Multidisciplinary continence care

In June 2000, the Chorley and South Ribble Continence Advisory Service began a project to establish a multiprofessional continence team. This team would consist of a nurse, occupational therapist and physiotherapist.

There were clear benefits to refocusing the service on continence promotion in the community as this was where the service received most of its referrals. It was decided to re-establish community continence clinics which, in the past, had been led by nurses. Local GPs were calling for specialist continence physiotherapy in the community, particularly for women requiring pelvic floor muscle assessment and re-education. It was proposed that the new clinics would be run by a physiotherapist specialising in continence care.

There was also a plan to re-establish a specialist continence advisory service for people in residential care. This service would be provided by an occupational therapist interested in continence promotion.

The major cause of urinary and faecal continence problems in residential care is often functional. It was felt that an occupational therapist could help with personal and environmental adaptation and advise on modifying daily activities.

To ensure these outcomes were met, there was close liaison with the trust’s clinical audit department, which offered advice on monitoring service development.

Benefits for patients Multidisciplinary working has enabled direct referral of patients to an appropriate specialist health care professional. It has also facilitated the provision of multiprofessional appointments or visits where appropriate. This allows patients access to advice from many health care specialists at ‘one stop’ sessions.

The physiotherapy clinics were audited to find out the pattern of referrals for the first three months after the service was established. This showed that 62 per cent of referrals came from GPs. There was also a high degree of satisfaction from the service users, and all patients attended their follow-up appointments.

A specialist continence occupational therapy service now provides assessment for patients with functional incontinence and training for other health and social care staff to promote continence by improving functional ability.

This service also includes the first female urinal lending library established in the UK, which allows patients to try products before purchasing. The service is proving very popular with patients and is being evaluated with a view to implementation within acute rehabilitation services.

Evaluation A final report on the project was submitted to the trust in October 2001, detailing the benefits to patients and the organisation.

The report recommended that the occupational therapy and physiotherapy posts should be made permanent and their hours increased to accommodate the growing demands on the service’s staff. The trust accepted and implemented these recommendations.

Disseminating knowledge and experience This project was the first in the UK to combine nursing, occupational therapy and physiotherapy within a primary care trust continence advisory service.

The team are keen to share their experiences of working together and have been visited by health care professionals from within and outside the UK who are interested in setting up similar, multiprofessional continence services.

The team has spoken at local, regional and national conferences and venues and has published numerous papers in a range of professional journals (Pomfret, 2002; Vickerman, 2002; Pomfret, 2001).

Reflection on the award process The team received information about the Nursing Times Awards in May 2002. As nurse manager for the newly formed multidisciplinary continence team, I thought this would be an excellent way of disseminating information on the team’s success in providing multiprofessional continence promotion.

The initial entry form asked for a description of the project, how it benefited patients, what was new about it and whether the findings were transferable.

The team was delighted to be told in June that it had been shortlisted for the second stage of the awards. It was invited to write a paper, not exceeding 1,500 words, about the project.

The team was then selected for the final stage of the awards and was invited to give a short presentation of its work to a panel of judges. Following this, the team attended the awards’ gala dinner in London.

Apart from the opportunity to win money which would benefit the service, entering the Nursing Times Awards 2002 brought other positive benefits to the team. It had achieved the aim of forming a truly multiprofessional continence team, and entering for the award helped the team disseminate its work and raise national interest in multiprofessional continence collaboration.

There is still time to enter the Nursing Times Awards 2003. For an entry pack, call 0207 874 0542 or fax 0207 874 0623. For information, see www.nursingtimes.net

REFERENCES