Oxfordshire's Children's Bladder and Bowel Pathway (2 - 18 years)

Level 3: Secondary Care

- Specialist assessment and treatment of children and young people identified as having 'red flag' symptoms.
- Takes referrals from Children's Bladder and Bowel Service for children who have not responded to optimal interventions and support at level 2.

Level 2: Children's Bladder and Bowel Service

- •Undertakes comprehensive bladder and bowel assessments and treats children and young people from 2-18yrs years with bladder and/or bowel problems and/or delayed toilet training, where universal Level 1 interventions have not resolved the issues
- Provides specialist training, education and support to primary and community care staff delivering services at Level 1.

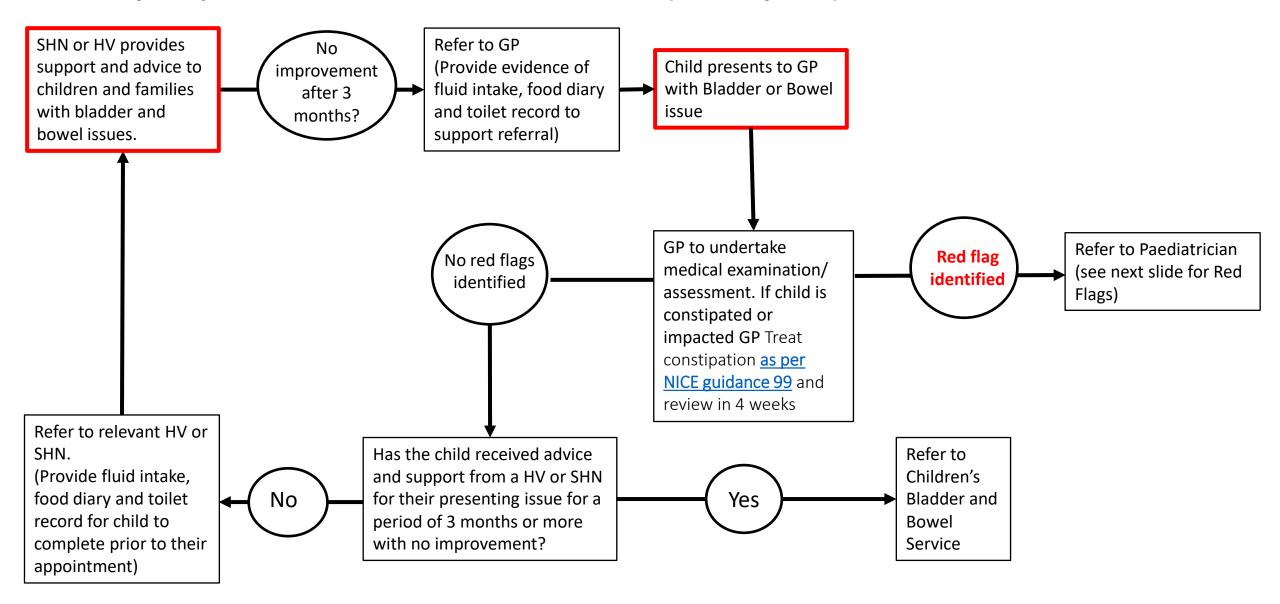
Level 1: Universal (GPs, HVs, SHNs)

- •Level 1 GP to undertake medical examination/ assessment to eliminate red flags (where red flags identified refer directly to Paediatrician). If child is constipated/impacted Treat constipation as per NICE guidance 99 and review in 4 weeks. If no improvement refer to Level 2 for constipation.
- Family directed to appropriate ERIC online resources and/or leaflets provided if required
- Basic first line fluid advice and support by HVs and SHNs for up to 6 months.

Pathway Principles:

- Children who are being successfully supported by HVs or SHNs do not need to be referred to a GP unless no improvement is made after 3 months.
- Referral to level 2 or 3 services will only be accepted once a medical assessment has been carried out by a GP.
- If no red flags are identified, children and young people must first be given Level 1 first line advice and support before progressing through the pathway.
- Children should only be referred to **one** service at a time. The correct service can be identified through the GP referral form

Pathway Map for Children's Bladder and Bowel (2 – 18 years)



Notes: Boxes with red outline highlights the two entry points to the pathway. SHN = School Health Nurses HV = Health Visitors

Red Flags for referral to Paediatrician

		Constipation/soiling		Daytime wetting		Night-time wetting	Delayed Toilet Training	
		Complete a medical examination (appropriate questions/investigations to be included in the referral form)						
Red	•	Delay in passage of meconium	•	History of repeated	•	Reported weight loss or	As per	
Flags		>48 hours after birth		UTIs		excessive thirst – GP to	constipation/soiling,	
	•	Ribbon stools from birth	•	Child (particularly girls)		check urinalysis and	daytime and night-time	
	•	History of constipation pre-		reported to always be		blood sugar	wetting.	
		weaning		wet during the day				
	•	Abnormal neurological		(continuous	•	Concern about parental		
		examination		incontinence)		intolerance or		
	•	Anomaly of the spine	•	Any reported straining		safeguarding issues –		
	•	Abdominal distension with		to void or weak stream		refer to local		
		vomiting	•	Reported weight loss		safeguarding policy		
	•	Unexplained persistent vomiting		or excessive thirst –				
		or any bile stained vomit		GP to check urinalysis				
	•	Recent leg weakness		and blood sugar				
	•	Weight loss/failure to thrive	•	Newly disclosed FGM				
	•	Blood in the stools		– Refer to				
				occg.info/FGM-Rose-				
				Clinic				
	IF ANY RED FLAGS IDENTIFIED REFER TO PAEDIATRICIAN AND/OR SAFEGUARDING TEAM AS PER YOUR							