

## **DK3M 04 (CHS17) Carry out extended feeding techniques to ensure individuals nutritional and fluid intake**

### **About this Unit**

This standard covers feeding individuals using techniques other than oral feeding.

These methods include Percutaneous Endoscopic Gastrostomy (PEG) feeds, nasogastric (NG) tube feeds and subcutaneous fluid infusions.

This standard does not cover intravenous techniques for giving fluids.

Users of this standard will need to ensure that practice reflects up-to-date information and policies.

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

**Values** — the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

**Key Words and Concepts** — a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

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**Specific Evidence Requirements for the Unit**

**It is essential that you adhere to the Evidence Requirements for this Unit**

<b>SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT</b>
<b>Simulation:</b>
<ul style="list-style-type: none"> <li>◆ Simulation is <b>NOT</b> permitted for any part of this Unit.</li> <li>◆ <b>The following forms of evidence ARE mandatory:</b></li> <li>◆ <b>Direct Observation:</b> Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. <b>For example</b>, how you check identity, give information, support and reassurance to the individual prior to the activity.</li> <li>◆ <b>Professional discussion:</b> Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. <b>For example</b>, how you ensure there is adequate stock and how you re-order what is required.</li> </ul>
<b>Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:</b>
<ul style="list-style-type: none"> <li>◆ <b>Reflective Account:</b> These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge.</li> <li>◆ <b>Questioning/professional discussion:</b> May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice.</li> <li>◆ <b>Expert Witness:</b> A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice.</li> <li>◆ <b>Witness Testimony:</b> Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen.</li> <li>◆ <b>Products:</b> These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier.</li> <li>◆ <b>Prior Learning:</b> You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit.</li> <li>◆ <b>Simulation:</b> There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation.</li> </ul>
<b>GENERAL GUIDANCE</b>
<ul style="list-style-type: none"> <li>◆ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence.</li> <li>◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge.</li> <li>◆ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work.</li> <li>◆ All evidence must relate to your own work practice.</li> </ul>

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**KNOWLEDGE SPECIFICATION FOR THIS UNIT**

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role.**

**You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the 'knowledge evidence' section of the Assessment Guidance.**

<b>You need to show that you know, understand and can apply in practice:</b>	<b>Enter Evidence Numbers</b>
1 The current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to carrying out extended feeding techniques to ensure individual's nutritional and fluid intake.	
2 Your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance.	
3 The duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer.	
4 The importance of applying standard precautions to carrying out extended feeding techniques to ensure individual's nutritional and fluid intake and the potential consequences of poor practice.	
5 The importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence.	
6 The anatomy and physiology of the gastro-intestinal tract pertinent to the feeding methods being undertaken.	
7 Potential sources of contamination when undertaking extended feeding techniques and appropriate measures to reduce or deal with them.	
8 The potential consequences of contamination of feeds and equipment used for extended feeding.	
9 Issues linked to individual's beliefs, values and faiths which influence and impact upon diet and nutritional intake.	
10 The impact this type of feeding will have on individuals.	
11 A variety of conditions and situations where feeding may be undertaken by extended methods.	
12 Other staff who may be involved with the nutritional and fluid intake of individuals.	
13 Why fluid intake and balance is vital to the health of individuals.	
14 Why you need to monitor fluid and nutritional intake.	
15 The adverse reactions which may occur during and following procedures and how to identify and deal with these.	

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<b>You need to show that you know, understand and can apply in practice:</b>	<b>Enter Evidence Numbers</b>
16 The equipment and materials required for the types of extended feeding techniques relevant to your work area.	
17 The different types of feed available for the types of extended feeding techniques relevant to your work area.	
18 How a variety of feeding tubes are put in place and the preparation of the individual for the procedure.	
19 How to monitor, improve and maintain nutritional and fluid needs of individuals.	
20 Methods used to ensure the extended feeding equipment is correctly positioned prior to feeding.	
21 The importance of maintaining the correct level of cleanliness for extended feeding techniques.	
22 The importance of following procedures for extended feeding techniques exactly as specified, and the potential effects of not doing so.	
23 The importance of packing up used equipment and materials and covering receptacles containing body fluids prior to leaving the immediate care area.	
24 How and where to dispose of: (a) used equipment, materials and feeds (b) body fluids aspirated prior to feeding	
25 The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff.	
26 The following regarding records: (a) the importance of keeping accurate and up to date records (b) the specific records required for reporting on gastric aspirate and the removal of nasogastric tubes	

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Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Apply standard precautions for infection prevention and control any other relevant health and safety measures.							
2	Check the individual's identity and confirm the planned activity.							
3	Give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns.							
4	Gain valid consent to carry out the planned activity.							
5	Involve the individual and others throughout the procedure.							
6	Confirm all equipment and materials for carrying out extended feeding techniques is: (a) appropriate to the procedure (b) fit for purpose							
7	Ensure the individual is positioned in a way that will: (a) ensure their safety and comfort (b) facilitate the method of extended feeding							
8	Ensure the feeding tube is in the correct position according to the type of tube being used.							
9	Carry out the extended feeding: (a) at an appropriate time according to the individual's plan of care (b) using appropriate techniques (c) using equipment in line with manufacturer's instructions (d) in a manner which optimises the patient's comfort and dignity and minimises pain and trauma							
10	Observe the individual throughout the activity, recognise and report any condition or behaviour which may signify adverse reactions to the activity and take the appropriate action.							
11	Ensure that adequate and relevant fluids, feeds and equipment are stocked in the care environment to meet immediate future needs, re-ordering as appropriate.							
12	Complete all documentation as required and report any findings about the process and the individual which may have an impact on their care plan and subsequent care.							

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Performance Criteria		DO	RA	EW	Q	P	WT	PD
13	Ensure the extended feeding tubes are securely attached in a way that prevent discomfort and promotes dignity of the individual.							
14	Ensure the individual is made comfortable following extended feeding techniques and dispose of waste according to agreed procedures.							

*DO = Direct Observation*  
*EW = Expert Witness*  
*PD = Professional Discussion*

*RA = Reflective Account*  
*P = Product (Work)*

*Q = Questions*  
*WT = Witness Testimony*

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*To be completed by the candidate*

**I SUBMIT THIS AS A COMPLETE UNIT**

Candidate's name: .....

Candidate's signature: .....

Date: .....

*To be completed by the assessor*

*It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.*

**I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.**

Assessor's name: .....

Assessor's signature: .....

Date: .....

**Assessor/Internal verifier feedback**

*To be completed by the internal verifier if applicable*

***This section only needs to be completed if the Unit is sampled by the internal verifier***

Internal verifier's name: .....

Internal verifier's signature: .....

Date: .....