

# The Management of Enteral Feeding in Domiciliary Care Settings.

August 2011

## **1. Introduction**

In recent years, the use of enteral feeding tubes has become increasingly common in the community for those unable to swallow.

The most common type in use is percutaneous endoscopic gastrostomy (PEG) tubes.

The Regulation and Quality Improvement Authority (RQIA) has had requests for advice and guidance on whether it is appropriate for care workers to undertake any tasks in relation to their use.

This document is written to help registered managers make an informed decision regarding any role staff may undertake.

## **2. Legislative framework**

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

- Regulation 13

The registered person shall ensure that no domiciliary care worker is supplied by the agency unless -

- (b) he has the experience and skills necessary for the work that he is to perform

- Regulation 14

'Where the agency is acting otherwise than as an employment agency, the registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided-

- (a) so as to ensure the safety and well-being of service users.

### **3. Guidelines**

- Domiciliary Care Agencies Minimum Standards, Department of Health, Social Services and Public Safety (July 2008)
  - Standard 12: Staff are trained for their roles and responsibilities.
- Guidelines for the Management of Enteral Tube Feeding in Adults, Clinical Resource Efficiency Support Team (CREST) (2004)
- Essential Steps to Safe, Clean Care - Enteral Feeding, Department of Health (2006)
- Gastrostomy Tube Insertion and Aftercare (For Adults being Cared for in Hospital or in the Community), NHS Quality Improvement Scotland (2008)
- Nutrition Support for Adults Oral Nutrition Support, Enteral Tube Feeding and Parenteral Nutrition, National Institute for Clinical Excellence (NICE) (2006)
- Managing Patients with a PEG, Digestive Health Foundation, Medicine Today, Sept 2006, Vol. 7, No 9.

#### **3.1 CREST Guidelines**

The CREST Guidelines for the Management of Enteral Tube Feeding in Adults (2004) were developed by a multidisciplinary group to improve the effectiveness and efficiency of clinical care.

#### **Definition**

“Enteral feeding means using the gastrointestinal tract for the delivery of nutrients, which includes eating food, consuming oral supplements and all types of tube feeding. This method of feeding has resulted in a range of different routes and systems for delivery of nutrition, and more patients are now being fed by home enteral feeding tubes in the community setting (DH, 2006). A gastrostomy tube is placed through a surgically formed fistula in the abdominal wall into the stomach. Many types of gastrostomy tubes are available; the most commonly referred to is the Percutaneous Endoscopic Gastrostomy (PEG).” (NHS Quality Improvement Scotland, 2008)

The CREST guidelines have highlighted the importance of ensuring that there is safe administration of the enteral feed, and that there is appropriate management of both the effects and the potential side effects of enteral tube feeding. The document identifies a number of risks which are associated with enteral feeding, and highlights mechanisms to minimise these effects occurring.

## Training for Carers

The CREST guidelines advise that:

“Patients and/or carers must be trained so they are able to carry out enteral tube feeding with confidence, in the simplest, safest and most effective way. They should be able to recognise potential problems and know the route to solving them.”

They also supply guidance on the competencies of any professional who acts as a trainer for care staff.

### 3.2 NICE Guidelines

The NICE guidelines advise that:

- All people in the community having enteral tube feeding should be supported by a coordinated multidisciplinary team, which includes dietitians, district, care home or homecare company nurses, general practitioners (GPs), community pharmacists and other allied healthcare professionals (for example, speech and language therapists) as appropriate.
- Close liaison between the multidisciplinary team and patients and carers regarding diagnoses, prescription, arrangements and potential problems is essential.
- Patients in the community having enteral tube feeding and their carers should receive an individualised care plan which includes overall aims and a monitoring plan.
- Patients in the community having enteral tube feeding and their carers, should receive training and information from members of the multidisciplinary team on:
  - the management of the tubes, delivery systems and the regimen, outlining all procedures related to setting up feeds, using feed pumps, the likely risks and methods for troubleshooting common problems and be provided with an instruction manual (and visual aids if appropriate)
  - both routine and emergency telephone numbers to contact a healthcare professional who understands the needs and potential problems of people on home enteral tube feeding
  - the delivery of equipment, ancillaries and feed with appropriate contact details for any homecare company involved.

#### **4. Assurance Required by RQIA**

In order to ensure safe practice, the health and social care (HSC) trust commissioning the service has responsibility for allocating sufficient time for care staff (specifically trained and competent) to monitor and supervise the service user receiving enteral tube feeding in their own home.

The domiciliary care agency must provide evidence that domiciliary care staff are competent to care for and have adequate time allocated to monitor and supervise the service user receiving enteral tube feeding.

Evidence should include policy and procedures written in conjunction with the trust on:

- care and management of service users with enteral feeding
- care and management of administration of feeds to service users
- understanding and management of complication/risks associated with enteral feeding
- training and competency assessment for domiciliary care staff in all aspects of enteral tube management as defined by NICE and CREST
- documentation which demonstrates person centred, holistic care of service users

It must be noted that care workers should not be involved in the administration of any medicines through enteral feeding tubes unless they have received individualised training for the service user and have been deemed competent to undertake the task by a healthcare professional.

#### **5. Further Information**

For further information or advice, please contact the RQIA care inspector with responsibility for the registered facility or RQIA's senior pharmacist inspector by telephone at: (028) 9051 7500, or email: [info@rqia.org.uk](mailto:info@rqia.org.uk).



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