

Trainee Name:

Child's Name/DOB:

**Nasogastric Feeding:
Preparation & Administration
via Pump: Initial Competency:**

Minimum of TWO supervised practices to be supervised by a person who has previously been assessed as competent or by a Registered Nurse (RN).

Number & Action	Date of Initial training session:		Date of Supervised practice:		Date of Supervised practice:		Date of assessment of competence:	
	RN sign	Trainee sign	RN sign	Trainee sign	RN sign	Trainee sign	RN sign	Trainee sign
1 Trainee can explain the reasons why some individuals may require enteral tube feeding								
2 Trainee can explain: -Process of preparing the feed - Importance of good hand hygiene -Length of time the feed can hang, how often the giving set needs changing and troubleshoot any difficulties								
3 Trainee can identify & explain specific risks associated with this procedure(ie. potential of milk aspiration or tube displacement) -What to do if the nasogastric tube becomes dislodged and if the child coughs/chokes/gags/vomits or changes colour during feeding								
4 Trainee can identify & explain: -correct confirmation of nasogastric tube placement, -why and when to check placement -how to check length of tube								

	-acceptable Ph readings to confirm gastric placement and action to take if unable to obtain aspirate								
5	<p>Trainee can confidently and safely:</p> <ul style="list-style-type: none"> -Prepare feed and set up pump -correctly position child at a minimum 30-degree angle to minimise risk of oesophageal reflux -prime the feed set -set rate and volume on pump as per feed regimen -manage pump alarms 								
6	Trainee can explain and demonstrate the need to flush the tube with water before and after feed and air flush at end.								
7	On completion of feed Trainee is aware of standard precautions of infection control and can demonstrate appropriate procedure for cleaning reusable items and disposal/recycling of non -reusable items.								

Action plan/comments

Trainee and Nurse Assessor must sign below prior to carrying out nasogastric feeds without supervision

Trainee	Print name, signature & date	Nurse assessor	Print name, signature & date
I have received training and been assessed as competent. I am willing to undertake nasogastric feeds without supervision. I will not allow anybody to feed the named child via the nasogastric tube unless trained and assessed to do so by the Paediatric Enteral Feeding Team.		The named person has received training to carry out nasogastric feeding for the above named child and has been assessed as competent to carry out the procedure unsupervised.	

PLEASE NOTE: With the exception of parents/guardians, competence must be re-assessed on an annual basis or sooner if any concerns are raised. Please contact the team to arrange this on 01633 618019/ 618065. Parents/guardians will have competence discussed and reviewed at their child’s annual review. To maintain skill and competence, the trainee should undertake the skill on a regular basis, ideally at least weekly.