

Invasive Procedures

SCOPE OF THIS CHAPTER AND OTHER RELATED CHAPTERS

This procedure applies to Children's Homes and Foster Homes, but the principles apply to the placement of all **Looked After** Children. Therefore, where Looked After Children are placed with Parents, Relatives or Friends or in placements outside the authority, the social worker must ensure these or other adequate procedures are applied.

The following guidance is available: Practices in Children's Nursing: Guidelines for Community and Hospital. Author's Sally Huband and Ethel Trigg ISBN No: ISBN 044305875X

[Community Protocol for Administering Medication using a Nebuliser Guidance.](#)

[Community Protocol for Clearing Upper Airway Secretions using Suction Guidance.](#)

[Community Protocol for Management and Feeding through a Gastrostomy Guidance.](#)

Invasive procedures include the following:

- a. Catheter care,
- b. Oxygen therapy,
- c. providing assistance with rectal medication such as diazepam,
- d. the inserting of suppositories or pessaries,
- e. injections,
- f. feeding through naso-gastric or gastrostomy tubes
- g. supporting physiotherapy programmes and the management of prostheses.
- h. tube feeding

Any arrangements for the health needs of the children must be made clear by the Social Worker within the LAC documentation.

Managers of both Residential and Foster Services must ensure that any invasive procedures being used are either by qualified health staff as an interim measure and/or only applied by competent staff, either trained or appropriately supported by qualified health staff and on the following conditions:

- with the written authority of a prescribing doctor or responsible nurse; who must provide the information and support outlined below;
- with the consent of a parent or person with **Parental Responsibility**;

The consent of the child should also be obtained. To undertake such procedures without the child's consent may be an assault but, in certain circumstances, the child's consent may be overridden; so long as the written authority of a medical practitioner and the consent of the parent/person with Parental Responsibility have been obtained.

Also see **Consents, Confidentiality and Information Sharing Guidance**.

Any processes used must be research based and approved by the Specialist Children's Nurse – Respite Services. The specialist Nurse will give authorisation which stipulates in writing, the following:

- a. the arrangements/procedures to be followed;
- b. whether the child requires any assistance, and who should give it;
- c. whether any person providing assistance has agreed and requires training or guidance.
- d. how the procedures will be recorded

These arrangements must be set down in writing, preferably in a **Placement Plan**.