes)
* [**Sensory Processing and Toilet Learning**](https://cdci.w3.uvm.edu/blog/continence/sensory-processing-and-toileting/)(8 minutes)

Or

* [**Nutrition in Acute Phase Constipation Management, Part 1**](https://cdci.w3.uvm.edu/blog/continence/nutrition-in-acute-phase-constipation-management-part-1/)(7 minutes)
* [**Nutrition in Acute Phase Constipation Management, Part 2**](https://cdci.w3.uvm.edu/blog/continence/nutrition-in-acute-phase-constipation-management-part-2-faq/)(3 minutes)

**Action Steps:**

1. Make any necessary adjustments to the IHP.
2. Communicate with the PCP as necessary.
3. Browse the remainder of the Vermont Continence Project video resource library to identify any other videos that may be relevant to the individual child.
4. Schedule next meeting in 1 month to assess progress and trouble-shoot obstacles.

Length of treatment and progress toward independent continence will vary between individual children and will be affected by factors such as:

* Age/development
* Duration of symptoms before effective treatment
* Individual learning needs
* Sensory challenges

The team should determine the frequency and content of subsequent team meetings according to the needs of the child and family. The Vermont Continence Project is continuously creating more resources for families and healthcare professionals, so we encourage you to browse the site for relevant resources throughout the child’s toileting journey.