

NHS Norfolk and Waveney Policy Statement

Home Enteral Feeds on Prescription

Trust / Stakeholder contact details	
JPUH adults	dieteticreferral@jpaget.nhs.uk
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QEH paediatrics	gehkl-tr.paediatricdietitians@nhs.net
NCHC adults	hef@nchc.nhs.uk
ECCH adults	dietetics@ecchcic.nhs.uk
NSFT	Eating disorders: CEN-CAEDS4professionals@nsft.nhs.uk Adults and mental health: contact clinician directly

If you have any queries about prescribing Enteral feeds related to this guidance, please contact the Medicines Optimisation Dietetic team at N&WICB:
nwicb.dieteticqueries@nhs.net

Current Home Enteral Feeding (HEF) contract and homecare details

Norfolk and Waveney ICB are currently in a contract with Fresenius Kabi® (FK) who provide HEF supplies and equipment to patients who require artificial enteral nutrition support at home. They also supply our acute hospitals with enteral feeds and equipment.

HEF specialist dietitians set up monthly deliveries for feed and equipment to patients via FK's homecare service called Calea®. Any enteral feeds or oral nutritional supplements (ONS) the patient requires should be prescribed on FP10. This should be added to the patients repeat prescriptions in primary care when instructed by the HEF dietitian (via a letter).

Prescriptions for feeds and ONS should be sent to Calea homecare who will process the prescription and deliver it to the patient's home along with any enteral feeding supplies such as syringes, giving sets, spare tubes, and other accessories (non-feed items are charged directly to the ICB). Note: some ONS products are used for 'bolus feeding' where the liquid is manually administered via the enteral feeding tube with a 60ml syringe, or via a pump or gravity system. ONS for bolus feeding are usually supplied via the homecare service along with other equipment.

Retrospective prescriptions

Our current contract requires that feeds are sent to patients' homes in a timely manner, within 48-72 hours if the patient is new to the service. Occasionally, feed may be sent to patients before Calea receives a script from the GP practice. This is to ensure that patients have a supply of essential feeds and equipment at home when there has been a change in care setting, or an urgent change in feeding regimen. **The ICB allow Calea to request retrospective prescriptions from GP practices** if the request is recent and reasonable. If you are unsure about a retrospective prescription request, please contact the ICB as soon as possible for guidance on nwicb.dieteticqueries@nhs.net.

Product ordering, delivery, and out of stock issues

FK must inform the Trusts regarding any issues with availability of items on the product schedule. Out of stock items will be delivered as quickly as possible and no later than five working days following the due delivery date. If stock is still not available after five working days, FK must inform the managing dietetic team to discuss alternative plans. Failure to deliver a product on the scheduled delivery day due to supply issues, manufacturing or delivery problems, must be made good within 24 hours, with no additional cost to the ICB, Trusts, or general practice.

There have been occasions where Norfolk and Waveney has experienced a large number of supply issues with enteral feeds and ONS. When this affects the product prescribed for your patient, FK will contact the managing Dietetic department to approve a substitution. See flow chart below for out-of-stock process.

Flow chart: Out-of-stock process

Enteral feed/ONS/equipment for patient is out-of-stock

Investigation by FK/Calea to manage and prioritise prescriptions:

- 1) Compile list of names of patients that the issue affects **on this month's delivery** (if stock issues on items that are not due then there is no need to highlight yet) for each HEF dietetic team. Consider whether the product is still 'active' on the account
- 2) Investigate stock levels for affected patients- contact patient or carers to check stock levels as they may be able to use existing supplies until the next scheduled delivery
- 3) Consider appropriate substitutions based on stock of alternative products and presentation sizes
- 4) Has the patient had an agreed substitution in the last 6 months (with no recent change to feed) that can be appropriately used again? If so, there is no need to approve substitution again with the dietitians. Request prescription from GP (for feed/ONS) referencing the previous agreed substitution, and deliver product/s to patient

FK contacts managing HEF dietetic team via **generic email address- see page 1** (not FK portal) with the following information:

- 1) Name of patient/patients that the issue affects
- 2) Suggested substitutions based on available stock
- 3) Agree substitutes with the HEF dietetic team:
 - 1) Marked '**Urgent**' (patient is due to run out of stock in next 7 days): If received before midday then HEF dietetic team to respond on same working day
 - 2) Marked '**Non-urgent**' (patient has >7 days' supply): HEF dietetic team to respond within 5 days (includes weekend days)
- 4) Dietetic team to fill in pre-populated letter with patient and substitution details if required. This should be cc'd to patient/carers, and include a note to care agencies or providers that this feed replaces previous feed and to follow normal feeding regime unless instructed otherwise by the dietitian)
- 5) Dietetic team to send letter or task to GP practice if substitute for feed/ONS required
- 6) Calea/FK to arrange home delivery of agreed substitute/s

On receipt of letter or task GP practice to authorise prescription request for substitute product as a one off 'acute prescription'

The normal product should be issued from repeat prescriptions on the following month if the product is available

If product not available again up to 6 months after initial agreed substitution (with no recent changes to feed), then Calea can request agreed substitute prescription again referring to previous letter

Title	Home Enteral Feeds on Prescription
Description of policy	To inform healthcare professionals
Scope	NHS Norfolk & Waveney Integrated Care System
Prepared by	Medicines Optimisation Dietetic Team
Evidence base / Legislation	<p>Level of Evidence:</p> <p><i>A. based on national research-based evidence and is considered best evidence</i></p> <p>B. mix of national and local consensus</p> <p><i>C. based on local good practice and consensus in the absence of national research based information.</i></p> <p><i>D. National Drug Tariff</i></p>
Dissemination	Is there any reason why any part of this document should not be available on the public website? <input type="checkbox"/> Yes / No <input checked="" type="checkbox"/>
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