

Adult Female Urinary Incontinence

From 6 July 2015, a new pathway will be implemented for adult females with urinary incontinence (with or without stage 1 prolapse).

Urinary incontinence can be categorised as follows:

- **Stress** – incontinence caused by coughing, sneezing, lifting or exercise
- **Urge/Over Active Bladder (OAB)** – sudden urgency, frequency and nocturia

The new pathway aims to ensure that all adult females with urinary incontinence (with or without stage 1 prolapse), receive conservative management in the first instance by the appropriate team first time, before they are referred to a consultant.

In most cases females that have had conservative management will not need to be referred on to a consultant.

The pathway supports an MDT approach between the **SCH** Continence Team who manages patients with **urge** incontinence, and **IHT** Gynae Physio who manage patients with **stress** incontinence (with or without stage 1 prolapse). The new pathway enables the two Teams to refer between their services should the need arise, rather than having to ask the GP to do this. In addition the teams can refer directly to the consultant rather than referring back to the GP for onward referral.

The GP should give life style advice to the patient prior to referral; where the patient has urge symptoms (or where urge is the predominant symptom) the patient should be asked to complete a three day bladder diary (located on the CCG web-site (and also available on Map of Medicine)).

If the referral is being made without the GP having prescribed Anticholinergic drugs, the Team will assess the patient and determine if medication is required and send a request to the GP for medication. The Team will review the medication to check compliance, tolerability and effectiveness of the medication.

Please note – 1) patients presenting with Atrophic Vaginitis can be treated by the GP and not referred onto either service. 2) If the GP has already prescribed Anticholinergic drugs then the GP is responsible for reviewing the patient.

GPs can contact either of the two Teams if they need advice. The contact details are on the referral form and can also be found in the 'Contact details' section of this briefing.

From 6th July 2015, a new referral form (version 3.0) will need to be completed when making referrals to either of the two services.

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How to refer?

- Complete the referral form (version 3.0), which can be found on the CCG website (in the format for your clinical systems and on Map of Medicine) from 6th July 2015.
- Referrals for **IHT** Gynae will need to be posted **via secure internal post** and for referrals to **SCH** sent via secure NHS.Net email (see details for both services on the referral form). Please **do not** refer via e-Referral to IHT and please do not fax referrals to the SCH Care Co-ordination Centre.
- Those patients with mixed incontinence need to be referred based upon their predominant symptom.
- Please telephone the number in the 'Contact details' section below if you need telephone advice before referring.
- Please do not refer to both services (to avoid multiple appointments for the patient).
- Please do not refer to the consultant at the same time (to avoid unnecessary appointments for the patients). The consultant will only refer back IHT Gynae Physio or to SCH Continence Team for the patient to complete a conservative management programme.
- If the referral is received by the wrong Team they will transfer the referral to the appropriate team.

Reporting

- The Teams will write to the GP with regular updates on patient progress and will also notify the GP if the patient has been referred to a consultant.

Benefits to patients

- Patients will be seen by the right person, in the right place at the right time
- Patient will receive the right treatment prior to a referral to a consultant
- Fewer appointments for the patient to attend, and no duplication of appointments.

Contact details

- If you are not sure and need advice with your decision, please contact the triage team:

Care Co-ordination Centre (and ask for the Continence Team) on
0300 123 2425

or

IHT Gynae Physiotherapists on 01473 703522

If you are not able to speak to someone immediately a message will be taken and a team member will call you back.
