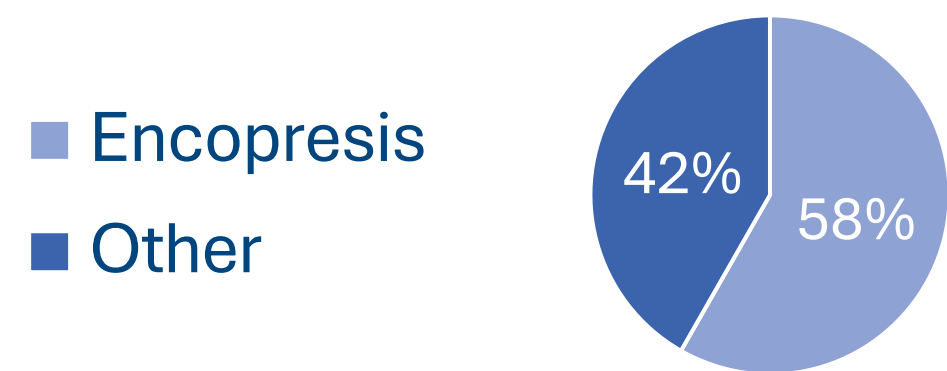


Development and Implementation of a 4-Week, Virtual Parent-Child Encopresis Intervention in the Pediatric GI Service

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INTRODUCTION

- Encopresis: Repeated passage of feces into inappropriate places, whether involuntary or intentional (APA, 2022)
- 90% of encopresis is with constipation (Loening-Baucke, 2002)
- There is a large behavioral health (BH) need in the Peds GI service
 - 115 total BH referrals Aug-Mar (8 months)



- Aim: Develop a model of care to meet the demand and provide evidence-based care to patients

CAREGIVER-CHILD ENCOPRESIS GROUP

- Demographics
 - Children aged 5-10 (M= 7.09) and caregivers
 - 61% Male
- Overview:

All Things Poop (Week 1)

Behavior Management (Week 2)

When Things Don't Go According to Plan (Week 3)

The Way Forward (Week 4)

PRELIMINARY RESULTS

- Group eligible referrals

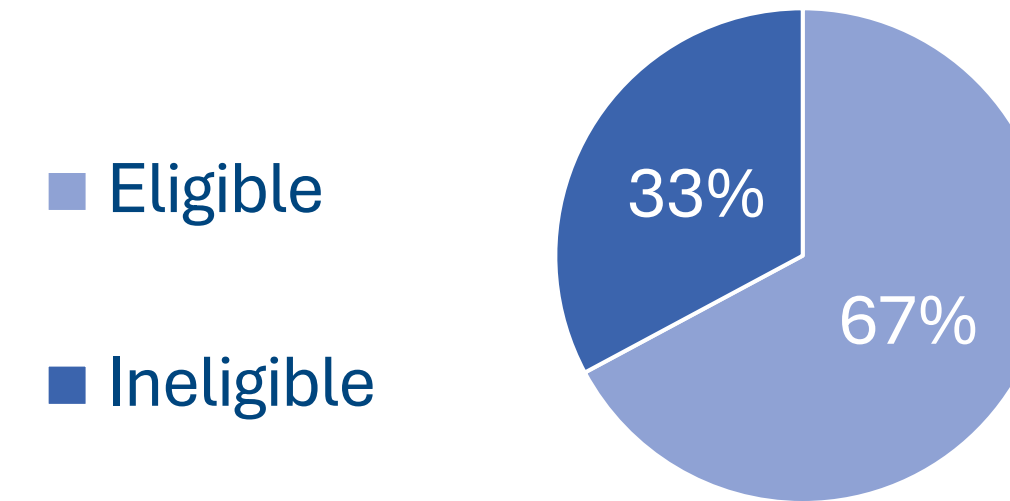
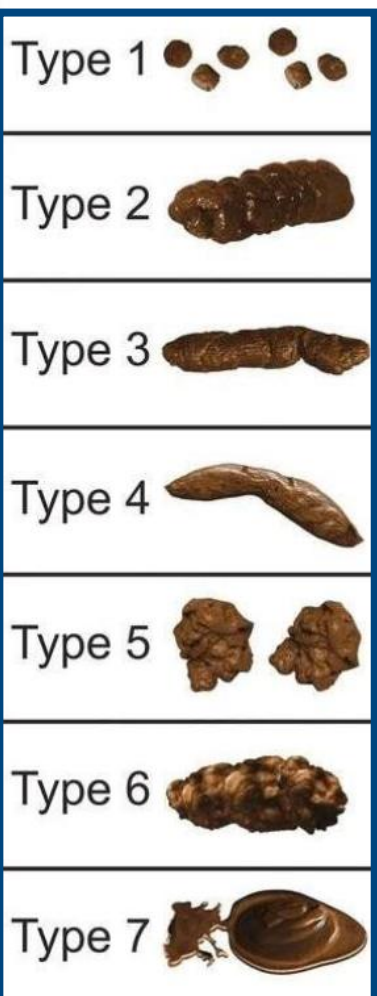


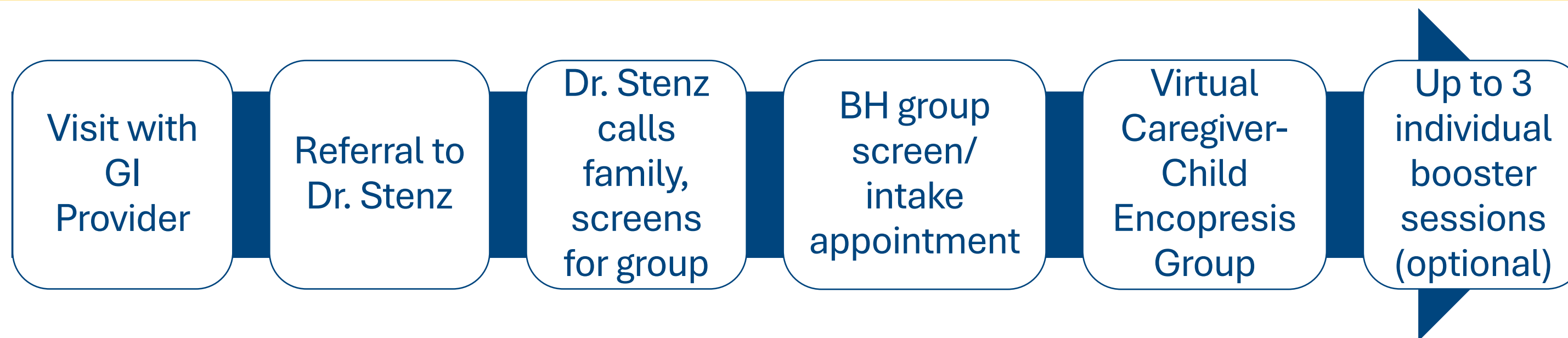
Figure 1. Sample Bristol Stool Scale (BSS)

- 1-2 on the BSS may be indicative of constipation



- Enrolled 32 pts in 4 rounds of group (Nov, Jan, Mar, & May)
 - Retention (Nov – Mar): 80% (19/24)
 - 26% (5/19) signed up for individual booster sessions
- Post-Survey Results
 - 83% (10/12) felt fairly or completely confident **creating SMART goals**
 - 91% (10/11) felt fairly or completely confident **utilizing effective rewards**
 - 90% (9/10) felt fairly or completely confident **adjusting sit plans**
 - 91% (10/11) agree or strongly agree that **group was helpful**
- Qualitative Comments
 - “This has really **changed our life** thank you so much”
 - “This group was incredibly helpful, and I think it **gave XX hope** that he can work through this but also **confidence** that he was **not alone**.”
 - “This group was surprisingly **helpful for our family**. My son didn't want to be on camera, but he slowly felt more confident to engage in the group ... Now we're all rating our poop on the Bristol stool scale!”

WORKFLOW



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CONCLUSION

Caregiver-Child Encopresis Group is an effective model of care in the Pediatric GI service to provide evidence-based intervention to a high volume of patients in a shorter period of time. Future directions include continued data collection and program evaluation.