



## **Enteral tube feeding Audit Tool for Care Homes**

Standard: Enteral tube feeding is performed by a trained person and delivered eliminating the risk of microbial contamination.

Action

- This audit tool should be completed annually by the Manager or Lead person for Infection Prevention and Control.
- Additional training must be given when changes to procedures or devices are introduced.
- In the event of non-compliance, action plans should be produced and reviewed regularly.
- Completed audit tools should be kept locally for good practice assurance and as evidence for CQC inspections.

Name of person being assessed	Job title	
Name of assessor	Date of assessment	

Question		Evidence	Yes	No	N/A	Comments	
Mar	Management						
1.	Can the staff member identify where to find the Care Homes policy for the management of enteral feeding?	Check policy, e.g. Enteral tube feeding Policy for Care Home settings.					
2.	Is the staff member trained in the preparation and administration and management of enteral tube feeding?	Check training records. Observe practice.					
Clinical practice							
3.	Is hand hygiene performed prior to any manipulation of the enteral tube feeding system?	Observe practice.					
4.	Is an aseptic technique used when connecting the giving sets to the enteral feeding tube?	Observe practice.					
5.	Is a disposable apron worn prior to manipulating the enteral feeding system?	Observe practice.					
6.	Are disposable gloves worn prior to manipulating the enteral feeding system?	Observe practice.					

Question		Evidence	Yes	No	N/A	Comments	
7.	Is hand hygiene performed immediately following the removal of each item of personal protective equipment (remove gloves first)?	Observe practice.					
	Unless advised differently by the enteral tube manufacturers or a healthcare professional (the alternative advice should be documented in the resident's care plan):						
8.	Is an aseptic technique used for the care of the insertion site of an ostomy tube for the first 48 hours after insertion?	Observe practice.					
9.	Are sterile dressings used for ostomy feeding tube sites for the first 48 hours?	Observe practice.					
10.	Is the ostomy feeding tube site washed daily with soap and water and dried thoroughly?	Observe practice.					
11.	After 48 hours, are non-sutured gastrostomy tubes rotated 360° weekly?	Observe practice or ask a member of staff to describe the procedure.					
12.	Is the staff member aware of the need for microbiological swabs to be taken when there are signs of infection?	Ask a member of staff about practice.					
Adr	ninistration of feeds						
13.	Freshly drawn water is used to flush enteral feeding tubes for residents who are not immunocompromised.	Observe practice.					
14.	Sterile water is used for residents who are immunocompromised.	Observe practice.					
15.	If sterile water is used, is it labelled with the resident's details, the time and date opened.	Check bottle.					
16.	Once opened, is sterile water discarded after 24 hours?	Check date and time on the bottle is within 24 hours.					
17.	Is the feed within its expiry date?	Check expiry dates.					
18.	Is the feed labelled with the resident's details, time and date opened?	Observe practice.					
19.	Are single pre-packaged feeds discontinued within 24 hours?	Observe practice.					
20.	Are giving sets changed following each feed?	Observe practice.					

Qı	estion	Evidence	Yes	No	N/A	Comments	
M	Management of equipment						
21	Are syringes either single use and disposed of, or single patient use ones are cleaned with warm water and pH neutral detergent, rinsed and dried after use?	Observe practice or ask a member of staff to describe the procedure.					
22	Are single use items disposed of following use?	Check a selection of equipment, e.g. giving sets, medicine pots or observe practice.					
23	Are feeding pumps visibly clean and ready for use?	Check pumps.					

## Acknowledgement

Infection Prevention Society Clinical Practice Improvement Tool: Enteral Feeding

## References:

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