

HELPING TO MANAGE PUMPS FOR ENTERALLY FED PATIENTS IN HOSPITALS DURING COVID-19

Nutricia recognises that hospitals and health services across Australia and New Zealand are putting contingency plans in place to support the COVID-19 pandemic. We would like to assure you it is our utmost priority to support these services where possible, so hospitals and health services are able to provide patients with the nutritional support they need.

The preparation measures being put in place by hospitals due to the escalation of COVID-19 cases has meant there is an increase in demand for enteral feeding pumps. While we are putting in place measures to protect the existing pool of pumps currently in Australia and New Zealand, we have also discussed with health services and dietitians alternative ways you can support your enterally fed patients during this period.

In this communication we have focused on how patients are enterally fed and managed in hospital and on discharge, which is particularly important considering the increase demands for enteral feeding pumps ahead.

MANAGING PUMP RESOURCES

MUST DO's before requesting more pumps especially in times of high demand:

- **Locate all pumps in your ward/hospital/community setting and check they are ready for use. Any that are not required, not working or due for service need to be sent back to Nutricia so they can be serviced, cleaned and redistributed as soon as possible**
- Liaise with any internal stakeholders (i.e. Nursing, Biomedical Engineering) for a process moving forward to ensure pumps that are no longer being used by a patient are cleaned and recirculated as quickly as possible.
- Check with your HEN Dietitians to ascertain if there are any home patients that have a pump that is no longer in use or are using multiple pumps and may be able to manage with only one pump. For example, is a home patient no longer being enterally fed; or are any extra pumps allocated to other family member locations/schools etc. that are now unlikely to be used in the short term. Again, please request a return to Nutricia so they can be redistributed as soon as possible
- Prioritise which patients will continue to require a pump and identify those groups that can be fed alternatively in the hospital. We recommend that enteral feeding pump priority be for patients in the intensive care unit (ICU).
- Ensure there is no more than one pump per bed. If additional water is required, ideally recommend this is delivered via syringe bolus method.

- Ensure all ward staff have a basic knowledge of all methods of feeding (including syringe bolus and gravity drip) and pump operation; get patients involved in self-care as this can help to ensure swift discharges and any follow up training can happen in the community.
- Consider other alternatives to pump feeding as first line management for ward patients and those being discharged home e.g. syringe bolus feeding, gravity feeding.

Options to consider if pumps are limited in a hospital setting or upon discharge:

- For less severely ill patients, use pump sharing in 12-hour shifts, i.e. using a pump for more than one patient; Ensure pumps are cleaned between each patient according to hospital infection control guidelines
- Consider running water and feed together via a 2-Pack connector or increasing frequency/volume of water flushes if extra fluids are required rather than using two pumps for one patient
- Have a single mobile pump at ward level for ad hoc situations, for example to dispense bolus feeds over an hour period or when gravity feeds may have underrun, and a faster rate is required to meet needs in 24hours. Ensure pumps are cleaned between each patient as per Infection Control policy.

Alternative feeding methods that can be considered during peak demand:

Nutricia recommend that syringe bolus feeding is the preferred alternative method where a pump is unavailable, or you are prioritizing for other patients. This is because it can be easily managed and requires little equipment. Gravity feeding via a gravity feeding set is another method of enteral feeding if bolus feeding is contraindicated. Please contact your Nutricia Key Account Manager for information on Nutricia Flocare® gravity drip set availability if you are considering this.

Bolus feeding (via a syringe)

Bolus feeding via a syringe can be deployed where pumps are prioritised for other patients:

- Consider if other staff (including Dietetic staff) can be trained on how to syringe bolus feed both from an Oral Nutritional Supplement bottle or an OpTri bottle/Pack in the event a pump is not available on a ward
- Consider patients that are younger and more mobile patients/carers for discharge on bolus feeding. Could they even be trained to administer their own boluses at ward level to minimize nursing intervention?
- Nutrison and Nutrini/Tentrini OpTri bottles don't always require a Bolus Adaptor and can be easily decanted into syringes (use a 60ml syringe) or Flocare® container with gravity feeding set where available
- For patients being discharged home, consider a bolus feeding regime for those patients/carers:
 - With no dexterity issues
 - Able to tolerate the bolus volumes

- Who do not want to work the technology of a pump
- Who may want to mimic more normal eating and drinking routines +/- or want to be more mobile
- Always read the instructions to ensure you follow storage guidance once a Pack or Bottle is opened

Resources on how to bolus feed for staff and/or patients, will shortly be available via the Nutricia website. In the interim, please contact Nutricia NurseConnect via email nurseconnect@nutricia.com

Gravity feeding (via a gravity feeding set)

While we appreciate that gravity feeding sets are not as accurate as pump feeding, they are still useful to consider for patients who can be fed continuously via enteral feeding. If you are reserving your pumps for the most severely ill patients, consider gravity feeding for more medically stable, ward-based patients.

- Training may be required for healthcare staff and/or patients/carers at home since gravity feeding is less frequently initiated
- Patients to consider for gravity feeding are:
 - Those that require continuous feeding who are not critically ill
 - Those that can be fed over a longer period
 - Those that are unsuitable for bolus feeding, e.g. dysphagic patients at risk of vomiting on bolus feeds
 - Patients that have shown signs of gastro-intestinal intolerance, e.g. nausea, vomiting, diarrhoea when using bolus feeds.

Gravity feeding is generally unsuitable for paediatric patients and patients who are volume sensitive.

Resources on how to bolus feed for staff and/or patients, will shortly be available via the Nutricia website. In the interim, please contact Nutricia NurseConnect via email nurseconnect@nutricia.com

What about hygiene issues at ward level with devices?

- Ensure pumps are cleaned after every use in line with local Infection Control guidelines
- Follow your local hospital guidance or speak with your Infection Control team if you are in any doubt around how to manage pumps +/- or enteral feeding in general.

If you have any questions about this advice, please contact Nutricia's NurseConnect Team via email nurseconnect@nutricia.com or phone on 1300 557 397

If you have any questions about Nutricia pumps, please contact Nutricia's Pump coordinators via email pumpsau@nutricia.com or phone on 1800 060 051