

Catheter Care Policy

City Care Southwest Ltd offers care and support services to adults over the age of 18 in their own homes. Our service is regulated by the Care Quality Commission (CQC) in relation to the regulated activity “Personal Care” and in accordance with the Health and Social Care Act 2008 and its associated regulations 2014.

Version Control

Date	New Version #	Made by	Changes/updates	Review Date
06/02/2025	V1.2023	Rhiannon		06/02/2026
19/01/2026	V2.2026	Rhiannon	Full review, some wording changes	19/01/2027

Statement and purpose of policy

City Care Southwest Ltd is committed to providing effective catheter care. This essential for maintaining our client’s health, preventing infections, and ensuring comfort. Many individuals, including those with mobility impairments, chronic conditions, or post-surgical needs, require catheter care as part of their daily routine. Proper handling minimises risks such as blockages, infections, and skin irritation.

City Care Southwest Ltd ensures that all staff supporting clients with a catheter in-situ, receive catheter care awareness training. Training includes a basic understanding of the urinary system, understanding the potential complications, infection control measures, and recognising when to seek medical support.

Only those staff who have completed this training and demonstrated their competency may undertake catheter-related tasks.

Scope

This policy applies to all staff responsible for providing catheter care to clients of City Care Southwest Ltd. Staff must only undertake catheter-related tasks if they have received appropriate training and demonstrated competency. Under no circumstances should untrained staff perform catheter care tasks. This policy should be read in conjunction with the Infection Prevention and Control Policy. Competency will be assessed through supervised practice and recorded on staff files, with refresher training provided as required.

This policy has been developed in accordance with guidance from:

- The National Institute for Health and Care Excellence (NICE)
- The Health and Safety Executive (HSE)
- The Department of Health and Social Care (DHSC)
- The Infection Prevention Society (IPS)
- The Royal College of Nursing (RCN)

All procedures outlined in this policy align with best practice recommendations from these advisory bodies to ensure the highest standards of care and infection prevention. This policy should also be read alongside the Care Planning Policy and Consent Policy.

Responsibilities

The Nominated Individual/Directors will:

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- Review this policy annually, or sooner as required.
- Conduct audits in line with the Quality and Governance Policy, including review of the effectiveness of this Catheter Care Policy in practice.
- Stay up to date with legislation, guidance, and best practice in relation to Catheter Care
- Undertake regular training as part of their continuing professional development.

The Registered Manager will:

- Implement this policy, ensuring that all staff read and understand it.
- Conduct audits in line with the Quality and Governance Policy, including review of the effectiveness of this Catheter Care Policy in practice.
- Undertake regular training as part of their continuing professional development.
- Stay up to date with legislation, guidance, and best practice in relation to Catheter Care

All staff will:

- Read and understand this policy.
- Attend regular, relevant training in Catheter Care
- Comply with the Catheter Care Policy
- Follow guidance and advice detailed in the client's care plan.

What is a Catheter?

A urinary catheter is a soft, hollow and flexible tube which is inserted into the bladder to drain urine. The catheter allows the bladder to continually drain urine and so it will have an external drainage bag or catheter valve attached to it.

A catheter is typically needed in situations where a person cannot urinate normally due to medical conditions or physical limitations. Some common reasons a catheter might be required include:

- **Urinary Retention:** When the bladder is unable to empty completely or at all, often due to conditions like an enlarged prostate, neurological disorders, or post-surgery.
- **Surgical Procedures:** During or after certain surgeries, particularly those involving the urinary tract, prostate, or bladder, a catheter may be used temporarily to drain urine while the patient is recovering.
- **Obstruction:** Blockages in the urinary tract, such as kidney stones or tumours, may require a catheter to bypass the obstruction and allow for proper drainage.
- **Neurological Disorders:** Conditions like spinal cord injury, multiple sclerosis, or stroke can affect bladder function, requiring a catheter for urine drainage.
- **Chronic Conditions:** Diseases like Parkinson's, dementia, or diabetes can affect bladder control, and a catheter may be necessary if other options are not effective.
- **Postpartum or Post-Surgery Care:** Women may need a catheter after childbirth if they have difficulty urinating. Similarly, people may need one after surgeries that affect the bladder or urethra.

Catheters are used temporarily or long-term depending on the individual's condition and medical needs. It is important to ensure proper care and monitoring to avoid complications such as infections.

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Risks associated with a Urinary Catheter

- **Urinary Tract Infections (UTIs):** Can occur if the catheter or drainage system is contaminated. Symptoms include fever, burning sensation, cloudy or strong-smelling urine.
- **Blockages:** May be caused by kinking, sediment buildup, or dehydration. Signs include reduced urine flow or bypassing of urine around the catheter.
- **Leakage:** Can be due to catheter displacement, bladder spasms, or blockage. Proper positioning and regular monitoring help prevent this.
- **Skin Irritation or Pressure Ulcers:** Prolonged contact with tubing or leakage can cause skin damage. Regular assessment and repositioning help prevent complications.
- **Discomfort or Pain:** Can result from improper positioning, an incorrect catheter size, or infection. Pain should always be reported and assessed.

Preventing Infection or Discomfort

- Encourage adequate fluid intake to reduce the risk of blockages and infections.
- Ensure daily personal hygiene, including cleaning the catheter entry point and the surrounding area with warm water and mild soap.
- Clean the meatus (the external urethral opening) daily to prevent infections.
- Regularly check for signs of leakage, redness, swelling, or irritation.
- Keep catheter tubing and drainage bags positioned to prevent kinks and pulling.
- Ensure proper hand hygiene before and after catheter care.
- Use alcohol wipes to sanitise connection points and equipment in line with infection prevention guidance.
- Ensure catheter bags never touch the floor.

Procedures for Catheter Care

Before undertaking any catheter care, staff must seek the client's consent in line with the Consent Policy and record this in Birdie.

Emptying a Leg Bag

1. Gather all required equipment, including a clean jug or bucket.
2. Wash hands and wear disposable gloves.
3. Hold the drainage outlet over the clean container.
4. Use an alcohol wipe to sanitise the drainage valve before opening.
5. Open the drainage valve and allow urine to flow out completely, ensuring the spout does not touch the container.
6. Close the valve securely after draining.
7. Use an alcohol wipe to sanitise the valve after closing.
8. Ensure the tubing is not kinked and positioned correctly.
9. Ensure the catheter bag never touches the floor.
10. Remove gloves, wash hands thoroughly, and document the procedure on Birdie.

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Changing a Leg Bag

Ensure the leg bag is drained prior to changing. Follow the emptying procedure.

1. Gather all necessary equipment before starting the procedure.
 - a. Clean container
 - b. Alcohol Wipe
 - c. New, sealed, Catheter Leg Bag
2. Wash hands and wear disposable gloves.
3. Ensure the new leg bag is sterile and undamaged.
4. Close/hold up the catheter valve before detaching the old leg bag.
5. Disconnect the old leg bag, taking care not to pull the catheter.
6. Use an alcohol wipe to sanitise the connection point before attaching the new leg bag.
7. Attach the new leg bag securely to the catheter.
8. Check for secure connections and proper positioning.
9. Ensure the catheter bag never touches the floor.
10. Dispose of the old leg bag according to infection control procedures.
11. Remove gloves, wash hands thoroughly, and document the procedure on Birdie.

Attaching a night bag

Ensure the leg bag is drained prior to attaching. Follow the emptying procedure.

1. Gather all necessary equipment, including an alcohol wipe and a clean container if required.
2. Wash hands thoroughly and wear disposable gloves.
3. Check the night bag packaging for any damage or contamination.
4. Use an alcohol wipe to sanitise the connection points.
5. Remove the protective cap from the night bag's connector.
6. Attach the night bag to the leg bag outlet, ensuring a secure connection.
7. Open the drainage valve on the leg bag to allow urine to flow freely into the night bag.
8. Position the night bag below bladder level to ensure proper drainage.
9. Ensure the tubing is not kinked and that the bag is supported to prevent pulling.
10. Ensure the catheter bag never touches the floor.
11. Remove gloves, wash hands thoroughly, and document the procedure on Birdie.

Detaching a night bag

Ensure the leg bag is drained prior to attaching. Follow the emptying procedure.

1. Gather necessary equipment, including a clean container if required.
2. Wash hands and wear disposable gloves.
3. Close the drainage valve on the leg bag before disconnecting the night bag.
4. Carefully detach the night bag without pulling on the catheter tubing.
5. Use an alcohol wipe to sanitise the connection point before sealing it.
6. Empty the night bag into the toilet and dispose of it as per infection control guidelines.

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7. Ensure the catheter bag never touches the floor.
8. Remove gloves, wash hands, and document the procedure on Birdie.

Catheter care records in Birdie form part of the organisation's governance and audit process. Catheter care will be reviewed as part of each scheduled care plan review, including the formal five-to-six-month review, or sooner if the client's needs change, complications arise, or medical advice is received. Where there are concerns about a client's capacity to consent to catheter care, staff must follow the Consent and Mental Capacity Policy.