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MANAGING IDDSI AND TEXTURE MODIFIED DIETS IN CARE HOMES

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eCare Solutions Ltd

Care Management Software

Empowering Outstanding Care Through Technology

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MANAGING IDDSI AND TEXTURE MODIFIED DIETS IN CARE HOMES

Understand IDDSI and texture-modified diets for care homes. Support residents with swallowing difficulties safely and confidently

The International Dysphagia Diet Standardisation Initiative (IDDSI) was founded in 2013 and launched in the UK in 2019, with the goal of developing new global standardised terminology and definitions to describe textured modified foods and thickened liquids for individuals with dysphagia of all ages, in all care settings and all cultures.

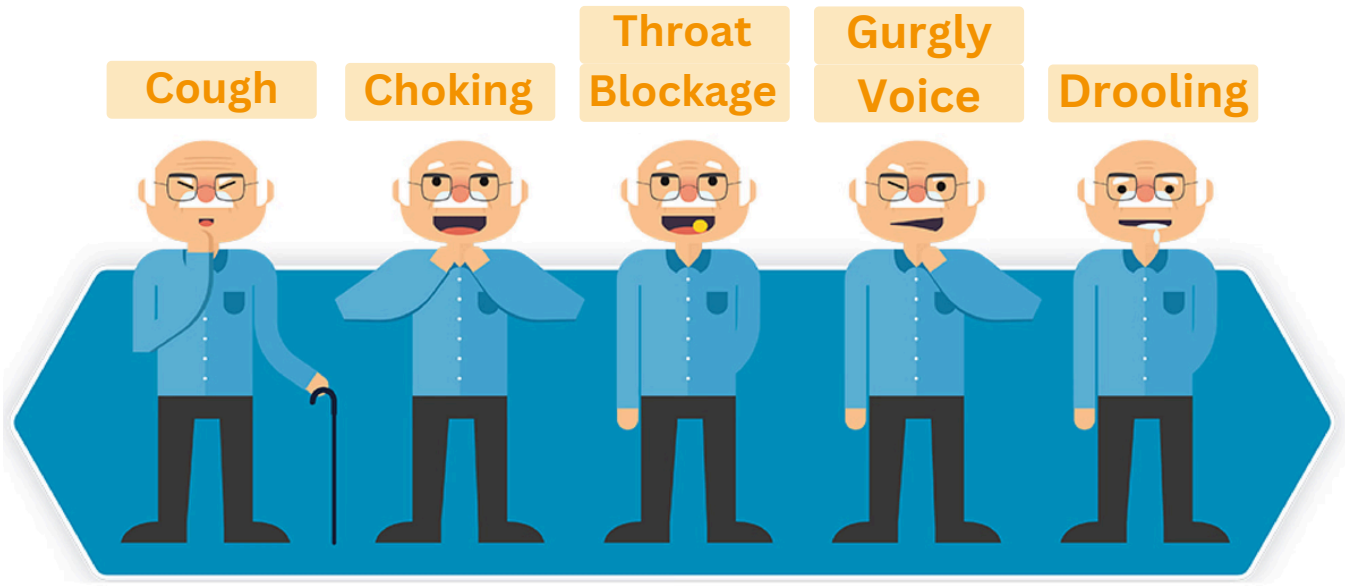
The framework consists of a continuum of 8 levels (0 - 7), where drinks are measured from Levels 0 – 4, while foods are measured from Levels 3 – 7. The IDDSI Framework provides a common terminology to describe food textures and drink thickness.

Dysphagia (Swallowing Difficulties)

Dysphagia is when someone experiences problems with swallowing.
It can be caused by medical conditions or even certain medication, such as:

- Antipsychotics
- Living with a learning disability
- Heartburn and acid reflux,especially in children or people who have gastro-oesophageal reflux disease
- Problems with breathing caused by conditions such as chronic obstructive pulmonary disease (COPD)
- A condition that affects the nervous system or brain, such as cerebral palsy, CVA (stroke), dementia or multiple sclerosis
- Cancer, such as mouth cancer or oesophageal cancer

Signs and Symptoms of dysphagia include:



- Coughing or choking when eating or drinking
- Bringing food back up, sometimes through the nose
- A feeling that food is stuck in the throat or chest
- A gurgled, wet-sounding voice when eating or drinking
- Drooling and have problems chewing food

Over time, dysphagia can also cause symptoms such as weight loss, dehydration, and repeated chest infections

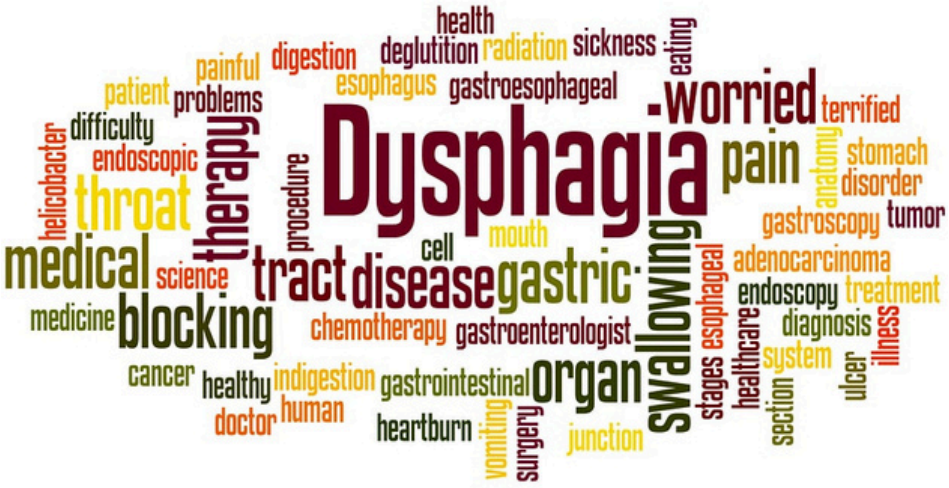
Treatments for dysphagia

A GP will undertake an examination and may make a referral to a specialist for further tests.

This could be referral to a speech and language therapist (SALT) or a dietitian for advice on swallowing and diet. Treatment for dysphagia depends on what is causing it and how severe it is.

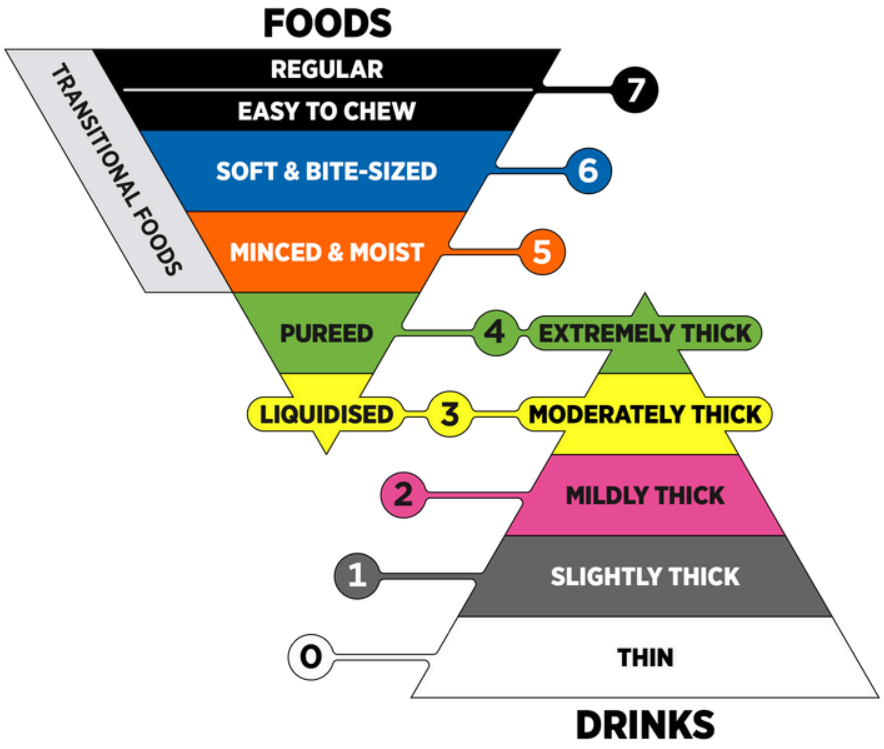
If the cause is longer term, specialist treatment or diet may be needed to make eating and drinking as safe as possible and reduce the risk of choking or aspiration.

A SALT assessment will be undertaken for those residents who have swallowing issues, and the assessor will recommend the level of food/fluids the resident requires. The terms used for modified diets consist of a continuum of 8 levels (0-7).



Drinks are measured from Levels 0 – 4

Foods are measured from Levels 3 - 7

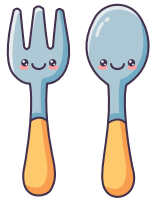


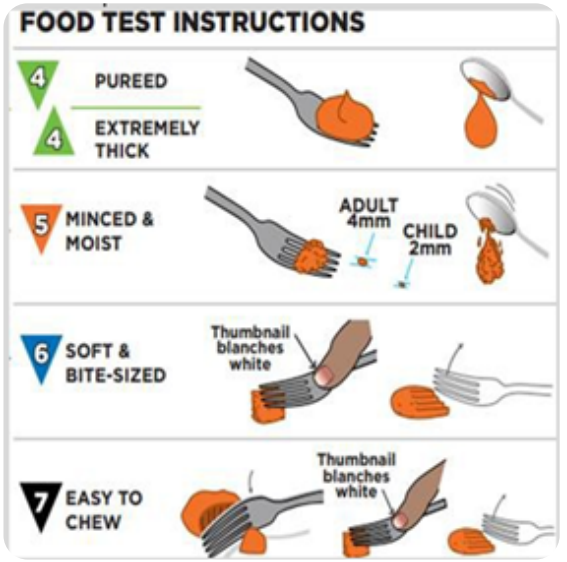
Levels 3 & 4 overlap both 'triangles'.

Although the numbers are the same, the descriptors are different.

Getting it Right

**Descriptors are supported by simple measurement methods that can be used by food preparers and care givers to confirm that the level of food is correct.
You may need to use the following equipment for this.**





Everything on the plate must be of the correct texture; the catering staff must make the meal to the correct level given by SALT guidance. If this guidance changes, then the catering team MUST be informed immediately.

Staff must ensure the food/drink texture is not changed/altered once the meal comes to the dining room.

Do not add sauces and gravies unless they are the correct texture as this will alter the IDDSI level and could cause the resident to choke

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Think about the 6 ‘Rights’ of meal service when overseeing the mealtime:

- Right resident
- Right diet
- Right consistency (IDDSI level)
- Right eating location (dining room or bedroom)
- Right level of assistance and/or supervision
- Right Posture (sitting upright)

Over to you:

- Are all staff aware of the IDDSI levels and able to describe them?
- Can staff describe what signs and symptoms of dysphagia are and what would prompt them to raise a concern?
- Are referrals to SALT team made in a timely manner and documented within Fusion?
- Have all residents had a choking risk assessment completed on Fusion?
- Do all residents identified at risk of choking have a detailed care plan in Fusion making clear their IDDSI levels and support requirements?
- Are staff aware of the residents they care for who are prescribed a textured, modified diet?
- Do staff know what to do in the event of a resident choking?

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The Importance of Ongoing Assessment:

It is important to ensure that there is an ongoing assessment of all residents' choking risks to ensure the safety of residents while eating. As well as the initial assessment on moving in, further assessment must take place:

- Where a resident is displaying the signs and symptoms of dysphagia (as described above)
- Following concerns that residents' needs have changed around swallowing/eating or drinking
- Following a choking event