

44. Dysphagia, Safe Swallowing & Mealtime Management Policy and Procedure

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| Approval Date: 20 Dec 2021 | Review Date: 20 Dec 2023 | Version: 1.1 |
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Purpose

Australian Quality Care is committed to providing safe and competent supports to clients with dysphagia, or difficulty swallowing, to try to avoid the risks of choking or aspiration pneumonia, which could lead to the participant's death or serious health complications.

While most of Australian Quality Care's clients will not experience swallowing difficulties, it is imperative that we have a policy and procedures in place to both prevent and identify when these difficulties do occur, and how to safely and appropriately respond.

Each client with dysphagia will have an individual level of support needed, and this may change over time. Training for staff, monitoring and review around each clients needs is required to ensure the safest and most enjoyable support environment for all Australian Quality Care clients.

Scope

For this commitment to be achieved, Australian Quality Care is responsible for ensuring that all clients with swallowing difficulties are supported in accordance with this policy. This applies to all support staff, supervisors, managers and the Board.

Policy

Australian Quality Care believes that all clients with swallowing difficulties deserve to be supported to maintain the highest level of independence in the safest possible way and to enjoy their mealtimes. This policy and procedure outlines the steps that Australian Quality Care takes to support clients and our meet obligations to provide competent and safe supports to participants with dysphagia and manage the associated risks. This includes assessment of individual clients needs, implementing supports, monitoring progress, worker training and accurate documentation.

Definition

| Terminology | Definitions |
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| Dysphagia | Difficulty with swallowing liquids and solids that can result in choking and/or aspiration and death. |
| Mealtime Management Plan | Prescribes specific mealtime recommendations for a person to eat in a safe and nutritious way. It should identify the risks to the person during mealtimes, and will often reference the International Dysphagia Diet Standardisation Initiative (IDDSI) Scale and the level of recommended modified diet. |

What is dysphagia?

Dysphagia is a medical term for any difficulty with swallowing.

A person may have dysphagia if they show signs and symptoms such as:

- difficult, painful chewing or swallowing
- a feeling that food or drink gets stuck in their throat or goes down the wrong way
- coughing, choking, or frequent throat clearing during or after swallowing
- having long mealtimes e.g., finishing a meal takes more than 30 minutes
- becoming short of breath when eating and drinking
- avoiding some foods because they are hard to swallow
- regurgitation of undigested food
- difficulty controlling food or liquid in their mouth
- drooling
- having a hoarse or gurgly voice
- having a dry mouth
- poor oral hygiene
- frequent heartburn
- unexpected weight loss
- frequent respiratory infections.

A range of disabilities and medical conditions are associated with dysphagia, such as congenital syndromes, neuromuscular dysfunctions such as cerebral palsy, neurological disorders such as stroke, cancer, and chronic lung disease.

Many people with disability are also prescribed medications on a long-term basis, which can increase risk of swallowing problems.

Risks associated with dysphagia

Because of the high rates of dysphagia in people with disability, they have an increased risk of respiratory problems or choking as well as poor nutrition. Swallowing problems can allow food, drinks or saliva to get into lungs rather than the stomach, which can cause aspiration pneumonia. Studies have found that aspiration pneumonia and choking were among the most common respiratory causes of death for people with disability in NSW, QLD and VIC.

The risk of accidental choking can be reduced by following expert advice from speech pathologists and other specialists. Early identification and management of swallowing problems can minimise risks of health complications.

Procedure

Australia Quality Care will take steps to provide safe and competent supports to clients with dysphagia to try to avoid the risks of choking or aspiration pneumonia, which could lead to the client's death or serious health complications.

While every client will have different support needs for their dysphagia, there are some steps the NDIS Commission recommends, as detailed below.

Ensure staff know dysphagia symptoms and risks

Australian Quality Care will ensure that workers will have training to improve their knowledge and develop skills so they can support clients who may have dysphagia.

Staff should understand how to **identify** and **respond** to early signs and symptoms of dysphagia and how to support the person to have **safe and enjoyable meals**.

Support clients with possible swallowing difficulties to be assessed for dysphagia

If a client shows any sign or symptom of swallowing difficulty, Australian Quality Care will support them to consult a GP and a speech pathologist promptly, so they can assess their swallowing and mealtime assistance needs as well as review their general health.

Support clients with dysphagia to have a mealtime management plan

Clients with dysphagia will be encouraged and supported to have a mealtime management plan written by a health professional. A speech pathologist can prescribe and recommend specific actions for a person to eat and drink safely and develop a mealtime management plan for their needs. They will also specify when plans need to be reviewed.

A dietitian may contribute to the mealtime management plan by ensuring there is enough nutrition and hydration in the recommended modified meals.

Mealtime management plans may include recommendations to:

- improve the seating and positioning supports for a person's safe positioning during meals
- modify food textures to make the food easier to chew and swallow
- provide specific mealtime assistance techniques, including any reminders about a safe rate of eating, or a safe amount of food in each mouthful
- respond to coughing or choking and make sure risks are monitored while a person is eating or drinking
- use feeding equipment for people who have severe dysphagia, including assistive technology such as spoons, plates, cups and straws; and tube feeding equipment for those with severe or profound difficulty swallowing who require tube feeding.

Support people with dysphagia to eat and drink safely during mealtimes

Australian Quality Care will ensure that:

- workers receive the necessary training and support to implement a mealtime management plan or other mealtime recommendations for swallowing safely and mealtime management
- meals for participants with dysphagia, and medication taken orally, are prepared as directed and mealtime supports, and assistance are provided as recommended by health professionals.
- trained workers are available to monitor people with dysphagia during mealtimes as outlined in the client's mealtime management plan
- workers know how to respond if a client starts to choke during mealtimes, including when they should call an ambulance
- mealtime safety issues for people with dysphagia are regularly considered and addressed in day-to-day procedures, client's documentation, and plans for transition to hospital.

Ensure mealtime management plans are regularly reviewed

Mealtime management plans will be reviewed regularly. Australian Quality Care will support clients with dysphagia to arrange this.

The speech pathologist who develops a mealtime management plan will include how often it should be reviewed and may specify the circumstances in which reviews should be requested.

Ensure medications are regularly reviewed

You should support a participant with dysphagia to have their medications regularly reviewed by a GP, the prescribing medical practitioner, or a pharmacist to assess whether the medications may affect their swallowing.

The review can also determine if the medications are suitable when managing risks around swallowing. Several medications have impacts on swallowing, particularly medications for epilepsy or mental health conditions. Refer to the NDIS Commission's [Practice Alert: Medications associated with swallowing problems](#).

Reporting & Documentation

Workers will be trained to identify any change in condition, choking incident or suspected symptom of aspiration and will report it to their supervisor or management. These incidents will also be recorded in client progress notes and as in incident report to trigger investigation and assessment for referral to a GP or speech pathologist.

Medicines associated with swallowing problems

Certain medicines administered to people with disability can increase the risk of choking in two ways: by causing swallowing problems (dysphagia) and, to a lesser extent, by causing drowsiness (sedation).

These medicines are commonly given to people with disability.

Worker should be aware of how to prevent choking risks associated with the use of these medicines. If a person's swallowing problems persist while continuing to take these medicines, speak to the prescribing medical practitioner to get a medical review.

People who take **medicines associated with swallowing problems** may be at risk of choking while eating or drinking.

People taking **antipsychotic medicines** may be at a particular risk of muscular reactions that can affect swallowing:

- in the **first few days after starting** the medicine
- after an **increase in the dosage** of antipsychotic medicine or
- when they have been taking antipsychotic medicines for a long time, or **taking combinations** of antipsychotic medicines or antipsychotic medicines in combination with other drugs that can affect swallowing.

To minimise the person's risk of choking, a mealtime management plan is recommended when a person is having trouble swallowing that may be a result of taking these medicines. A mealtime management plan may consider:

- when the person should be assessed, monitored and reviewed by a speech pathologist for mealtime and swallowing safety and support needs
- whether the person should be supervised or assisted during mealtimes
- changing the foods offered to the person, such as foods and drinks that are easy to chew and swallow, or other food and drink modifications as recommended by a speech pathologist
- how the person is positioned during and after mealtimes
- the amount of food and pace of each mouthful during mealtimes
- the environment during mealtimes, for example avoiding a noisy environment which can be distracting
- regularly reviewing mealtime management plans, especially if there are ongoing issues with aspiration.

If a person's swallowing problems persist while continuing to take these medicines, speak to the prescribing medical practitioner to get a medical review.

Also consider:

- whether the medicine should **continue** to be prescribed to the person
- whether the current medicine could be **changed** to another medicine of the same type
- if the medicine is to continue - whether the **dose** can be reduced, or if dividing the dose over the day may reduce swallowing problems
- whether to seek an independent medical review, particularly if the person requires medical attention for aspiration pneumonia, experiences frequent coughing or sounds 'gurgly' or chesty during or after meals.
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What medicines are associated with swallowing problems?

The major types of commonly prescribed medicines that have the potential to affect swallowing and cause problems while eating or drinking are:



Commonly prescribed medicines which can affect swallowing

Preliminary data reported to us has identified that the three most commonly prescribed medicines used for the purposes of behaviour support are types associated with swallowing problems. These medicines are:

- Risperidone (antipsychotic)
- Sodium valproate (antiepileptic)
- Olanzapine (antipsychotic)

Related documents

- Assistance with Mealtime Management Plan form
- Incident Report Form
- Management of Medication Policy and Procedure
- Medication Incident Form
- Client's Medication list
- Risk Management Policy and Procedure

References

- [NDIS \(Provider Registration and Practice Standards\) Rules 2018](#)
- [NDIS Quality and Safeguards Commission](#)
- [International Dysphagia Diet Standardisation Initiative \(IDDSI\) Scale](#)
- [NDIS Practice Alert – Dysphagia](#)
- [NDIS Practice Alert – Medicines Associated with swallowing problems](#)