

## **Clean Intermittent Catheterisation Skills Assessment Checklist: Girls**

Child's Name.....

Child's Form

Person Trained

Assessor .....

Assessor job title/contact details

## **Objectives:**

The person trained is able to demonstrate understanding of the reasons for catheterisation The person trained is able to show that they understand how to safely insert the catheter, drain the named child's bladder and remove the catheter

Action	Explanation Insert date	Demonstration Insert date	Observed and Competent Insert date and any comments
Confirm all equipment required is correct and accessible (All child's equipment to be kept in own lidded box) • Water soluble lubricant if needed • Catheter • Cleansing supplies • Container for urine if needed • Mirror (if used) • Gloves			
Confirm that location is available and suitable for the catheterisation			
Wash hands correctly for 15-30 seconds			
Put on gloves (Put on two pairs if child cannot wipe themselves)			
Prepare/open catheter, following manufacturer's instructions			
Position the child and involve them promoting independence as appropriate. (according to individual care plan)			
Prepare cleaning materials			
Open labia majora and minora			
Clean from front of folds to back of meatus			
Use each wipe once only. Repeat as necessary. Remove second pair of gloves if in situ.			

Hold the catheter about 3 inches (7.5cm) from the tip		
Insert lubricated catheter into the urethra with consistent pressure. Never force the catheter		
Stop inserting catheter when urine flows. Ensure catheter over the container or toilet		
When urine stops flowing insert catheter slightly more, rotate and then slowly withdraw the catheter. If urine flows again stop moving the catheter until the urine has stopped flowing		
Withdraw the catheter slowly when urine flow stops		
Measure and record urine volume (if required)		
Dispose of urine and catheter, clean equipment and put away unused equipment		
Help the child to dress (if required)		
Wash hands		
Communicate appropriately with the child throughout		
Record procedure and any observations		
Identify what would constitute a general cause for concern and how to respond e.g. child is unwell		
Identify what would be a cause for concern for this child and how to respond (as per individual care plan)		
Report any changes or concerns (as per individual care plan)		

Checklist content approved by specialist nurse/con	sultant (name)
Signature	Date
Contact details	
Checklist content seen and agreed by parent/carer	(Name)
Signature	Date

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