

Driving sustainability in enteral tube feeding through virtual training of healthcare professionals

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INTRODUCTION

Nutricia Homeward is the largest home enteral feeding service provider in the UK and provides training and education on enteral tube feeding to healthcare professionals (HCPs), patients, and carers across the UK.

Historically, this training has been delivered to healthcare professionals and professional carers face-to-face by Homeward Nurses however, following the COVID-19 pandemic, virtual training has become an accepted approach.

This project aimed to evaluate the acceptability and environmental impact of centralising responsibility for the national delivery of healthcare professionals' training on enteral tube feeding within a single regional team.

METHODS

Phase 1

- **Quantitative** data collection through online survey with Nutricia Homeward Nurse Managers.
- **Qualitative** data was collated through interviews with HCPs who had previously received virtual training.

Phase 2

- **Pilot implementation** of virtual training across three NHS Trusts with the aim of a national rollout in 2024.



Training included:

- Enteral feeding tubes
- Feeding methods
- Administering medications
- Stoma site complications
- Advance & rotate
- Balloon water changes
- Troubleshooting
- Stoma preservation devices



- Virtual training was conducted on the first Tuesday of every month with morning and afternoon sessions available.
- Care home managers and other HCPs were emailed with registration details.
- Posters advertising training were designed for various HCP settings.
- An nhs.net email was created for all training communication.
- HCPs could book sessions electronically.
- Feedback on the quality of the training was gathered via surveys accessed using a QR code.

Approximated travel calculations were based on the Trades Union Congress estimations of commuters spending one hour travelling to and from work every day¹ and the UK average national speed limit of 30mph².

RESULTS PHASE 1

- 95% of Nutricia Homeward Nurse Managers (n=20) agreed they would be happy for HCPs in their region to attend virtual training.
- 15% stated they had reservations due to local policies.
- 100% of interviews with HCPs who had previously received virtual training (n=6) agreed virtual training did not negatively impact learning.
- The flexibility of accessing training remotely was appreciated by all interviewees.

RESULTS PHASE 2

Over a 15-month period, 20 Homeward Nurses delivered 57 virtual training sessions to 852 HCPs from various regions of the UK. Post-training surveys determined a mean quality training score of 4.8 (5 being excellent), with 96% agreeing they felt more confident with enteral tube feeding care.

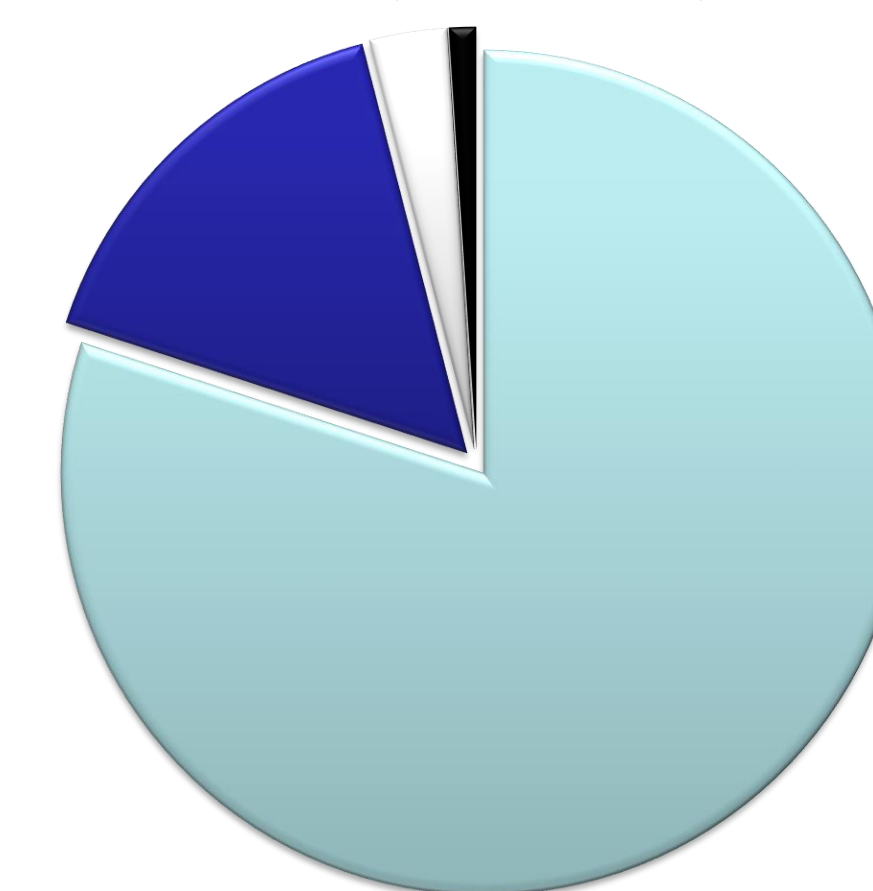
"Was great to join. Trainers are good. Wasn't boring always asked to make sure we had taken in what they were saying. Will share information with our team."

"Great training session from a different account. I have joined today as we are rolling out our training in Cambridge."

"Really helpful. The training was really easy to use. It's the first time doing the virtual version at our school. Was still clear and even included stoma complications."

"My trainers were very detailed and helpful with advice on PEG Training. I was able to learn more about PEG feeding as a result."

Based on your experience today, do you feel confident to support your enterally fed patient?



■ Strongly agree ■ Agree
■ Neither agree or disagree ■ Disagree
■ Strongly disagree

100% of HCPs appreciated the flexibility of accessing training remotely, removing the need to drive to and from their training sessions, based on our assumptions*, this resulted in an estimated:



- ~852 hours/25,560 road miles prevented^{1,2}
- Reduction of ~7.1 tonnes of CO₂e³

*Based on the assumption that all HCPs are driving individually to training in a fossil-fuel car, with an average round trip of 1hr covering 30 miles^{1,2}.

DISCUSSION

The virtual training sessions received positive evaluations from HCPs and were considered more convenient and flexible than traditional face-to-face training.

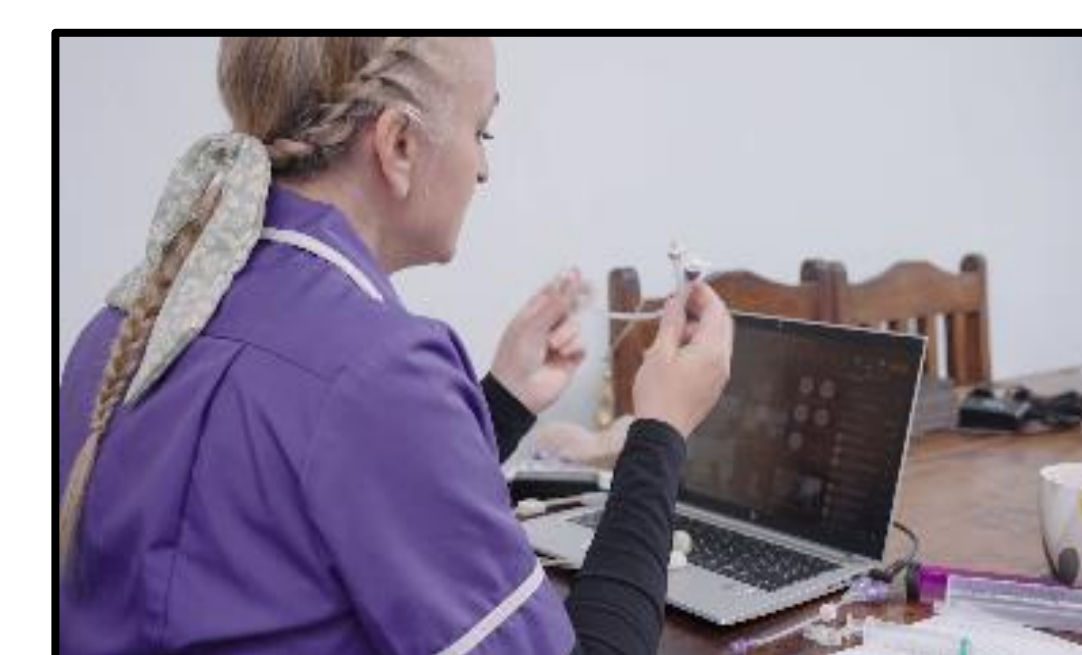
The remote format potentially reduced travel, with attendees able to access content from their homes or usual places of work without the requirement to travel to a central location.

Initiatives to increase the sustainability of training are important as staff turnover, and the requirement to refresh training regularly means there is an ongoing demand for training on enteral tube feeding.

NEXT STEPS

This evaluation provides reassurance that virtual training is a viable option for delivering enteral tube feeding training and that this can be rolled out nationally. The next steps include:

Phase 3



- National rollout
- Upskilling Homeward Nurses on the delivery of virtual training
- Ongoing evaluation, audit, and review of virtual training, content, and format