



PROCEDURE	
Catheterisation	
Scope (Staff):	Community health staff
Scope (Area):	CAHS-CH
Child Safe Organisation Statement of Commitment	
The Child and Adolescent Health Service (CAHS) commits to being a child safe organisation by meeting the National Child Safe Principles and National Child Safe Standards. This is a commitment to a strong culture supported by robust policy documents to ensure the safety and wellbeing of children at CAHS.	

This document should be read in conjunction with this [DISCLAIMER](#)

Aim

To provide guidance and instruction on the technique for safe insertion of a urethral catheter for a child who requires intermittent urinary catheterisation in a school setting.

Risk

Failure to follow the correct procedure for the insertion of an intermittent urinary catheter places the child at risk of complications including trauma to the urethra, pain, and infection.

Background

Catheterisation is a method of draining urine via a catheter inserted into the urethra, past the sphincter into the bladder. The catheter may remain in place as an indwelling urinary catheter or be removed once the urine is drained. The latter is known as clean intermittent catheterisation and is the subject of this procedure. This procedure is required where an ongoing condition, such as a congenital or acquired spinal lesion or injury has resulted in a neurogenic bladder. Regular catheterisation is required to drain residual urine and reduce bladder pressure and therefore preserve kidney health.

Key Points

- Nurses performing the procedure must have completed CAHS-CH training.
- This procedure is to be undertaken in accordance with the student care plan which has been developed and signed by the parent/caregiver.
- The CAHS Chaperones for Intimate Procedures Policy is to be followed in accordance with local practice.
- If a client has a Mitrofanoff stoma, please contact your Clinical Nurse Manager for further information on catheter insertion requirements.
- Consider appropriate [Standard and Transmission Based Precautions](#)
- The principles of privacy and client dignity are to be adopted in all situations.
- Community health nurses must follow the organisation’s overarching Infection Control Policies ([Standard and Transmission Based Precautions](#) & [Aseptic Technique](#)) and perform [hand hygiene](#) in accordance with WA Health guidelines at all appropriate stages of the procedure.

Equipment

The parent/caregiver is required to supply the necessary equipment as identified by *.

- Clean trolley/clean work surface for sterile field as per [Aseptic Technique](#) Dressing pack/catheterisation pack
- Urinary Catheter (single use only), size specified on student care plan*
- Spare urinary catheter*
- Single use sterile sachet of water-soluble lubricant
- Sterile gauze
- 0.9% Sodium Chloride
- Clean single use non-latex gloves Sterile gloves as per [Aseptic Technique](#)
- Disposable wet wipes/towelettes (Packet identified for single client, catheter use only)*
- Clean urine receptacle e.g., kidney dish, jug
- Incontinence sheet, if required
- Waste bag
- Appropriate Personal Protective Equipment (PPE), supplied by Community Health (gown/apron, non-sterile gloves, mask and goggle or face shield).

Procedure ¹⁻³

Steps	Additional information
<p>1. Before commencing catheterisation:</p> <ul style="list-style-type: none"> • Check care plan to guide clinical care • Check the identity of the client • Explain the procedure to the client • Ensure the presence of a second person as a Chaperone/support person. 	<ul style="list-style-type: none"> • A signed care plan complies with consent policy. • Check identification as per <i>Client Identification</i> Procedure. • Nurses should check verbally with the child prior to the procedure. • Nurses will comply with the CAHS Chaperones for Intimate Procedures Policy.
<p>Prepare Equipment</p> <ul style="list-style-type: none"> • Perform hand hygiene • Clean work surface/trolley with detergent and allow to dry • Perform hand hygiene • Open dressing/catheterisation pack using aseptic technique • Add catheter and other sterile equipment to aseptic field 	<ul style="list-style-type: none"> • Refer to CAHS Aseptic Technique policy– standard aseptic technique.

Steps	Additional information
<ul style="list-style-type: none"> • Pour 0.9% Sodium Chloride into the bowl/tray in the sterile pack 	
<p>Position the client</p> <ul style="list-style-type: none"> • Position child in supine position. • If soiling evident, perform hand hygiene, don non-sterile gloves and clean area with soap and water/cleaning wipes. • Remove gloves and perform hand hygiene. • Place waterproof sheet beneath child's buttocks. • For females, position with knees bent and hips flexed. 	<ul style="list-style-type: none"> • As per CAHS <i>Hand Hygiene and Standard and Transmission Based Precautions</i> policy. • Use each wipe once only. • Use parent/caregiver supplied wet wipes intended for intermittent catheterisation. • These wipes need to be labelled 'catheter use only' and labelled with client's name. •
<p>2. Cleanse genital area & urethral meatus</p> <ul style="list-style-type: none"> • Put on sterile glove • Lubricate distal third of the catheter • Place the clean urine receptacle between client's thighs. • Female: <ul style="list-style-type: none"> ○ separate labia minora so that the urethral meatus is visualized. ○ Clean both the labia and around the urethral orifice with gauze swabs soaked in 0.9% sodium chloride, using single downward strokes from front to back. Repeat 2-3 times. Use each swab once only then discard. • Male: <ul style="list-style-type: none"> ○ Gently retract the foreskin, if necessary, until the urethral meatus is just visible. ○ Clean the glans penis with 0.9% sodium chloride moving in a circular motion from meatus outwards towards the base of penis. 	<ul style="list-style-type: none"> • **Non-sterile glove use: An experienced healthcare worker can perform catheterisation achieving asepsis, by managing Key-Parts individually, with the use of a main General Aseptic Field, Micro Critical Aseptic Fields, and non-touch technique. • Sterile glove use: However, less experienced healthcare workers may require a Critical Aseptic Field. • Use single use sachets of lubricant to reduce risk of cross contamination.

Steps	Additional information
<p>3. Catheter insertion</p> <ul style="list-style-type: none"> • Female <ul style="list-style-type: none"> ▪ Separate labia minora and gently insert catheter into urethral meatus until urine flows freely. • Male <ul style="list-style-type: none"> ▪ Using sterile gauze, hold the penis perpendicular to the body and gently insert catheter until resistance is felt, pause momentarily to let the external sphincter relax. ▪ Lower the penis and advance the catheter with constant gentle pressure until urine flows freely • Ask child to bear down if possible or apply gentle pressure to the lower abdomen when flow decreases, to express residual urine. • When urine flow ceases, slowly withdraw the catheter and discard in waste bag 	<ul style="list-style-type: none"> • If urine starts to flow again, pause removal of catheter and wait until the flow stops again.
<p>4. At the end of the procedure</p> <ul style="list-style-type: none"> • Ensure the clients genital area is clean and dry and put underwear / pads/nappy in place and make the child comfortable • Dispose of equipment and gloves, other PPE in waste bag • Perform Hand hygiene • Clean trolley/surface • Perform Hand hygiene • Document in client records 	

Documentation

Document the procedure in the client record. Nurses require to maintain an accurate, comprehensive, and contemporaneous documentation of assessments, planning, decision making and evaluations according to CAHS-CH processes.


Related policies, procedures and guidelines

The following documents can be accessed in the **Clinical Nursing Manual** via the [HealthPoint](#) link, [Internet](#) link

Clinical Handover - Nursing
School-aged health services
School-aged health services - primary
School-aged health services - secondary
Student Health Care Plans
The following documents can be accessed in the CAHS-CH Operational Manual
Client Identification
The following documents can be accessed in the CAHS Policy Manual
Chaperones for Intimate Procedures (CAHS)
Infection Control policy manual (CAHS)
Urethral catheterisation (PCH Clinical Practice Manual)
The following documents can be accessed in the Department of Health Policy Frameworks
Clinical Handover Policy (MP0095)
Clinical Incident Management Policy (MP 0122/19)

Related external resources
Catheter care – flushing a urinary catheter – Perth Children’s Hospital Health Fact sheet
References
<ol style="list-style-type: none"> 1. The Royal Children's Hospital. Indwelling urinary catheter - insertion and ongoing care. Clinical Guideline. In: Victoria HD, editor. Victoria, 2020. 2. Perth Children's Hospital. Urethral Catheterisation. Clinical Practice Manual. Perth: Child and Adolescent Health Services; 2021. 3. The Royal Children's Hospital. Teaching and supporting Clean Intermittent Catheterisation for parents and children. In: Victoria HD, editor. Victoria, 2019. 4. National Health and Medical Research Council. Australian Guidelines for the Prevention and Control of Infection in Healthcare. In: Canberra: Commonwealth of Australia, 2019

This document can be made available in alternative formats on request for a person with a disability.

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