

Children’s Contenance Initial Assessment Tool – for all children 0-19 yrs
(Including those with additional needs)

| | |
|----------------------------------|---------------------|
| Child’s Name | Date of birth |
| | NHS No: |
| Initial Assessment Completed by: | Presenting problem: |
| Contact details: | : |
| | Date |

Prior to undertaking the assessment the child and family should complete a bladder diary for 48 hours and bowel and night wetting diary for one week using standard documentation. Include:

- Fluid intake (what, when and how much the child has drunk).
- Frequency & consistency of bowel movements (use Bristol Stool Form chart) Expected frequency of no more than x3 per day / no less than x3 per week
- Any soiling including time, amount, location
- Number of voids including any wetting (normal range 4 – 7 voids per day)
- Volume of voids (Expected bladder capacity = age x 30 + 30)
- Any bedwetting with estimated size of wet patch and time if known

Fluid intake (refer to chart for age appropriate intake):

| | YES | NO | ACTION |
|---|-----|----|---|
| Good fluid intake: drinks 6-8 water based drinks per day (total appropriate for age) | | | If no advise to adjust intake accordingly |
| Poor fluid intake (less than 80% of expected for age) and /or includes fizzy and caffeinated drinks | | | If yes advise to adjust fluid as necessary |
| Drinks spread evenly throughout the day? | | | If no advise re regular drinks including three drinks in school and last drink an hour before bed |

Bowel Function:

| Red Flags | YES | NO | ACTION |
|--|-----|----|--|
| Any delay in passage of meconium (>48 hrs) | | | If yes refer infant directly to paediatrician, discuss older child with continence nurse |
| Symptoms apparent within first few weeks of life | | | If yes refer infant directly to paediatrician. discuss older child with continence nurse |
| Passing ribbon (very narrow) stools from birth | | | If yes refer directly to paediatrician |
| Concern re abdominal distension with vomiting | | | If yes refer directly to paediatrician |
| Recent leg weakness noticed | | | If yes refer to paediatrician |

| | | | |
|--|--|--|--|
| History | | | |
| Less than 3 bowel movements / week (in non breast fed baby and weaned child) | | | If yes consider constipation – refer to pathway |
| Has frequent daily soiling? | | | If yes consider faecal impaction – refer to constipation pathway |
| Stool consistency (use Bristol Stool Form Chart) reported to be 1-3 or 6-7 | | | If yes consider potential for constipation – refer to pathway |
| Often or occasionally opens bowels during sleep? | | | If yes consider if toilet refusal in the day (behavioural issue) or if underlying constipation |
| Struggles to open bowels, withholds, has pain with bowel motions, has frequent abdominal pain? | | | If yes suggestive of constipation – refer to pathway |
| Other? (describe) | | | If concerned discuss with continence nurse, or refer on to GP or paediatrician, as appropriate |

Daytime Bladder Problems:

| Red Flags | YES | NO | |
|---|------------|-----------|--|
| History of repeated UTIs | | | If yes refer to GP for further investigation |
| Child (particularly girls) reported to be always wet during day | | | If yes refer to GP for further investigation |
| Any reported straining to void or weak stream | | | If yes refer to GP for further investigation |
| History | | | |
| voids either > 7 or < 4 times per day | | | If yes check fluid intake to ensure within recommended amount and refer to daytime wetting pathway |
| Is toilet trained and has wetting accidents during the day | | | If yes refer to daytime wetting pathway |
| Some reported frequency (voids > x7) or urgency (has to dash to the toilet) | | | Advise re regular toileting (e.g. 2 hourly) plus regular drinks |
| Child has failed to achieve day time dryness at all by age 3 years | | | If yes refer to toilet training pathway |
| Other? (describe) | | | If concerned discuss with continence nurse |

Toileting issues (from age 2 years including those with additional needs):

| | YES | NO | |
|---|------------|-----------|---|
| Behavioural problems or anxieties about using the toilet? | | | Consider behavioural support techniques |
| Has a mobility or sensory problem that interferes with ability to sit on toilet safely? | | | Consider referral to OT |

| | | | |
|---|--|--|---|
| Gives no indication of needing to use toilet? | | | If yes refer to toilet training pathway |
| Never or rarely passes urine or opens bowels on the toilet/potty? | | | If yes refer to toilet training pathway |
| Insists on nappy for opening bowels or other toilet refusal? | | | If yes consider behaviour modification programme |
| Other? (Describe) | | | If concerned refer to toilet training pathway and discuss with continence nurse |

Night time wetting (children over the age of 4 yrs):

| Red Flags | YES | NO | |
|--|------------|-----------|--|
| Reported weight loss or excessive thirst | | | Refer to GP for investigation (e.g. urinalysis and blood sugar) |
| Some concern re parental intolerance / safeguarding issues | | | If yes follow local safeguarding policy |
| History | | | |
| Is wet more than two nights a week? | | | If yes clinically significant refer to bedwetting pathway |
| Wakes after wetting | | | Possible overactive bladder – confirm no daytime symptoms |
| Other? (Describe) | | | Refer to bedwetting pathway and discuss with continence nurse if concerned |

N.B. ensure additional information is documented in child's notes and included on any referrals.

OUTCOME:

| | |
|---|------|
| Advice offered: (provide details) | |
| Information sheets provided to family (provide details) | |
| Commenced on pathway: (details of pathway) | |
| Date for reassessment/ review:: | |
| Referred to continence service | date |
| Signature | Date |

References

NICE 2010 Constipation in children and young people: diagnosis and management

<https://www.nice.org.uk/guidance/cg99>

NICE 2014 Constipation in children and young people – Quality Standard

<https://www.nice.org.uk/guidance/qs62>

NICE 2010 Bedwetting in children and young people – Guidance

<https://www.nice.org.uk/guidance/cg111>

NICE 2014 Bedwetting in children and young people – Quality Standard

<https://www.nice.org.uk/guidance/qs70>

Birth to Five HSCNI

<http://www.publichealth.hscni.net/publications/birth-five>

Healthy child programme 0 to 19: health visitor and school nurse commissioning

<https://www.gov.uk/government/publications/healthy-child-programme-0-to-19-health-visitor-and-school-nurse-commissioning>