

Catching Children's Contenance

Jennifer Walsh, Community Children's Nurse

Powys Teaching Health Board

CONTEXT:

NICE estimate 900,000 children and young people suffer with continence problems, that is bladder and bowel dysfunction. Put simply, one in every 12 children will have wetting and soiling problems, but only one in three families will seek help. The impact of having continence issues will have a profound effect on their self-esteem, education, family and social relationships. This can affect them into adulthood and has the ability to prevent them from reaching their full potential.

THE PROJECT:

1. Scoping current service provision for child and family with continence issues in Powys: Findings indicate lack of absence of service provision;
2. Exploration of current governance that establishing an integrated community-based paediatric continence service has the potential to reduce emergency admissions by 80%, and a significant reduction in consultant led OPD (constipation/ bedwetting are now the most common reasons for referral); and,
3. Introduction of a new service pathway for paediatric continence.

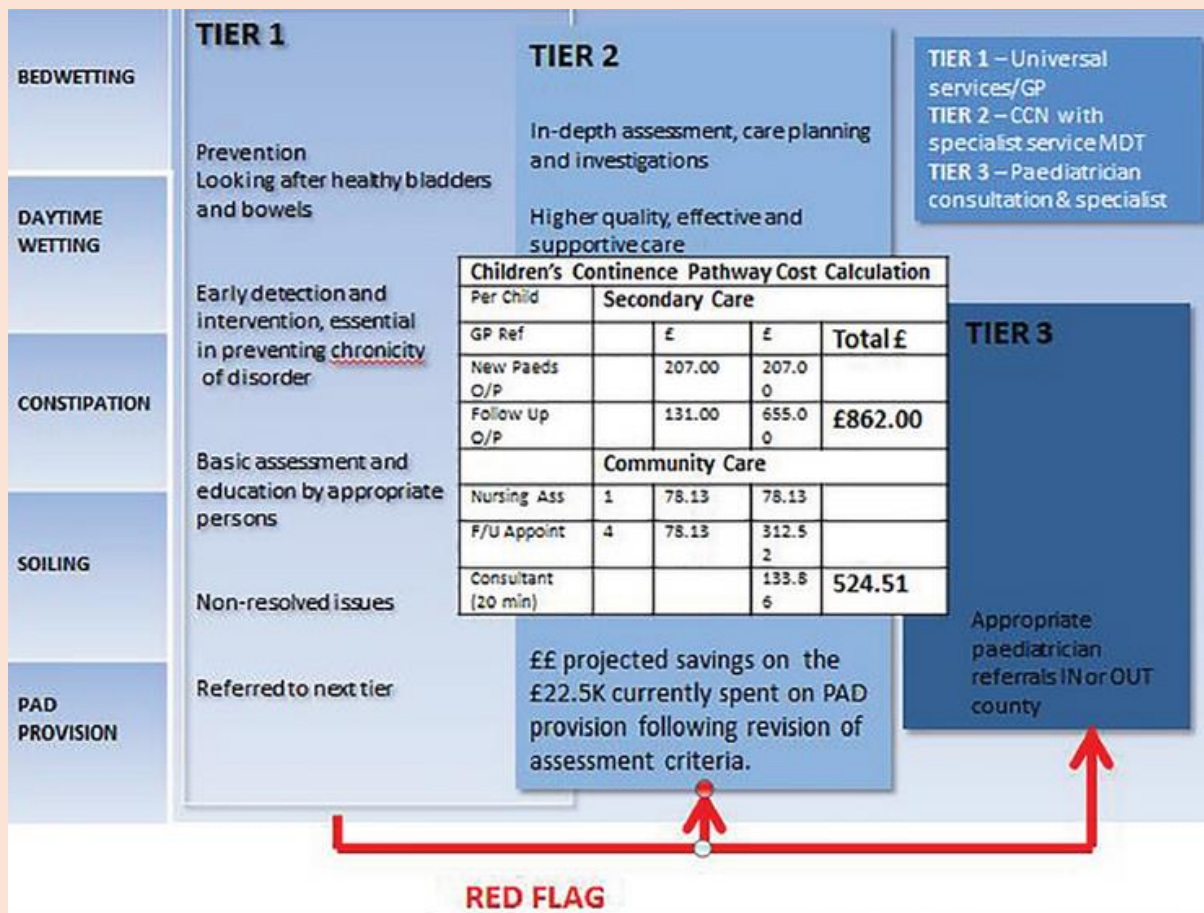


Figure 1

A chart is displayed with four columns. There are no distinct rows.

In descending order, the first column (left to right) reads; Bedwetting, Daytime Wetting, Constipation, Soiling, Pad Provision.

In descending order, the second column reads; Tier 1; prevention; looking after healthy bladders and bowels; Early detection and intervention, essential in preventing chronicity of disorder; basic assessment and education by appropriate persons; non-resolved issues; referred to next tier.

In descending order the third column reads; Tier 2; In-depth assessment, care planning and investigations; Higher quality, effective and supportive care

In descending order the fourth column reads; Tier 3; Appropriate paediatrician referrals IN or OUT county

End of description.

FIT WITH PRUDENT HEALTH:

- Governance call for all areas to have a single integrated paediatric continence service for all bedwetting, constipation and soiling issues;
- Supporting self care through equal partnership. ERIC unites children, families and professionals to co-produce outcomes based on best practice;
- Motivate and empower children and their families to gain greater control over their own continence health, decreasing emotional distress; and,

Shifting services to community based care, and access to timely and effective treatment will reduce complications, and result in acute problems not becoming chronic, thus reducing subsequent future resource demand.

Part of cohort Bevan Exemplar Projects 2016-17