

# Guidance for Prescribing Continence Products to Adult Patients in the Community and Residential Care Settings

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<b>Prepared by: Advanced Nurse Practitioner- Continenence</b>	<b>Date of review: December 2020</b>								
<b>Lead Reviewer: Morven McPhillips</b>	<b>Version: 2</b>								
<b>Authorised by: NMAHP</b>	<b>Date: 12/11/2019</b>								
<b>Distribution</b> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Lead Nurses/Midwives</td> <td style="width: 50%;">Departmental Head of Service</td> </tr> <tr> <td>Senior Managers</td> <td>Lead AHPs</td> </tr> <tr> <td>All wards and Clinical areas</td> <td></td> </tr> <tr> <td>Head of Adult Social Care</td> <td></td> </tr> </table>		Lead Nurses/Midwives	Departmental Head of Service	Senior Managers	Lead AHPs	All wards and Clinical areas		Head of Adult Social Care	
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## **Data Protection Statement**

*NHS Highland is committed to ensuring all current data protection legislation is complied with when processing data that is classified within the legislation as personal data or special category personal data.*

*Good data protection practice is embedded in the culture of NHS Highland with all staff required to complete mandatory data protection training in order to understand their data protection responsibilities. All staff are expected to follow the NHS policies, processes and guidelines which have been designed to ensure the confidentiality, integrity and availability of data is assured whenever personal data is handled or processed.*

*The NHS Highland fair processing notice contains full detail of how and why we process personal data and can be found by clicking on the following link to the 'Your Rights' section of the NHS Highland internet site.*

<http://www.nhshighland.scot.nhs.uk/Pages/YourRights.aspx>

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# Guidance for Prescribing Continence Products to Adult Patients in the Community and Residential Care Settings



**All patients should undergo a continence assessment before product issue. Issue of products should not take the place of therapeutic interventions. Products should be supplied on an individual assessment of need**



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## Aim

The aim of this guidance is to provide practitioners with guidance for the ordering and provision of prescribed continence containment products. The guidance will also provide information on the range of products available to ensure suitability and cost-effectiveness. Products within the core list will be effective to meet the clinical need for the majority of patients. Non core product should only be used when there is a good clinical reason to do so. You need to be able to evidence through assessment and provide a rationale for the prescribing of non core products and this then must be authorized.

All care plans should clearly evidence where possible a plan of care to promote continence. Prescribed continence containment products should not be provided as first line treatment for incontinence

## Continence Assessment

A continence assessment will be carried out for all patients with an identified continence problem. The individuals clinical need will be ascertained through holistic assessment carried out by suitably trained staff in concordance with the patient and with the help of the carers/ relatives where applicable. A NHS Highland continence assessment form should be used and completion of a bladder record to identify input, output and toileting habits covering a minimum of 4 days . This assessment form must be completed in full and must include bowel assessment.. Urinalysis must be carried out.

The nurse should deliver or advise on treatment, or refer on (including preventative and rehabilitative care) and devise an appropriate care plan documenting the promotion of continence and clinical outcomes recorded. The completed assessment documentation and care plan is then filed in the patient's health care records and should be available on request by the Advanced Nurse- Continence. Continence care plans should have regular ongoing review.

## Continence Containment Products

Prescribing of continence containment products within NHS Highland will be according to the patient's clinical need only– this can be a problem where patients and/or carers request only certain types of products – in this current economic climate it is not possible to meet everyone's wishes

## Criteria for Provision of Prescribed Continence Containment Products

- End of life care
- Functional issues that greatly restrict access to toilets, commodes or urinals
- Neurological deficits which prevent continence promotion
- Learning disability which prevents continence promotion
- Mental Health issues which prevents continence promotion
- Intractable incontinence where clinical interventions have failed

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Products should be ordered as a result of assessment and with discussion with the patient and/ or carer wherever possible.

**The following patients will not be provided with products:**

- Those **without** completed continence assessment documentation and care plan.
- Those with a recent onset of incontinence, in the absence of an identified cause.
- Where urinary tract infection has been diagnosed and treatment not completed ( incontinence often improves after treatment and may affect the assessment)
- Where review is overdue.
- “Just In Case” –but if required - details of mail order services should be provided

Careful consideration should be given to patients with stress, urge or mixed incontinence where urine loss is minimal. These patients should do well on a treatment programme and the provision of pads may not always be appropriate and may lead to a greater level of incontinence. The cost of the product may be less than the delivery charge

**Patient Information**

Each patient who requires products will be provided with an explanation of the correct use of products and this recorded in the patient's notes. This will also include information on disposal of used products. Written information sheets on product fitting are available for patients and staff, if required, via the product service provider, the NHS Highland Intranet and the NHS Highland SHOW site.

**Ordering**

***See Appendix 1.. Process Flow for Provision of Continence Products***

Products will only be provided for those patients who meet the criteria for access to the Home Delivery Service and have been assessed.

Appropriate products should be selected to the maximum of 3000mls absorbency within a 24 hour period. An average bladder will pass about 1500mls in 24 hours so the maximum is usually not required. Please be aware that high absorbency products may affect skin integrity and become bulky and heavy to wear. Measurements should be taken to ensure that the correct size of product is ordered.

***It is the nurse's responsibility for the ordering of products for a clinical need, taking into account the range of products available, the working absorbencies of the products, correct fitting techniques, consideration for cost effectiveness/ environment and training for all staff who are fitting the products.***

Disposable body-worn pads are listed as medical devices (Medicine and Healthcare Product Regulatory Agency (MHRA), 2000; 2001)

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Advice can be sought from the Advanced Nurse- Continence (NHSH) or the Ontex Nurse Advisor.

Patients who wish to use continence products over and above those assessed and identified as a need will be able to purchase those products by mail order, either from Ontex or a company of their choice.

Products are required to be ordered by filling out a **Product Requirement Form (PRF)** in full. If the requirement is within the guidance please email or fax to Ontex

[PRF- Product Requirement Form](#) (available electronically from the NHS Highland Intranet Page- Continence Care)

### **See Appendix 2. PRF**

- The PRF must be completed in full with all fields completed as required, including the nurses name, ensuring that all writing is fully legible. This ensures that the Ontex Synergy system is updated promptly and delays are avoided by PRF's being returned.
- Please write in full the Surname, Christian name, date of birth, address including postcode, the nurse's name that is completing the assessment/re-assessment, telephone number, TP number, locality and name of GP/or GP practice.
- Write in the number of pads required in 24 hours in the relevant product box– a tick is not sufficient.
- Non core products should be entered in the “Authorised product description” box. Please note that slip products are all non core products. Any other relevant information should be entered here
- The authorising signatory must provide authorisation for the provision of items out with guidance or non-core products prior to PRF being submitted to supplier.
- Tick which size of net fixation pants are required – patients will automatically receive 5 pairs every 6 months.

### **Adult Washable Products**

#### **See Appendix 3. Washable Product Formulary**

Washable pants can be ordered for patients with light to moderate incontinence. If suitable 6 pairs will be issued annually. If more than pairs are required then authorization must be obtained.

If washable bed pads are ordered then 2 bed pads will be sent for a year's supply – these require the patient to be naked from waist down so are not suitable for everyone. They are to be used as a continence item and not as bed protection.

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## Change of Prescription

In the case of an increase in requirements, the named nurse will complete a 4 day bladder chart, an updated care plan and details of reason for change and file in patients' health care records. A PRF must be submitted to Ontex to notify them of the change

## Change of Address

Where a patient has been admitted to a care home from the community and is in receipt of products, arrangements should be made locally for the supply of pads to follow the patient.

## Deliveries to Patients in the Community

All patients should be on a Ring Back Service and delivery will be made to every home on a 12 or 16 weekly cycle. New patients going on to the system will be put on to a 12 week cycle. Please remember to ensure that patients fully understand this process – where the patient may have difficulty with this or there is no relative/carer to take responsibility for the delivery the patient can be transferred to receiving scheduled cyclical deliveries

Cyclical deliveries to patients in their own homes must be authorized by an authorizing signatory.

### **Ring Back Service**

- Patient checks stock
- Calls supplier when they have 1 weeks' worth of product left
- Checks product on receipt
- Calls supplier if incorrect

### **Cyclical Service**

- Requires authorising signatories agreement on PRF to instigate
- Product delivered automatically as agreed cycle
- Stock to be checked by DN and supplier notified if changes to delivery required

## Deliveries to Patients in Residential Care Settings

All Residential Care Settings will be on the Ring Back Service and delivery will be made on an 8 or 12 weekly cycle, there will be no interim deliveries.

### **Ring Back Service**

- Stock checks of products by patients requirement
- Submit order to supplier
- Delivery made on agreed cycle
- Checks product with delivery note
- Calls supplier if incorrect
- Store stock in appropriate patients area

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## General Points for Orders

<b>PRF</b>	<ul style="list-style-type: none"> <li>• All fields completed</li> <li>• All writing should be legible</li> <li>• TP number HAS to be inserted</li> </ul>
<b>Timescale of getting PRF on the system</b>	5 working days
<b>Max pads per day</b>	Up to 3000mls total - but no more than 5 pads per 24 hours
<b>Fixation Pants</b>	<ul style="list-style-type: none"> <li>• Tick the box beside required size</li> <li>• These should be prescribed with pads if patients underwear not suitable</li> <li>• Should only be prescribed for Id Expert form plus and above</li> <li>• 5 pairs every 6 months – needs authorisation if</li> </ul>
<b>Product change from washables to disposables</b>	If less than 1 year since prescribing washables authorization is required
<b>Washable products</b>	6 pairs of washable briefs or 2 washable bed pads every 48 weekly Any supply out with this guidance requires to be authorised
<b>Non-Core products</b>	Require authorising signatory agreement before PRF is submitted – if PRF not authorised return to nurse and authorising signatory for agreement.
<b>Off formulary products</b>	Must be authorised
<b>Does non-core product need authorisation each time?</b>	No, once this has been authorised once, the patient will continue to receive their order
<b>Does authoriser need to sign the form?</b>	Yes form drop down box and PRF must be sent from the authorizers email
<b>What can't be requested?</b>	Washable and disposable products together
<b>PRF Returns</b>	Any form not completed fully or not authorised (if required) will be returned and no products sent

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## Adult Product Selection

**Smaller absorbency products** should be prescribed wherever possible – this may mean more pad changes but allows for improved comfort and discretion, increased client interaction/movement and observation of skin integrity.

**iD Expert Light** are small shaped pads with an adhesive strip used for light urinary incontinence. These should be worn with the patient's own close fitting underwear. Fixation pants are not prescribed for use with these products.

**iD Expert Form** are shaped pads available in varying absorbencies and 3 different lengths. They are suitable for those with moderate to heavy incontinence. These can be worn with either the patient's own close fitting underwear or Fixation pants.

### **iD Expert Fixation Pants.**

Measure waist to ensure correct size is prescribed. Patient will receive 5 pairs every 6 months. Please see manufacturers guide for fitting and washing instructions. However ensure that they are

- Machine washed at 60°C
- Do not tumble dry
- Do not use bleach
- Do not use fabric conditioner
- Do not iron

For Residential Care Setting – The patient's own snug fitting underwear should be used and only if this is not available or suitable will fixation pants be provided. Authorisation will be required from a signatory.

- Pants should always be labeled with the user's name
- Pants are only to be worn by one user
- Make sure the pants are dry before using them
- Do not cut the pants

**iD for Men** are a male specific designed pad which are ideal for managing light urinary incontinence in men. Fixation pants are not prescribed for use with these products.

They are fairly expensive compared to the other products so please consider whether other small shaped pads are suitable before ordering the male products.

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**iD Slip products** should only be used after trialing a shaped product such as ID Expert Form. These can be easier to fit and can have larger working absorbencies. Slips should not be considered first line for patients who are bed bound and they are not classed as night products. But may be considered for the

- Patients who are immobile or those who cannot be toileted. Promotion of independent toileting is virtually impossible when a patient is wearing a slip product, as most will then require assistance to fit back in place correctly.
- *Where there is difficulty keeping a shaped pad in place such as for those patients who may have behavioural problems or involuntary movements.* Note: If patients are ripping or removing pads try a smaller product - patients may tolerate a smaller, less bulky pad.
- Patients who are severely doubly incontinent or pass large amounts of faeces
- Patients who have very contracted limbs or altered body shape.

An average bladder will hold 400-600mls. This is usually first void of the morning with subsequent voids being less than this. Remember that older bladders tend to have less capacity.

The higher absorbency pads may be required for

- The time immediately following diuretics – often output is decreased after this time so a smaller, less absorbent pad can be prescribed for then.
- Those who have nocturnal polyuria and are unable to get to a toilet or use an urinal overnight
- Where patients are dependent on carers for toileting/pad changes and carer supply is inadequate leaving patients with many hours between changes or assistance available.

MLs = GMs in weight - so careful consideration should be given before prescribing large absorbency products for mobile patients. Many pads will hold a litre or more which is about the same weight as a bag of sugar. Imagine having to walk around with a heavy/bulky weight which will sag and droop causing leakage, skin issues, odour and embarrassment.

**Wetness indicators** on pads should be used as a guide for patients and carers to when pads should be changed. Most products have a double wetness indicator running its full length on the reverse. The Yellow line is glue/hot melt and will change to blue/black when wet. The Blue line is ink and will fade as pad becomes wet.

Pads should be changed when the indicators have changed two thirds or more of their length. If they have changed less, the pad can be left in place until next check. If there is any faecal soiling, faeces or discharge then the pad should be changed immediately regardless of wetness indicators. Premature changing of high absorbency pads is a cost issue in terms of expenditure to the Health Board, the environment and most importantly in comfort and dignity to the patient.

- When prescribing products consider the differences between the Effective Working Absorbency and Style of different product – sometimes these can be minimal.

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- Always consider the alternatives in the management of incontinence. There are sheaths, external devices/urinals and washable products that may be a suitable alternative to a pad, however nothing replaces toileting

### Review of Continence Containment Products

Nurses should carry out a review to ensure the ongoing appropriate product use. Each patient **must be** reviewed for products at least once every 6 months and care plans updated accordingly.

- For Ring Back Service patients it is important to update the care plan but no update is required on the home delivery system – as these patients are taking responsibility for their own orders.
- For Cyclical Service Patients (those on scheduled deliveries) nurses should carry out a review to ensure ongoing requirements at least once every 6 months. A PRF should be sent to Ontex to inform them of no change/ change
- Also stock should be checked to ensure it is kept in the right environment and that there is no stockpiling – there have been instances where large amounts of products have been found in sheds/garages/lofts and the assessing nurse has the responsibility for ensuring appropriate amounts of product are order

### 3rd Party Products

If a 3<sup>rd</sup> party product is required due to skin allergies, fitting issues or any other reason please discuss the patient requirements with Advanced Practitioner- Continence, in the first instance

### Disposable Procedure Pads

Disposable procedure pads contain only a 'sprinkling' of super absorbent polymers and so with limited absorption it is NOT considered good practice to use them for urinary incontinence.

The disposable procedure pad allows urine to come into contact with air and this will lead to the breakdown of urine. Ammonia produced from the breakdown of the urine tends to increase the pH level of the skin leading to odour, continence dermatitis and skin breakdown.

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Procedure pads **should not** be used where a patient is wearing a body worn pad. If there is any leakage then fitting should be checked first or the patient may require a different body worn pad.

### When should Procedure Pads be used?

- Bed protection during bowel procedures
- Where there is excessive wound exudates
- For terminally ill patients when pain control is an issue when trying to secure body worn pads and there is minimal output of urine and faeces – iD Expert Form normal gently positioned may be a better option.
- For short-term management only of a bypassing catheter

Procedure pads should only be used one at a time and on the diagonal. It is expensive and ineffective to use multiple pads as bed protection.

It is not good practice to sit patients on chairs lined with disposable bed pads. There are washable products, which can be used as furniture protection if needed.

### Incontinence Associated Dermatitis

Some patients will experience leakage of urine or accidents so the skin can become exposed to urine and faeces. This can cause the skin to become wet and soggy (moisture lesion) and can develop into a painful rash. Incontinence dermatitis can cause distress and embarrassment. The use of oil based barrier creams interfere with the pad absorbency and can lead to urine staying in contact with the skin. **The use of water based creams is advised. Please refer to local formularies for guidance.**

### Signs and symptoms

Will appear as a red and painful skin rash, usually irregular in shape and may/may not be over bony prominences. It may also be itchy and flaking, crusty or weeping.

### Treatment

- Regular inspection – use of smaller absorbency products allows this.
- Moisture causes damage to the skin so keeping the skin dry is imperative. Pat the skin dry and avoid rubbing.
- Appropriate product selection and correct fitting
- If skin is wet, it can be cleaned with plain water – soap can make the skin dry and irritated
- Any faeces on the skin must be removed promptly
- Foam cleansers can be useful

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- Barrier creams can help protect the skin – it is important to use a water based cream so as not to interfere with product absorbency. Sorbaderm is the recommended cream. The use of Sudocrem or other oil based creams affects the absorbent ability of the pad.
- Talcum powder should not be used in conjunction with body worn continence products. When dampened by sweat or urine, talc can form encrustations, which may cause discomfort and increase potential for frictional damage.
- An all-in-one product which is too large or too small may cause leakage and skin irritation. With a shaped product, fixation pants or patients own pants must be close-fitting.
- The application of a product with a higher working absorbency than is clinically indicated will cause excessive drying out of the skin leading to irritation. This is due to the absorbent polymer in the containment product which will absorb the skins moisture.

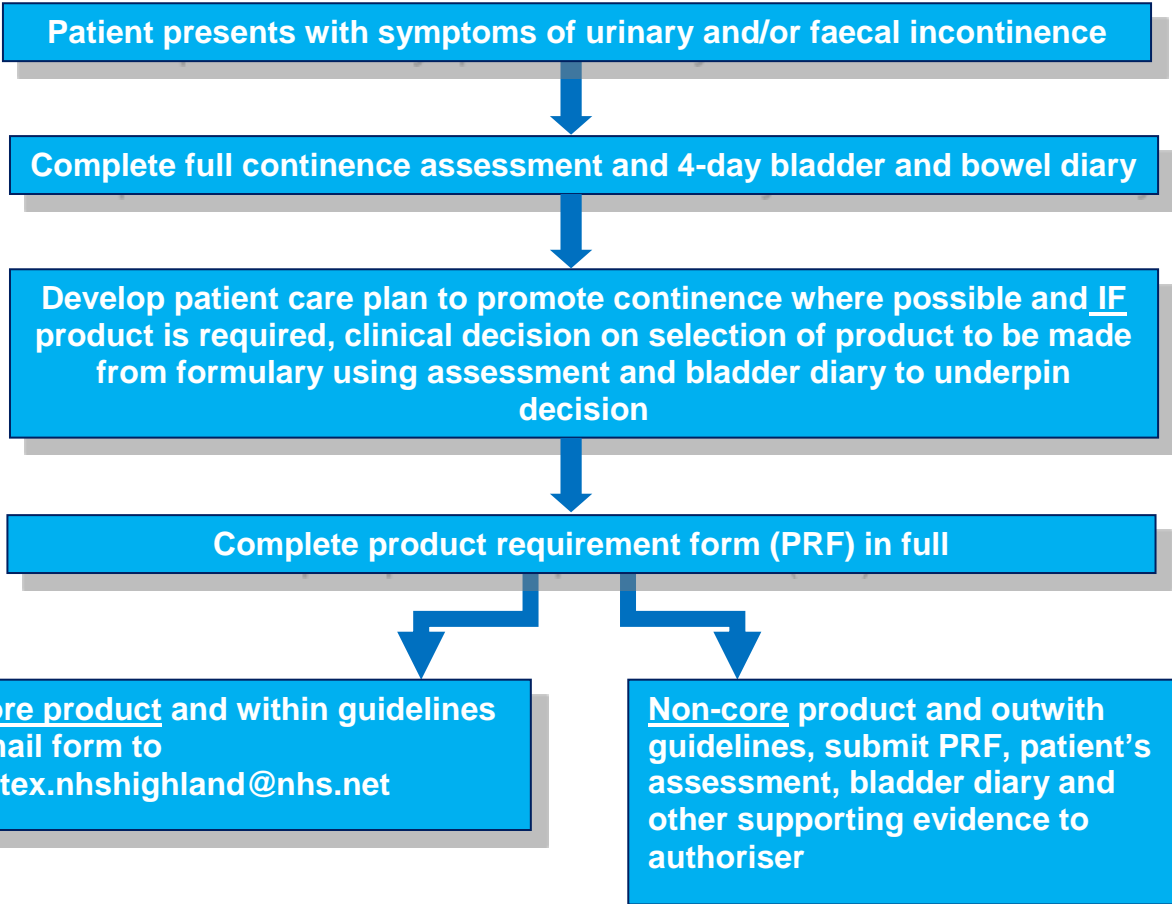
### Problem solving

#### **See Appendix 4. Problem Solving**

Please refer to the Problem Solving guidance provided before prescribing an alternative.

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**APPENDIX 1**  
**Process flow for prescribing continence products**



**Authorisers may approve or reject the prescription**

**Authoriser signs off PRF from drop down menu and authoriser must email form to [ontex.nhshighland@nhs.net](mailto:ontex.nhshighland@nhs.net) from authoriser's email**

**N.B: Ontex may escalate some prescriptions to the Advanced Nurse (Continence) at NHS for further scrutiny**

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APPENDIX 2

**NHS Highlands**

Please Tick the appropriate box

Argyll

& Bute

South/Mid

North/West

Highland

All fields with an \* are mandatory and MUST be completed.

<b>Nurse Name:</b>		<b>Designation:</b>	
<b>*Activate Delivery Type:</b>	Ringback <input type="checkbox"/>	Cyclical <input type="checkbox"/>	Residential <input type="checkbox"/>
	New Patient <input type="checkbox"/>	Re-Assessment <input type="checkbox"/>	Assessment Date: <input type="text"/>
<b>Suspend Delivery:</b>	Suspend Until <input type="text"/>	Indefinitely <input type="checkbox"/>	Remove <input type="checkbox"/> Reason <input type="text"/>

<b>*Title</b>	<b>*Forename</b>	<b>*Surname</b>	<b>*DOB</b>
<b>Patient Details</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>*TP/Locality</b>	<b>*Address &amp; Postcode</b>	<b>*Alternative Del / ADP</b>	<b>*GP Practice</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>*Telephone Number</b>	<input type="text"/>		
<input type="text"/>			

Core Adults & Core Children	Core Adults Only	*Select	Core Children Only	*QTY Per Day
<b>iD Expert Light</b>	<b>iD Fix Comfort Super</b>		<b>Bebecash</b>	
Extra 150-200ml	Small 40-80cm	<input type="checkbox"/>	Midi (4-9kg)	<input type="text"/>
Maxi 250-350ml	Medium 60-100cm	<input type="checkbox"/>	Maxi (7-18kg)	<input type="text"/>
Form Normal 500ml	Large 80-120cm	<input type="checkbox"/>	Junior (11-25kg)	<input type="text"/>
	X Large 100-160cm	<input type="checkbox"/>	Extra Large (18+kg)	<input type="text"/>
	XX Large 140-180cm	<input type="checkbox"/>		
	XXX Large 180-195cm	<input type="checkbox"/>		
<b>Core Adults Only</b>			<b>iD Expert Slip</b>	
Plus 500-625ml			XS Super 40-70cm 500-600ml	<input type="text"/>
Extra Plus 700-1000ml			Small Plus 50-90cm 650-725ml	<input type="text"/>
			Medium 80-125cm 500-650ml	<input type="text"/>
			Large 115-155cm 500-700ml	<input type="text"/>
			Normal	<input type="text"/>

Products that do not appear on this form require authorisation. These products must be authorised prior to trying samples or placing an order. **By authorising, you are confirming that the continence pathway has been followed and that you have reviewed the supporting evidence for this non core order.** If authorisation has been given please complete and sign below

Authorised Product Description	Size / Absorbency	Qty / 24 hrs	Washables	Date:
			<b>Washables</b>	Authorised by:
			<b>*Size</b>	Position:
			Boys	<input type="text"/>
			Girls	<input type="text"/>
			Ladies	<input type="text"/>
			Mens	<input type="text"/>

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## APPENDIX 3 NHS Highland WASHABLE UNDERWEAR FORMULARY



Ladies Briefs	Holds approx. 200mls		Size	Measure Hips
2001/01W	P & S Ladies White Brief		X Small	71-76cm
2001/02W	P & S Ladies White Brief		Small	76-81cm
2001/03W	P & S Ladies White Brief		Medium	86-91cm
2001/04W	P & S Ladies White Brief		Large	96-102cm
2001/05W	P & S Ladies White Brief		X Large	107-112cm
2001/06W	P & S Ladies White Brief		XX Large	117-122cm
2001/07W	P & S Ladies White Brief		3X Large	127-134cm
2001/08W	P & S Ladies White Brief		4X Large	137-143cm
2001/09W	P & S Ladies White Brief		5X Large	148-153cm

Male Briefs	Holds approx. 200mls		Size	Measure Waist
2004/01W	P & S Mens Y Front		Small	76-81cm
2004/02W	P & S Mens Y Front		Medium	86-91cm
2004/03W	P & S Mens Y Front		Large	96-102cm
2004/04W	P & S Mens Y Front		X Large	107-112cm
2004/05W	P & S Mens Y Front		XX Large	117-122cm
2004/06W	P & S Mens Y Front		3X Large	127-134cm
2004/07W	P & S Mens Y Front		4X Large	137-143cm
2004/08W	P & S Mens Y Front		5X Large	148-153cm

Girls Briefs	Holds approx. 215mls	Age	Size	Measure Waist
2008/02	P & S Girls Brief	3-4yrs	Small	46-56cm
2008/03	P & S Girls Brief	5-6yrs	Medium	51-61cm
2008/04	P & S Girls Brief	7-8yrs	Large	56-66cm
2008/05	P & S Girls Brief	9-10yrs	X Large	61-71cm
2008/06	P & S Girls Brief	11-12yrs	XX Large	71-81cm

Boys Briefs	Holds approx. 215mls	Age	Size	Measure Waist
2007/02	P & S Boys Brief	3-4yrs	Small	46-56cm
2007/03	P & S Boys Brief	5-6yrs	Medium	51-61cm
2007/04	P & S Boys Brief	7-8yrs	Large	56-66cm
2007/05	P & S Boys Brief	9-10yrs	X Large	61-71cm
2007/06	P & S Boys Brief	11-12yrs	XX Large	71-81cm

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**APPENDIX 3  
NHS Highland  
WASHABLE UNDERWEAR FORMULARY**

Unisex Briefs	Holds approx. 500mls	Size	Measure Waist
2003/01	P&S Unisex Brief	Small	76-82cm
2003/02	P&S Unisex Brief	Medium	83-92cm
2003/03	P&S Unisex Brief	Large	93-102cm
2003/04	P&S Unisex Brief	X Large	103-112cm
2003/05	P&S Unisex Brief	XX Large	113-122cm

Single Bed Pad	Holds approx. 3000mls	Size	Colour
2512B	P&S Single Bed Pad with Tucks	90x90cm	Blue

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## Disposable Continence Products

### Problem Solving

PROBLEM	HOW TO SOLVE PROBLEM
<b>PRODUCTS ARE LEAKING</b>	<ul style="list-style-type: none"> <li>• <i>Check product is fitted correctly – follow manufacturer’s instructions</i></li> <li>• <i>Has sticky tab been removed</i></li> <li>• <i>Never use 2 products at same time</i></li> <li>• <i>If insert products are used ensure close fitting underwear is being worn</i></li> <li>• <i>Stretch fit pants to be worn with products Form Plus and Extra, measure hips/waist for appropriate size – fitted correctly</i></li> <li>• <i>If a slip is worn ensure hip/waist measurements have been taken</i></li> <li>• <i>If a child is wearing nappies check weight and waist/hip measurements</i></li> <li>• <i>Do not use barrier creams unless they are prescribed, as they can block top layer of pad preventing the urine from being absorbed into the pad. If a cream is required use e.g. barrier cream – Sorbaderm. Do not use talc – refer to Tissue Viability if ongoing problems</i></li> <li>• <i>If a cream is prescribed apply it sparingly to affected skin only</i></li> <li>• <i>If leakage continues then a FVC requires to be completed</i></li> </ul>
<b>WET SKIN</b>	<ul style="list-style-type: none"> <li>• <i>Review if creams/talc are being used, can block the top layer of product and then urine/faeces can remain in contact with the skin</i></li> <li>• <i>How long has product been on for</i></li> <li>• <i>Does the patient refuse to be toileted</i></li> </ul>
<b>SKIN IS RED/SORE</b>	<ul style="list-style-type: none"> <li>• <i>Assess skin condition i.e. how long has the skin been red/how long was product on for</i></li> <li>• <i>Check product fitted correctly – follow manufacturer’s instructions. Ensure the backing of product is not next to the skin</i></li> <li>• <i>Use unperfumed soap/cleansing foam (follow skin care guidelines), ensure skin is cleansed and dry before applying product or prescribed cream. Has there been any change in skin products used?</i></li> <li>• <i>If the client has sensitive skin use non-biological products</i></li> <li>• <i>Change in medical condition</i></li> <li>• <i>Has there been any changes in fluid/dietary intake or medication</i></li> </ul>
<b>USAGE OF PRODUCTS HAS INCREASED</b>	<ul style="list-style-type: none"> <li>• <i>Ensure the pad is used correctly and changed when <math>\frac{2}{3}</math> full, make use of wetness indicator strips on pads</i></li> </ul>
<b>ADVERSE REACTION TO PRODUCT</b>	<ul style="list-style-type: none"> <li>• <i>Contact Continence Nurse Advisor or Ontex Nurse Advisor</i></li> </ul>

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