**Protocol for organising Nursing Care Interventions for Disabled**

**Children using the Children with Disabilities, Short Breaks Fostering Service.**

**Information for Social Workers**

# Definition of Nursing Interventions

The following nursing care interventions required by individual children who are being cared for by a Foster Carer or Short Breaks Carer, may be carried out by the child’s carer once they have been shown to be a competent practitioner following appropriate training by a qualified nursing professional.

1. Gastrostomy feeding and care

1. Naso-gastric feeding and care

1. Basic stoma care, i.e. replacement and removal

1. Administration of rectal Diazepam

1. Administration of Buccal Midazolam

1. Administration of enemas

1. Administration of oxygen

1. Use of nebulisers

1. Oral suction

These will be referred to as approved nursing care interventions.

It is acknowledged by all parties that there will be some children who require nursing care interventions other than those listed above. In such circumstances, the nursing care interventions required by the child concerned will be confirmed at a discharge planning meeting when the child is in hospital, or if the child is in the community, at a case discussion. In the circumstances referred to in this clause, an interdisciplinary decision will be made to ensure that the foster carer and all agencies involved are in agreement that the nursing care intervention can be performed by the foster carer.

**This agreement should be subject to the following:-**

* + that it is based on an individual need
  + based on an individual nursing care plan or a multi-disciplinary assessment care plan
  + based on agreement across the relevant professionals and organisation
  + based on agreement by the foster carer to undertake the intervention
  + that training is given as part of the care plan by qualified nursing professional
  + that competency is tested by observation and/or discussion
  + that it is limited to that procedure for that child
  + that where there is shared care it may be necessary for a detailed plan of the nursing intervention to be made available for the foster carer and family.
  + that all Carers to be trained have Enhanced DBS clearance in place.
  + that Risk Assessments are in place where applicable e.g. Oxygen.
  + that where applicable due processes from the Complex Discharge Pathway are in place e.g. Timely discharge planning meeting to include formulation of an Interagency Care plan, Pre-discharge training of Carers as appropriate e.g. Basic Resuscitation, clinical skills etc.

**The Process**

When a match has been identified, a successful pre-placement visit has taken place, and the foster carer has confirmed they are willing to undertake a nursing care intervention, the following steps should be taken:

1. The child’s Social Worker will send the referral to the appropriate nursing team. An acceptance letter will be returned confirming the training can take place.
2. The Supervising Social Worker will send the Social Worker the **Identification of Procedure and Nursing Consent Form: Family Placement Medical Form 1.**
3. Section 1-5 should be completed with the child's parents and their signature obtained giving permission for the foster carer to carry out the procedure. Where a child is looked after consent should be given by the Children’s

Service Delivery Manager.

1. The form should than be sent to the Short Breaks Foster Carer.
2. The Social Worker should contact the relevant nursing service to arrange for the foster carer to be trained in the nursing procedure for the individual child.
3. When the short breaks foster carer has been trained in the relevant procedure a copy of the **Identification of Procedure and Nursing Consent Form: Family Placement Medical Form 1** should be retained by the foster carer with their records, a copy should be sent the relevant nursing service, a copy should be placed on the child’s file by the social worker, and a copy sent to the Supervising Social Worker to add to the short break foster carer’s file.

1. The relevant nursing service will provide the short break foster carer with the relevant training pack and contact numbers for any emergency.

1. If there is a change in the nursing care intervention or any additional procedures are necessary for the child, the carer **must** be trained again. Where nursing interventions are in place they should be discussed at each child care and foster carer review.

1. It is the primary care givers responsibility to inform the Foster Carer of any changes.

1. The Foster Carer must inform their supervisory social worker of any changes, who will initiate the necessary procedures to cover the new situation.

# Relevant Nursing Service

1. If the child is known and currently visited by Leeds Community Children’s

Nursing Team based at Hunslet Health Centre, 24 Church Steet, LS10 2PT, 0113 2761294. Arrangements should be made for the nurse who knows the child to carry out the training.

1. If the child attends a Specialist Inclusive Learning Centre arrangements should be made for the school nurse who knows the child to carry out the training.

1. If the training is required for Administration of rectal Diazepam or Buccal Midazolam this may be carried out by the specialist epilepsy nurse who knows the child.

1. If the child is in a mainstream school and unknown to the services above the School Nurse Coordinator should be contacted to advise who the relevant professional would be.