South West Dysphagia Knowledge and Skills Guidance

Aimed at supporting paid carers who support people with a learning disability living with swallowing difficulties/dysphagia

1. Why has this guidance been developed?

The South West NHSE Regional Learning Disability and Autism programme hosted a Dysphagia Call to Action event in December 2022 with broad representation from across the local health, social care, and care economy. This event occurred in response to findings within the Regional LeDeR (Learning from the lives and deaths of people with learning disability and autistic people) Annual Report for 2021 (UCL and KCL 2022) that respiratory conditions remained one of the top 4 causes of death amongst people with learning disability reviewed under LeDeR, and that dysphagia was one of the most significant long term conditions that people dying in the South West lived with. The event aimed to identify a tangible action to take forward that could reduce the incidence of respiratory conditions triggered through aspiration and improve the lives of people living with dysphagia and those that support them. The following guidance was developed in response to this event and aims to provide a baseline reference point of knowledge and skills for people who care and support individuals living with dysphagia.

The head of speech and language therapy for the county of Somerset instigated the development of this guidance for local use and it has been taken forward with the support of a South West working group which has included other speech and language therapy team members from across the region, and support from the South West Learning Disability and Autism Programme team (see appendix for working group member details).

2. How has this guidance been developed?

This guidance is based on the Royal College of Speech and Language Therapy Eating Drinking and Swallowing Competency Framework (EDSCF) (RCSLT 2020), which is “an assessable competency framework, which informs strategies for developing the skills, knowledge, confidence and ability of individuals who form part of the care team to contribute more effectively in the identification of people with, and in the management of, eating, drinking and swallowing difficulties (dysphagia).” (Page 5 EDSCF 2020).

The EDSCF (2020) identifies 6 levels of dysphagia competency and decision making that include level 1 – public health messages/awareness; level 2 – care plan implementation; level 3 – identification and implementation of interim care eating and drinking plans; level 4 – protocol guided assessment and management; level 5 - specialist assessment and management, and level 6 - consultant assessment and management.

The guidance has pulled out the key elements of the EDSCF (2020) **level 2** competencies and has interpreted these into a practical knowledge and skills guide that aims to support carers to acquire the ability to apply eating and drinking care plans safely and competently for people with dysphagia. Although the guidance has been developed in response to issues affecting people with learning disability, they can be applied generally where care is being provided to people living with dysphagia.

What this tool is not:

- A replacement for the EDSCF (RCSLT 2020)
- A dysphagia training pack
- Mandatory
- A stand-alone approach to the oversight of safe eating and drinking for paid carers
- A replacement for any dysphagia orientated organisational policies, protocols, or standards of care

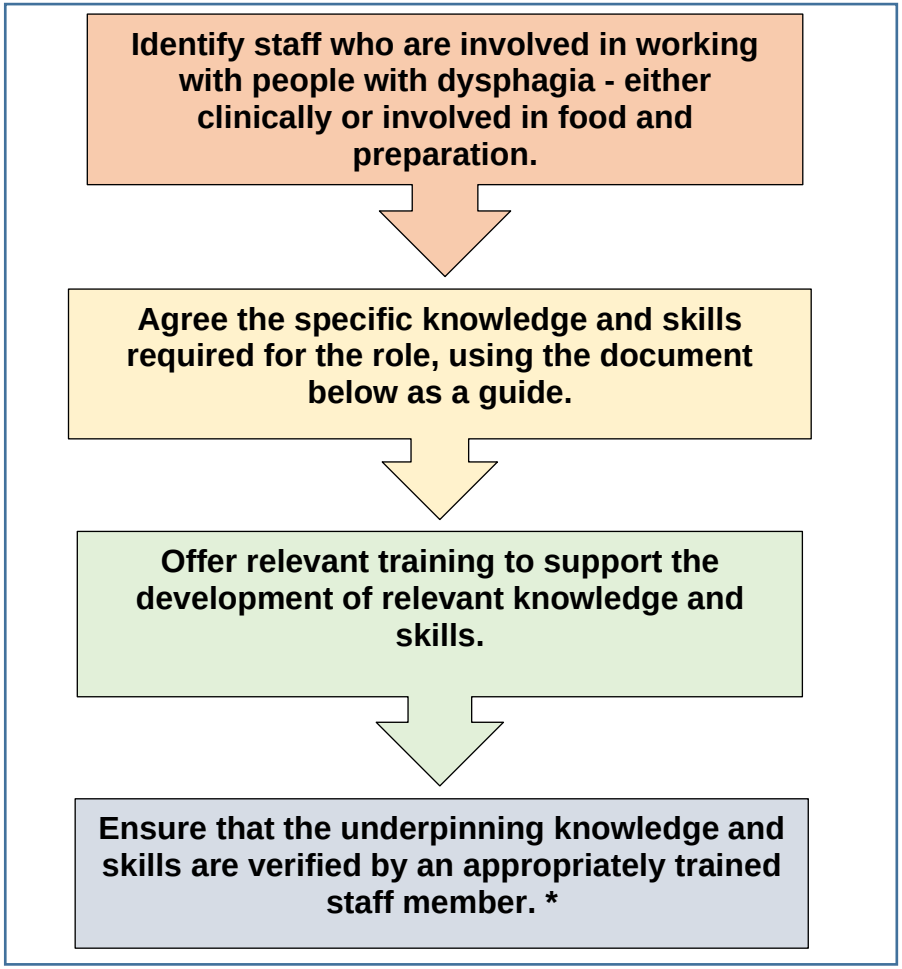
What this tool aims to be:

- A practical guide to support the development of good baseline knowledge and skills **for paid carers and support staff (e.g. Kitchen staff) working with people with dysphagia.**
- A set of **guidance that can help service providers/managers to support and test the knowledge and skills of the care and support staff they employ** in the context of applying dysphagia care plans alongside other clinical and operational processes they have in place.
- **A tool that can be used alongside any organisational policies, protocols, or standards of care** that a provider may have associated with supporting paid care and support staff to work effectively and safely to support a person with dysphagia.

3. About this guidance

First steps to using this guidance:

The flow chart below explains the actions that service managers need to take to support their staff team in the development of the relevant knowledge and skills in dysphagia management.



* Each care provider should have internal mechanisms to ensure that they have access to personnel that can act competently to oversee the competency of carers employed.

Managers using this document can find many useful training resources on the NHS England website online via **https://portal.e-lfh.org.uk/**

Who are these aimed at?

Staff involved in food or drink preparation or direct care roles such as assisting people to eat and drink or preparing and giving food and/or drinks to people. Examples of roles include kitchen staff, facilities staff, volunteers, Health Care Assistants and Speech and Language (SLT) Associate Practitioners.

What are the expectations of staff working at this level?

Staff at this level should be able to:

- Identify eating, drinking, and swallowing difficulties.
- Recognise factors that support optimum eating and drinking.
- Support individuals to carry out swallowing therapy as per their personalised eating and drinking care plan.
  NB: this would be supported by a speech and language therapist where applicable.
- Be able to refer to more experienced/qualified dysphagia specialists.

How the knowledge and skills have been structured

The working group has adapted the EDSCF (2020) to make the required knowledge and skills relevant to specific roles more accessible.

The knowledge and skills have been summarised by the working group into seven components (sections) as follows:

- Section 1 International Dysphagia Diet Standardisation Initiative (IDDSI) Knowledge and Practical Skills
- Section 2 Dysphagia Awareness Essential Skills
- Section 3 Information
- Section 4: Knowledge of Environmental Factors

- Section 5: Assisting people to eat and drink safely
- Section 6 Documentation
- Section 7 Following the Speech and Language Therapy Eating and Drinking Care Plan *

  *****NB: Different speech and language therapy teams may use different terminology for describing an eating and drinking care plan. For example, in some areas of the South West care plans are called “Eating and Drinking Risk Assessments.” The term care plan in the context of this document is used to describe any formal guidance around the personalised eating and drinking requirements of an individual assessed and directed by a speech and language therapist.

Knowledge and skills reference and monitoring tables

The tables below represent each of the 7 components of knowledge and skills that the SW Dysphagia working group have adapted from the EDSF (2020). They aim to support managers and care staff to understand the detail of the specific knowledge or skill required, the resources necessary to support the development of these, and indicators that would imply that staff hold relevant knowledge or skill. The table format also hopes to enable managers to evidence the competency, identify the date this was observed and sign this off as appropriate**.**

Section 1 applies to ALL staff who are involved in preparing food or drinks, giving food and drinks to people or assisting people to eat and drink

Section 1: International dysphagia diet standardisation initiative (IDDSI) knowledge and practical skills				
Resources available to support knowledge and skill development: • Refer to the IDDSI Website **–** **https://iddsi.org** • Refer to Dysphagia Food and Dysphagia Essentials **-** **https://portal.e-lfh.org.uk/**				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
1.1	Demonstrates knowledge of the IDDSI framework – i.e., knowledge of the different levels of food and fluids from 0-7 as per the framework.			
1.2	Demonstrates knowledge of the tests available for each IDDSI level – both foods and fluids.			
1.3	Knows where a Speech and Language Therapy Care Eating and Drinking Care Plan is kept and what it looks like and be able to identify the correct IDDSI Level requirements for a patient.			
1.4	Awareness of different brands of thickeners and the rationale for always following the brand instructions when preparing thickened drinks.			
1.5	Demonstrates practical skills in accurately preparing a thickened drink – Level 1,2,3 and 4.			
1.6	Demonstrates practical skills in accurately preparing food/snacks – Levels 4, 5, 6.			

Section 2 applies to ALL staff who are involved in preparing food or drinks, giving food and drinks to people or assisting people to eat and drink

Section 2: Dysphagia awareness essential skills				
Resources available to support knowledge and skill development: • Refer to local policies • Refer to Dysphagia Essentials - available online **https://www.e-lfh.org.uk/programmes/dysphagia/** • Refer to Dysphagia Quality and Safety - available online **https://www.e-lfh.org.uk/programmes/dysphagia/**				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
2.1	Awareness of the Trust's/ Company/Service's Dysphagia policy and any local service/ward/care home policy relating to dysphagia.			
2.2	Awareness and knowledge of what Dysphagia is, who can get it, and why it is essential to prepare food and drinks at the correct prescribed IDDSI level.			
2.3	Demonstrates basic knowledge of the anatomy and physiology of swallow, the normal swallow process and the signs, symptoms and consequences of dysphagia.			

Section 3 applies to direct care roles that involve assisting people to eat and drink

Section 3: Information				
Resources available to support knowledge and skill development: • Refer to Dysphagia Essentials – available online **https://www.e-lfh.org.uk/programmes/dysphagia/** • Collate evidence gained from hands on experience over time. • Demonstrate knowledge via supported discussions with supervisor.				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
3.1	Demonstrates knowledge of the **factors** that can impact on the persons eating and drinking such as psychological issues, cognition, alertness, sensory or perceptual issues, posture, oral hygiene and dentition and communication difficulties.			
3.2	Demonstrates an ability to obtain additional information from the individual, relatives or carers. This may include history and onset of eating and drinking difficulties, individual and carer perceptions, cultural awareness, and allergies.			
3.3	Demonstrates the importance of considering the **individual's needs** when eating and drinking. For example - their general health and prognosis, ability to communicate, physical, variability, cultural needs, sensory needs, the influence of endurance/fatigue, religious considerations, awareness of resources/equipment available, food and drink likes and dislikes.			

Section 4 applies to direct care roles that involve assisting people to eat and drink

Section 4: Knowledge of environmental factors				
Resources available to support knowledge and skill development: • Refer to Dysphagia Essentials **-** – available online **https://www.e-lfh.org.uk/programmes/dysphagia/** • Collate evidence gained from hands on experience over time. • Demonstrate knowledge via supported discussions with supervisor.				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
4.1	Demonstrates knowledge of environmental factors that can impact on eating and drinking such as distractions, odours, and positioning.			
4.2	Demonstrates knowledge of support available to assist people to eat and drink. For example - having dentures available, specialist eating utensils, cutlery and equipment to assist eating and drinking.			
4.3	Demonstrates knowledge of the importance of sensory awareness on eating and drinking – for example ensuring a person has their glasses on and hearing aids in, is supported to smell their food before eating.			
4.4	Demonstrates knowledge of factors that can assist in successful eating and drinking such as bolus size, temperature, pace, appearance, taste etc.			

Section 5 applies to direct care roles that involve assisting people to eat and drink

Section 5: Assisting people to eat and drink safely				
Resources available to support knowledge and skill development: • Practical Training Sessions (local) • Eating and Drinking Safely (Guidance contained with the Eating and Drinking Swallowing Competency Framework) • Refer to Local Policies and Procedures such as infection control and emergency procedures. • Refer to Dysphagia Quality and Safety - available online **https://www.e-lfh.org.uk/programmes/dysphagia/** • Refer to Dysphagia Essentials – available online **https://www.e-lfh.org.uk/programmes/dysphagia/**				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
5.1	Demonstrates knowledge of the importance of carrying out hand hygiene prior to assisting a patient to eat and drink.			
5.2	Demonstrates practical knowledge in how to perform mouth care prior to assisting a patient to eat and/or drink and following.			
5.3	Demonstrates awareness of how poor oral care can impact on a person's willingness to eat/drink and the physical consequences of poor mouth care such as increased risk of aspiration pneumonia.			
5.4	Demonstrates knowledge and practical experience of following eating and drinking safely guidance (ensuring optimal positioning, ensuring person has dentures, hearing aids and glasses, ensuring the person is sufficiently alert, encouraging independence and ensuring appropriate mouthful sizes and pacing).			
5.5	Demonstrates knowledge of strategies to support people to maintain independence and dignity when eating and drinking.			

Section 5: Assisting people to eat and drink safely				
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Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
5.6	Demonstrates awareness of when to seek help if concerns arise during assisting a person to eat or drink.			
5.7	Up to date with basic life support including choking first aid.			
5.8	Demonstrates awareness and knowledge of the local policy on what to in an emergency.			
5.9	Demonstrates knowledge of when to terminate eating/drinking if there are signs of choking, respiratory distress, cramming (or another emergency).			
5.10	Demonstrates the basic principles in assisting someone to eat and drink at the end of life.			

Section 6 applies to direct care roles that involve assisting people to eat and drink

Section 6: Documentation				
Resources available to support knowledge and skill development: • To be checked and signed off by supervisor. • Refer to Local Record keeping Policy and Procedures. • Refer to Dysphagia Quality and Safety **-** available online **https://www.e-lfh.org.uk/programmes/dysphagia/**				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
6.1	Accurately document the amount of food and or fluids taken within the local food and fluid chart.			
6.2	Accurately document entries into the local oral care record as required.			
6.3	Writes clear and concise entries in medical or social care records as required in specific role.			

Section 7 applies to direct care roles that involve assisting people to eat and drink

Section 7: Following the speech and language therapy eating and drinking care plan				
Resources available to support knowledge and skill development: • Evidenced over time and observed by supervisor. • Refer to Dysphagia Essentials – available online **https://www.e-lfh.org.uk/programmes/dysphagia/**				
Subsection number	**Knowledge/skill required**	**Evidence**	**Date completed**	**Supervisor sign-off**
7.1	Demonstrates ability to accurately and consistently follow the instructions documented in a swallowing care plan or equivalent.			
7.2	Understands the principals of “Eating and Drinking with Acknowledged Risk” and follows the guidance provided by the speech and language therapists where this exists in a person’s care plan.			
7.3	Understands the importance **of never copying and pasting** parts of a care plan into another document. For example, the care home electronic care plan.			

Appendix 1 – Job role and organisation of working group members

Job role	Organisation/area
Registered Manager	The Lantern Community
Speech and Language Therapist	Herefordshire and Worcestershire Health Care Trust
Speech and Language Therapist	Adult Learning Disability Health Team, Sirona
Head of Speech and Language Therapy	Avon Wiltshire Partnership Trust
Provider	Optimal Living Ltd.
Community Service Manager, Learning Disability Services	Avon Wiltshire Partnership
Assistant Locality Manager	Dimensions (UK) Ltd
Quality Assurance Manager - LeDeR Administration	Bath Swindon Wiltshire ICB
Commissioner	Plymouth City Council
Community Nurse - CHC	Wiltshire Health and Care
Operational Trainer	Brandon Trust
Learning Disability Nurse	Salisbury NHS FT
Head of Speech and Language Therapy	Wiltshire Health and Care
Speech and Language Therapist	Cornwall Foundation Trust
Head of Speech and Language Therapy	Somerset NHS Foundation Trust
Associate - Learning Disability and Autism Projects/LeDeR LAC	BNSSG ICB
LeDeR Local Area Contact	Bath Swindon and Wiltshire ICB
Speech and Language Therapist	Gloucestershire Health Care
Care Provider Support Officer	Somerset County Council
Speech and Language Therapist	Cornwall Foundation Trust
Learning Disabilities Mortality Reviewer	Somerset
Clinical Lead	Alina Homecare
Manager	The Grange Care Home
SW NHSE Regional LeDeR Coordinator	SW NHSE
SW LDAP Equalities Lead	SW NHSE
Devon LeDeR Senior Reviewer	Devon ICB
Head of Quality and Compliance	Brandon Trust

Job role	Organisation/area
Team Manager, CLDT / Lead for LD Speech and Language Therapy Services	Gloucestershire Health and Care NHS Foundation Trust

Versions

Version 1 19th January 2022
Version 2 Amended by Karen Dockings on 23rd February 2023
Version 3 Amended by Nicola Powell on 6th March 2023
Version 4 Amended by Karen Dockings and Nicola Powell on 12th April 2023
Version 5 Amended by Karen Dockings and Nicola Powell on 13th April 2023
FINAL Amended by Nicola Powell following final review by SW Dysphagia working Group 19th April 2023