



SERVICE OPERATING POLICY Adult Continence Service

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Bedfordshire CHS	✓	

**The Director responsible for monitoring and reviewing this policy is
Director of Bedfordshire Community Health Services and Lead Nurse**



EAST LONDON NHS FOUNDATION TRUST

SERVICE OPERATING POLICY FOR *Adult Continence Service*

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SERVICE OPERATING POLICY FOR *SERVICE NAME*

1.0 Service Aims

The Bedfordshire Continence service provides continence services to patients over 18 years of age registered with a GP in Bedfordshire and Luton, living in their own home or care home. The aim of the service is to:

- Promote and develop the use of continence care pathways in secondary & primary care.
- Implement and ensure evidenced based continence assessment tools are used and regularly reviewed.
- Ensure all patients referred to the service have access to appropriate continence advice and/or assessment and products.
- Provide a high quality, cost effective and productive service that enables innovative practice that meets individual patient needs.

2.0 Objectives

- Complete a continence assessment that gives a confirmed diagnosis of the type of incontinence a patient has.
- Meet the 18 week target from referral to appointment/treatment.
- Review patients with Intermittent Self Catheters (ISC) and ensure they are reviewed as appropriate/NICE guidance.
- Offer support and advice to patients with incomplete bladder emptying to become self-managing.
- Reassess patients with incomplete bladder emptying and carrying out intermittent catheterisation reviews annually or earlier if required.
- Initiate evidenced based treatment programmes for women with stress or urge continence problems.
- Identify patients who may benefit from neuromuscular electrical stimulation.
- Identify patients who may benefit from bio feedback to support a pelvic floor exercise programme as part of the neuromuscular pathway.
- Offer appropriate advice to patients, carers and community nurses on bowel management.
- Provide patients with appropriate continence products.
- Provide training and support to health care professionals.
- Contribute to the development of related pathways as appropriate.
- Review all continence assessments, reassessments and prescriptions completed by the community nursing service to ensure accuracy and that appropriate products have been requested.
- Provide training to community nursing staff including nursing homes, care homes and care agencies to ensure that patients on their case load are assessed and treated appropriately and are aware of when to refer on for further advice.
- Maintain a professional continence link group ensuring updated continence information is disseminated to all areas and provide a resource for patient information leaflets.
- Ensure practitioners are up to date with all best practice and new guidance.



3.0 Referral Criteria

The continence service will accept a professional referral for assessment for any adult who is not on the community nursing service active caseload. Patients can also be assessed by community nurses and registered nurses in care/nursing homes. On receipt of the assessment and following review by the Senior Continence advisor for accuracy & appropriate product/prescription, the order is then processed by the administration team and the patient is supplied with the product.

3.1 Referral criteria & sources

All patients presenting with incontinence should be offered an initial assessment by a qualified nurse with specialist training. This assessment will include a review of presenting symptoms and effect on the individual's quality of life.

Following assessment, a treatment and/or management plan is discussed and agreed with the patient and a copy provided. This plan will outline the initial treatment that will be carried out in the primary/community care setting. All patients will have periodic reviews of their initial assessment to monitor the effectiveness of their treatment/management plan and to ensure there is adequate clinical improvement.

- The service accepts referral from health care professional or social workers only.
- The service will demonstrate cultural competence and sensitivity in discussing and identifying health need among a range of patients from a diverse range of cultural and ethnic backgrounds.
- Bedfordshire Hospital Foundation Trust may contact the service for information regarding previous assessments.
- Bedfordshire Hospital Foundation Trust will complete continence assessments and product orders for patients on or immediately prior to discharge. This information is then emailed to the continence service for checking before the order is processed.
- Hospital referrals will be sent electronically via email or SPOA for processing.

3.2 Referral Process

- Following referral from a health professional, the patient is sent a welcome leaflet with covering letter informing them their referral has been received and they have been placed on the waiting list. At week 12 they receive another letter requesting they make contact with the service within a 3-4 week timeframe to book an appointment into clinic (unless they are housebound where they will then be added to the waiting list for a domiciliary visit). If they do not make contact by the date given on the letter they are discharged.
- All referrals are monitored by the administration team.



- Patients referred for teaching in Intermittent Self Catheterisation technique are contacted within three working days to arrange an appointment and then seen in the next available treatment clinic.

4.0 Service Provision

Whilst this list is not exhaustive and individual patient's needs should be considered on a case by case basis, the following forms the broad categories of interventions provided by the Continence Service:

- Holistic nursing assessment to include full use of assessment tools and recording in SystemOne.
- Medication reviews & medication monitoring relating to continence.
- Expert advice and education to professionals, therapists, care agencies medical team and patients and carers.
- Provision of physiological and social support.
- Supporting patients in Beds and Luton who have continence symptoms.
- Assessing patients within 18 weeks.
- Complete assessments to ensure appropriate treatment pathways.
- Loan equipment to support continence management.
- Provide advice/joint visits with nurse

5.0 Hours of Operation

- The service operates from 08.45-16.45pm, Monday to Friday excluding bank holidays.
- All emergencies are covered by normal out of hours GP provision, 111 or 999 services.

Assessments can be carried out in patients own home or care home (non-nursing care home) or clinic settings, these currently include:

	Location	Frequency
Bedfordshire	Grove View Hub	Every Tuesday and Wednesday
Bedfordshire	Leighton Buzzard Health Centre	Every Monday and Thursday
Bedfordshire	Shefford Health Centre	Every Thursday and Friday
Bedfordshire	Enhanced Services Centre	Every day excluding Wednesday
Luton	Wigmore Lane Health Centre	Everyday

How to contact service:

Tel: 0345 602 4064

Email: continenceteam@nhs.net

Disposable and washable products supply and delivery criteria.

Products are supplied once the patient has been seen and a continence assessment has been completed.

Pads are supplied to meet the type and level of incontinence, they are not given to meet the size of the person, they are limited in the number of pads that can be prescribed as well as the type of pads that can be supplied.

Washable products are available for light urinary incontinence. For female patients the unisex and full brief super in white, they have 6 pairs at initial delivery then 3 pairs every 24 weeks. Pads cannot be supplied if pants have been delivered until 6 months later. The men's washables are white unisex and men's brief y fronts super.

The pads have a numbering system that indicates the absorbing capacity of the pad. The soft 6 and soft 7 are pads for light to moderate urinary incontinence limited to a maximum of three in total per 24 hours.

The contour 6, 7 & contour 8 are for heavy urinary and/or double incontinence limited to a maximum of three in total 24 hours supplied with the correct size fixation pants to reduce leakage. The pants as supplied to 15 pairs every 48 weeks.

The contour 9 & 10 are only available via the Continence Service once a clinical need has been established based on fluid intake and level of urinary and/or double incontinence. These pads are limited to a maximum of three in 24 hours.

The F6 are supplied for fecal incontinence only if there is an indwelling urinary/sheath system in place or the patient is not urinary incontinence. We supply a maximum of three pads in 24 hours. Supplied with the fixation pants. The continence service is unable to supply pads for catheter that are bypassing or blocking.

The continence service is unable to provide any pads in addition to the maximum documented above. The Continence Service is unable to offer interim or earlier deliveries.

The Continence Service is not able to supply more than these numbers in a 24hr period.

The service is unable to supply pull ons as standard products and can only be supplied following the Senior Continence Advisor completing a clinical rationale and the patient meets the criteria, these are restricted to a maximum of two per 24 hours.

The service is unable to supply all in one (nappy's) as standard product. They are only supplied once all other options have been trialed and patient choice process has been completed. Once the costings are completed, the patient has the option of being prescribed nonstandard products against the value of the standard pad we would have supplied. Once the patient choice letter has been returned and signed to agree they will supply the shortfall as these products are restricted to two per 24 hours, the delivery be arranged.

Cover dri sheets 90cmx60cm are not standard pads supplied.

The service is unable to provide bed/chair protection or wipes.

The pads are delivered by the NHS Supply Chain (NHSSC), it is only the first delivery that will come automatically, normally within 10 working days from the appointment. The patient then uses the NHSSC automated ring back service. The pads that have been agreed at the assessment for the 24-hour period will be calculated for a 12-week supply for example: 3 pads a day over a 12-week timeframe will require 252 pads.

Thereafter the patient, family, carers or friend will need to contact NHS Supply Chain (0800 0304 466) to order future deliveries, anytime from week 10 (but not before) from the date of their last delivery they are then delivered at week 12.

6.0 Response Times

All patients are triaged on referral into the service and seen within the 18 week wait.

7.0 Discharge Criteria

- The majority of service users receive products for incontinence. The patients remain on the active caseload as they may telephone for advice, request a reassessment and receive product deliveries every 12 weeks or six months (for washable products or a low user of pads).
- The review will reassess the patient's current level of incontinence, and in particular identify neurological/diabetic patients who are at risk of incomplete bladder emptying and urinary tract infections. The review also ensures that the most appropriate product is being supplied, that lifestyle advice is given and patients are kept informed of new developments with products, management or treatments.
- Patients on treatment programmes are reviewed every 8 weeks via telephone or face to face and they may be discharged if symptoms have improved. If the patient's symptoms have not improved using the agreed pathways, then the patient may be referred to secondary care. Some patients seen by the Continence Service may not achieve full desired outcomes.
- Some patients with urinary incontinence, despite completion of a treatment programme, may decline a secondary care referral and prefer to manage their incontinence with a product.

The GP is informed by letter saved to SystemOne and task sent to surgery.

- letter of patients discharged or referred to secondary care by the continence advisor.
- Patients are discharged from the service after one DNA or two late cancellations, the GP is informed if this occurs.

8.0 Exclusion Criteria

The service does not accept referrals for anyone not registered with a Bedfordshire or Luton GP.



9.0 Monitoring

The service is subject to a range of internal and external monitoring including the following:

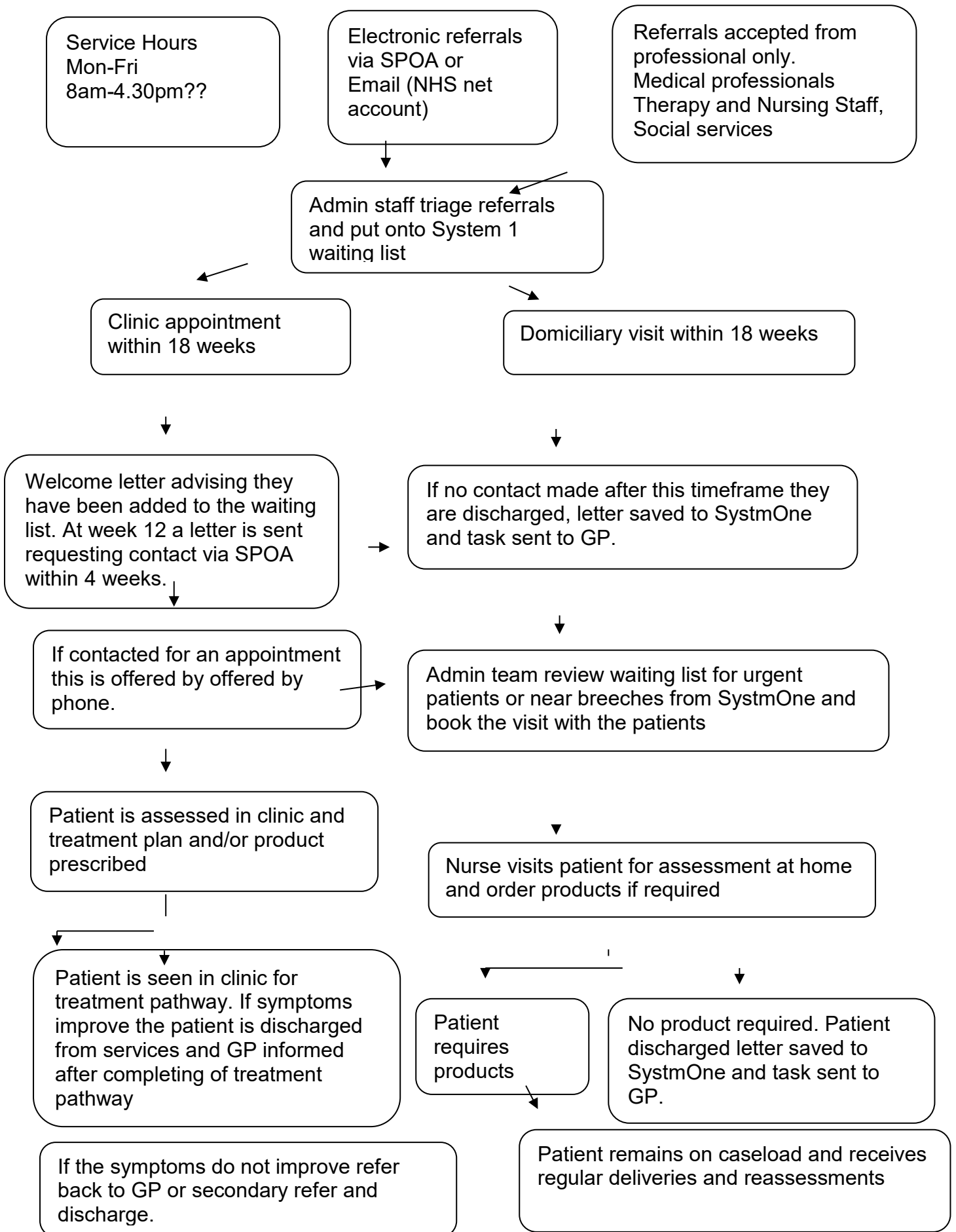
- Monthly dashboard/key performance indicators
- Service Performance Quality review
- Audit
- Complaints and Incidents
- Inphase reporting
- Patient Participation feedback
- Bothersome rating

10.0 Reference to Other Trust Policies / Procedures

- Relevant clinical guidance and policies
- NICE Guidance
- Relevant clinical guidance and policies
- Relevant safeguarding policies and procedures
- Department of Health guidelines on continence services



Continenence Service Referral Management Pathway





Continance Service Product Prescribing Pathway

