

Barriers to Enteral Feeding Critically III Patients Questionnaire

The purpose of this questionnaire is to understand the barriers that critical care providers face in implementing the recommendations of nutrition guidelines in their setting - specifically barriers to providing adequate enteral nutrition (EN).

Several Clinical Practice Guidelines (CPGs) pertaining to critical care nutrition have been developed and published in recent years. These CPGs are typically nationally developed broad statements of best practice that refer to the <u>average</u> mechanically ventilated critically ill <u>adult</u> patient. Often, these guidelines are adapted for local use, and incorporated into local policy documents and bed-side protocols/algorithms. For brevity, throughout this survey, the term 'current guidelines for nutrition' will be used to refer to the <u>nutrition guidelines currently used, if any, to inform decisions about feeding patients in your ICU</u>. When we refer to feeding protocols, we are referring to tools designed to operationalize the guidelines at the bedside for patient care.

This questionnaire is divided into 2 sections and should take you approximately 5 to 10 minutes to complete. Please read these instructions before starting:

- Read each question, including all the options, before giving an answer.
- Choose the answer that is most applicable to your situation.
- Choose only one answer, unless requested otherwise.
- Complete the questionnaire from your perspective of the situation in your ICU do not consider what you think others would say.
- If you have any additional comments, questions or concerns regarding nutrition guidelines, barriers to delivering enteral nutrition, or this survey, please write them in the space allotted at the end of the questionnaire.

By completing the questionnaire you are consenting for your responses to be used as part of ongoing quality improvement work in your unit. However, your responses are strictly confidential. Your opinions are very important! Of course, your participation is voluntary.

After completing the questionnaire please return to:

{put name of dietitian or location of where questionnaires should be returned}

Thank you for your participation!

Part A: Barriers to Delivery of Enteral Nutrition

A barrier is something that hinders your ability to deliver adequate amounts of EN. Below is a list of 20 items that have been identified as barriers to feeding critically ill patients. Read each one carefully. If the item is a barrier in your ICU, indicate the DEGREE to which it hinders the provision of EN in your ICU on a scale of 0-6 where 0 means 'not at all' (you believe that it is not a barrier) and number 6 means 'an extreme amount' (you believe that the provision of EN is severely affected by this factor). For each potential barrier, circle the number that best reflects on average the situation in your ICU.

your ICU.								
		Not at all	Very little	A little	A moderate amount	A lot	A great deal	An extreme amount
De	livery of Enteral Nutrition to the Patient							
1.	Delay in physicians ordering the initiation of EN.	0	1	2	3	4	5	6
2.	Waiting for physician/radiology to read x-ray and confirm tube placement.	0	1	2	3	4	5	6
3.	Frequent displacement of feeding tube, requiring reinsertion.	0	1	2	3	4	5	6
4.	Delays in initiating motility agents in patients not tolerating enteral nutrition (i.e. high gastric residual volumes).	0	1	2	3	4	5	6
5.	Delays and difficulties in obtaining small bowel access in patients not tolerating enteral nutrition (i.e. high gastric residual volumes).	0	1	2	3	4	5	6
6.	In resuscitated, hemodynamically stable patients, other aspects of patient care still take priority over nutrition.	0	1	2	3	4	5	6
7.	Nutrition therapy not routinely discussed on patient care rounds.	0	1	2	3	4	5	6
Die	Dietitian Support							
8.	Waiting for the dietitian to assess the patient.	0	1	2	3	4	5	6
9.	Dietitian not routinely present on weekday patient rounds.	0	1	2	3	4	5	6
10.	No or not enough dietitian coverage during evenings, weekends and holidays.	0	1	2	3	4	5	6
11.	Not enough time dedicated to education and training on how to optimally feed patients.	0	1	2	3	4	5	6

	1	ı	ı	1	ı		
	Not at all	Very little	A little	A moderate amount	A lot	A great deal	An extreme amount
ICU Resources							
12. Enteral formula not available on the unit.	0	1	2	3	4	5	6
13. No or not enough feeding pumps on the unit.	0	1	2	3	4	5	6
Critical Care Provider Attitudes and Behaviour							
Non-ICU physicians (i.e. surgeons, gastroenterologists) requesting patients not be fed enterally.	0	1	2	3	4	5	6
15. Nurses failing to progress feeds as per the feeding protocol.	0	1	2	3	4	5	6
16. Enteral feeds being held due to diarrhea.	0	1	2	3	4	5	6
17. Fear of adverse events due to aggressively enterally feeding patients.	0	1	2	3	4	5	6
Enteral feeds being held for bedside procedures, such as physio, turns, and administration of certain medications.	0	1	2	3	4	5	6
19. Enteral feeds being held in advance of procedures or operating room visits.	0	1	2	3	4	5	6
20. Lack of familiarity with current guidelines for nutrition in the ICU.	0	1	2	3	4	5	6
21. General belief among ICU team that provision of adequate nutrition does not impact on patient outcome.	0	1	2	3	4	5	6

Part B: Personal Characteristics
Please check the box that best corresponds to you.

1. What is your sex?	Male □	Female	
2. How old are you? 34 years or less 35-49 years 50-64 years 65 years or older			
Anaesthes Emergend Internal M Surgeon	Please select one: (Medical) (Surgical) sia y Medicine	Please speci	fy
4. How would you description Full-time Part-time Cocum Casual Trainee Other	be your current empl Full-time equivalen Please specify	t:	
5. How long have you be0 - 5 years6 - 10 years11 - 15 yearsGreater than 15 years		U?	
6. Do you play a leaders If yes, please specify: Medical Director Nurse Manager Clinical Nurse Special Charge Nurse Other		Yes	No 🗆

Additional Comments You have now completed the questionnaire - thank you! In the space below, please make any additional comments you wish to make about barriers or solutions to providing adequate enteral nutrition to patients in your ICU.

Thank you very much for taking the time to complete this questionnaire.
Your contribution is valued.