

Title	ACIA 028- Guideline for the Management of Enteral Feeding in the Community
Purpose	<p>This guideline is to assist:</p> <ul style="list-style-type: none"> • Service providers (organisations and individuals), participants, stakeholders and funders • The management of safe and acceptable enteral feeding in the community by support workers
Background	<p>Historically in Australia, most nursing care or support services were delivered in the acute hospital setting and in the community by registered nurses. However, the past two decades has seen unprecedented growth in the amount and type of support being provided in the community. Factors contributing to this shift have been technological advances; changing expectations of participants who wish to remain in their own environment wherever possible; hospital beds and workforce shortages and the recognition by health professionals that it is safer in the community rather than a hospital due to infection control issues and risks.</p> <p>The Community Service and Support Industry has grown, and a review of the competencies required to deliver safe support services has led to significant shifts in nursing, care and service delivery practices, particularly in the community.</p> <p>There are numerous clinical guidelines on best practice written by government departments that address aspects of these changes. Where available, these have been used as source documents for these guidelines (and are listed at the end of the document).</p> <p>However, clarification is still required regarding specific duties, tasks and intervention provided in the community. Specifically, guidance is needed regarding duties, tasks and interventions that must be undertaken by a registered nurse and consequently, tasks that may be undertaken by community support workers having achieved specific competencies.</p> <p>This guideline provides clarity around the roles of the support worker, service provider and registered nurse in the delivery of enteral feeding in the community. This is important as service users in the community with a Nasogastric Tube (NG) / Percutaneous Endoscopic Gastrostomy- Jejunum or Duodenum (PEG) feeding tube in use as part of their clinical care needs are at significant danger of blockages, dislodgement, infection, allergic reaction, dehydration, weight gain/loss and poor chest health.</p> <p>Management of enteral feeding is an intervention to ensure that a participant receives ongoing adequate nutrition to maintain health. Replacement of an enteral feeding tube e.g.: Nasogastric Tube (NG) / Percutaneous Endoscopic Gastrostomy- Jejunum or Duodenum (PEG) feeding tube is high risk and should only be done by a health practitioner/registered nurse.</p>

	<p>In some cases, support workers, with competency training may initially respond when an enteral feeding tube becomes dislodged. This is only appropriate when the balloon device tube is in position and stable (after the initial tube has been replaced by balloon device), and there is active oversight by a health practitioner. This intervention is usually performed by registered nurse or health practitioner.</p> <p>Furthermore, as service user involvement and service direction has increased it is imperative to involve the service user in all aspects of their service delivery and the direction of their services to their ability. It is further acknowledged that dignity of risk is an important part of this choice and control.</p>
Scope	<p>This guideline applies to the provision of paid support and nursing service delivery in the community. They are relevant Australia-wide or when a participant is travelling oversea with their Australian team of support worker/s.</p>
Disclaimer	<p>This guideline is provided to help guide best practice in the community service and support industry. This information does not in any way replace legislative, regulatory or contractual requirements. Users of this document should seek appropriate expert advice in relation to their particular circumstances. ACIA does not accept any liability on the use of this guideline.</p>
Desired Outcome	<ul style="list-style-type: none"> • To maintain a quality and safe standard of care • To reduce confusion as to when it is appropriate to use trained support workers to provide enteral feeding to service users in the community • To ensure the safe introduction of food via an enteral tube according to plan whilst monitoring rate and flow of feeding • To prevent infection
Definitions and Supporting Information	<p>Community Supports and/or Services is defined as the provision of paid supports and services in a service user's home or community. It includes but is not limited to, the following activities of daily living:</p> <ul style="list-style-type: none"> • personal care or support • housework or domestic assistance • transport assistance • community access • social support • nursing services • clinical supports • gardening and home maintenance • palliative care • respite care <p>A Support Worker is an individual who assists or supervises a participant to perform tasks of daily living to support and maintain general wellbeing and enable meaningful involvement in social, family and community activities in the person's home and community.</p>

The **Support Worker** is a paid person who has access to education, support and advice from the **Service Provider** line manager or team leader. The **Support Worker** has been commonly known as attendant care worker, disability worker, aged care worker, community worker, homecare worker, care worker or paid carer.

Service Providers are an organisation or a person who are funded for the delivery of supports and services to participants.

Carer is a person that provides supports to the service user at no cost (generally family or friend).

Enteral Feeding means a method of supplying nutrients directly into the gastrointestinal tract.

Competent means having been trained and assessed by a registered nurse or enrolled nurse or approved assessor as competent to safely and appropriately perform a specified task.

Infection Control means infection prevention and control measures aim to ensure the protection of those who might be vulnerable to acquiring an infection both in the general community and while receiving care due to health problems, in a range of settings. The basic principle of infection prevention and control is hygiene.

Medication means any substance which is supplied by a pharmacist or doctor or dispensed by a pharmacist on the prescription of a doctor, or supplied directly by the doctor, and has a label attached to it. The term also includes any over the counter medication or natural therapy products.

Participant means the client, consumer or person receiving the nursing or support.

Plan means a support plan this is a document developed in response to a request for service. It is developed by a registered nurse (or other appropriately, similarly skilled professional) from the service provider, prior to the commencement of service delivery. It outlines the expected outcomes of the requested care/services and the tasks, duties and interventions required to meet the care and service needs of the service user (within the parameters of the funding program). The plan guides and directs the individual support worker or registered nurse in their day-to-day delivery of the services.

Registered Nurse means a person who has completed the prescribed educational preparation, demonstrated competence for

	<p>practice, and is registered and licensed with the Australian Health Practitioner Regulation Agency (AHPRA) as a registered nurse.</p> <p>Support Worker Competency means a support worker who has been trained and assessed as competent by a registered nurse, enrolled nurse or approved assessor to safely and appropriately perform a specified task as a support worker.</p>
<p>Guideline/ Policy</p>	<p><u>Service Provider</u></p> <p>As a part of any support service delivered by support workers the service provider will:</p> <ul style="list-style-type: none"> • Assess initial support needs with the participant also -considering their psychological needs and engaging with the participant to access specialist help/advice (if necessary) • Determine the scope of enteral feeding care that the support worker may attend • Develop plans with identified outcomes, the person developing the plan with the participant MUST be trained and deemed competent to develop a support plan • Provide written procedures to guide the support worker re the care of a participant with a peg feed in relation to: - <ul style="list-style-type: none"> - escalation of unexpected issues such as -weight gains or losses, - dehydration - allergic reactions - poor chest health - malfunction in the enteral tube (blockage/dislodgement/leak) - dysreflexia - infection control • Identify education needs for support workers. Provide relevant competency-based education and assessment processes for the support worker/s to ensure they are competent to perform the prescribed duties, tasks, interventions and escalation in relation to incidents • Provide access to infection control guidelines/policies and procedures in addition to adequate supplies of personal protective equipment (PPE) to assist the support worker in minimising the risk of infection when providing support to the service user who has an enteral feeding tube

	<ul style="list-style-type: none"> • The support plan for care and management of an enteral feed should be clearly documented in the participant’s home and only changed following regular review by a medical practitioner or a registered nurse. Related policies and procedures should be made available to support workers • Monitor, review, evaluate and adapt support plans as required for the service, with the involvement of the participant <p>It is recommended that support worker duties be delivered under the direction and supervision of a registered nurse</p> <p><u>Service by a Registered Nurse</u></p> <p>A paid Registered Nurse is required to:</p> <ul style="list-style-type: none"> • Change the enteral feeding tube within the specified timeframe, document and report any changes by exception <p><u>Support Workers</u></p> <p>Support workers <u>may NOT</u>:</p> <ul style="list-style-type: none"> • Perform any duties that must be attended to by a registered nurse (as outlined above) <p>Support Workers <u>may</u>:</p> <p>Perform any task on the plan, apart from those that must be performed by a registered nurse (or other suitably assessed person), after having completed competency training and being signed off as competent in the task by the service provider.</p> <p>Support workers <u>must</u>:</p> <ul style="list-style-type: none"> • Follow the support plan as provided by the service provider • Report to their supervisor any changes or variations for advice and guidance • Escalate any concerns to the service provider/registered nurse /Doctor immediately • Not change or deviate from the plan • Identify, and report to their supervisor, any gaps in their ability to deliver the required service including difficulties in completing the tasks within the allocated time
<p>Resource Documents</p>	<p>ACIA Capability Framework</p> <p>NDIS Practice Standards: Skills descriptors July 2018 V. 1</p>

<p>https://www.ndiscommission.gov.au/sites/default/files/documents/2018-09/high-intensity-skills-descriptors.pdf</p> <p>Agency for Clinical Innovation NSW Gov</p> <p>https://www.aci.health.nsw.gov.au/resources/nutrition/hen/hen-clinicians</p> <p>https://www.aci.health.nsw.gov.au/_data/assets/pdf_file/0007/171817/ACI-Guidelines-for-HEN-services-2nd-Ed.pdf</p> <p>NCBI: Nutrition Support for Adults: Oral Nutrition Support, Enteral Tube Feeding and Parenteral Nutrition.</p> <p>https://www.ncbi.nlm.nih.gov/books/NBK49253/</p> <p>ACIS Standard 2018</p> <p>Dieticians Association of Australia</p> <p>https://www.pc.gov.au/_data/assets/pdf_file/0010/230986/sub034-disability-agreement.pdf</p> <p>Victoria State Government</p> <p>https://www2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/standard-additional-precautions</p> <p>Department of Health</p> <p>https://www1.health.gov.au/internet/publications/publishing.nsf/Content/cda-cdna-norovirus.htm-l~cda-cdna-norovirus.htm-l-8</p> <p>The National Health and Medical Research Council</p> <p>https://www.nhmrc.gov.au/about-us/publications/australian-guidelines-prevention-and-control-infection-healthcare-2010</p>
