



- Only staff trained by an Appropriately Qualified Health Professional (AQHP) can perform this procedure.
- This procedure is a guide only and may not be appropriate in all circumstances. Therefore, instructions from an AQHP must always be obtained and followed.
- This procedure should be read with the <u>NDIS LWB 5600</u> <u>High Intensity Daily Personal Activities - Procedure, NDIS</u> <u>LWB 5629 HIDPA Administration of Medication via Enteral</u> <u>Feeding Tube - Procedure, NDIS LWB 5628 HIDPA</u> <u>Enteral Feeding Gastrostomy - Procedure, NDIS LWB</u> <u>5501 Health and Wellbeing – Procedure, Medication</u> <u>Administration Procedures</u> and in consultation with the person we support or their Enteral Feeding Support Plan.

The person's support requirements must be documented by an AQHP, such as an Accredited Practising Dietitian (at minimum) in a HIPDA Enteral Feeding Support Plan. Additional information may be listed in the Mealtime Management Plan.

The AQHP is to provide training in any pump feed that is required and that is in the scope of practice of a Disability Support Worker (DSW).

IMPORTANT:

- If the gravity feed is administered through a Nasogastric Tube or a Gastrostomy Feeding Tube, a trained and competent worker must fully supervise it for the entire feed duration and duration specified afterwards, as stated in the procedure and Enteral Feeding Plan.
- NDIS LWB 5627 HIDPA Enteral Feeding Nasogastric Tube NGT Procedure.
- For Gastric Venting, see the <u>NDIS LWB 5628 HIDPA Enteral Feeding Gastrostomy</u> Procedure.





Gravity Feed Procedure

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• Check and follow the person's Enteral Feeding Support Plan for positioning, flush amounts, volume, and feed rate.

NDIS LWB 5622 HIDPA Gravity Feed - Procedure.docx POLICY-699020591-11232 Version: 14.0 Approved By: Theo Gruschka Approved: 11/09/2023

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- Check that the required equipment and consumables are available and ready for use.
- Check the label and date of the enteral nutrition product to be used.
- Confirm how the person would like to be actively involved in their support, as outlined in their plan, and to the level they choose.
- Explain the procedure to the person and seek their consent to proceed.
- If gravity into the nasogastric tube– follow the <u>NDIS LWB 5627 HIDPA Enteral Feeding</u> <u>Nasogastric Tube (NGT) – Procedure</u> and instructions listed in the Enteral Feeding Plan.

Support

- If a feeding tube becomes displaced or removed Support workers should not attempt to replace the tube. Instead, immediately call for emergency (000) medical assistance.
- Check the placement of the Enteral feeding tube. Do not give feed into a dislodged tube.
- Wash hands with soap and water and dry well. Ensure good hygiene techniques when giving feeds.
- Staff must wear the appropriate PPE (gloves, mask and eye protection) when preparing formula and tube feeding. Refer to the <u>NDIS LWB 5507 Let's Talk About</u> <u>PPE for Support Activities</u> for the correct PPE requirements.
- Prepare enteral nutrition product and equipment in a clean area.
- Gravity feeds are usually given over 15-30 minutes, using a giving set (extra tubing) with the ready-to-hang-formula bag or re-usable enteral feed container hung at least 50cm above the person's head. The formula flows down the tube due to gravity, with the flow rate being adjusted by a clamp on the giving set at a rate described in the Enteral Feeding Support Plan.
- Actively involve the person in their support, as outlined in their plan, and to their chosen level.

Preparing to give the feed:

- Prepare the enteral nutrition product and equipment in a clean area.
- Gather the equipment:
 - Giving set or extension set tubing if required and ready to hang formula bag/container or gravity feed container
 - 50ml enteral syringe with ENFIT connection
 - Pole to hang the feed container (or other devices such as hook on a wall)
 - Water for flush (pre-measured amount)
 - The required amount of formula at room temperature (check the expiry date and time, tip the bottle/can to mix the formula, and wipe the top of the bottle/can to clean it before use)
 - Medication and medication equipment if used at the time of feed (See Medication via Enteral Feeding Tube Procedure

Do not Warm the formula in a microwave or in boiling water due to the risk of burns to the person we support

- If the formula is pre-prepared or stored in the refrigerato allow it to reach room temperature before use (e.g. 15-20mins).
- If continuing an enteral feed using leftover product in an gravity feed container or ready to hang bag, wipe the connector, reseal and refrigerate immediately to reduce risk of contamination and spoilage. Discard any opened feed that has been unused within 24 hours.

Giving the Feed:

• Explain the procedure and position the person semi-reclined or upright, according to the Enteral Feeding Support Plan, with the upper body elevated to at least 45 degrees for the duration and following the feed/flushing as listed in the Enteral Feeding Support Plan to reduce risk of aspiration.

Example Position for Feeding

- For flush amounts and volumes and advice on feeding tube access ports, refer to the Enteral Feeding Support Plan.
- Ensure the tube is clamped. Attach the giving set (tubing) to the ready-to-hang formula bag or gravity feed container and hang the bag/container on the pole at a level above the person's head. NOTE: Do not hang directly over the person's head to reduce the risk of injury.
- Open the clamp to squeeze the drip chamber of the giving set until it is one-third full of feed.
- Prime the rest of the tube by opening the clamp of the giving set and letting the formula run to the end of the line, then close the clamp to stop it leaking.
- Unscrew the cap on the port labelled feed on the feeding tube and attach the primed extension tube if required. Reclamp the tube to prepare for water flush.
- Attach a 50ml syringe to the tube port marked Flush. If no flush port is available, connect to the Feed port.
- Fill the syringe with the set amount of water to flush, release the clamp and allow the water to flow down the tube.
- Connect the primed giving set to the feed port on the feeding tube.
- Open the clamp and allow gravity to run the feed using the clamp to control the flow rate.
- Once the feed is finished, clamp the giving set and remove it.
- Flush the feeding tube with the set amount of water.

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- Ensure the person is comfortable and monitor for signs of discomfort. Maintain the person in a position with their upper body elevated for at least 30 minutes post-feed.
- If a Ready to Hang Formula bag is used instead of a gravity feed container, replace cap and store according to instructions. Dispose of packaging when empty.
- Wash reusable equipment promptly in warm water and detergent and hang it to dry. Over time the inside of the tubing will become rigid and coated with residue from the formula. Therefore, the tubing should be replaced regularly per the person's preferences or as documented in their support plan.
- Remove your gloves and wash your hands.

E Report

- Document feeds in the <u>NDIS LWB 5623a HIDPA Enteral Feeding and Management -</u> <u>Daily Recording Chart</u>
- Gastric fluid leaking from the stoma should be reported immediately in i-Report and to Disability Support Leader¹ or On Call.
- Report any concerns or issues related to the person's enteral feed or stoma care immediately to the Disability Support Leader or On Call.

For Further Guidance and Advice

Contact the AQHP who developed the person's support plan.

¹ All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor.