

Management of Thickening Agents for Dysphagia: Checklist for Care Home Staff

➤ Has an appropriate assessment been performed on the resident's requirement for a thickening agent?

A specialist dysphagia assessment is needed for all residents with dysphagia needing modified texture diets and drinks. This is undertaken by a speech and language therapist (SLT) or other dysphagia trained practitioner (DTP). To manage the risk whilst awaiting assessment, thickener can be trialled BUT only with the agreement of the GP. Thickener should not be used without GP prescription and accompanying referral for specialist assessment. Dysphagia advice will be reviewed as clinically indicated.

➤ Is there a detailed plan on the management of thickening agent for individual residents?

Following assessment, written information will be provided by the SLT or DTP assessor detailing the level of thickener required in accordance with International Dysphagia Diet Standardisation Initiative (IDDSI) guidance. The care home is responsible for incorporating this information into the care plan with any other strategies to support safer and more effective eating and drinking. The care home should have robust systems in place to ensure that the most up to date information is communicated to all relevant staff, INCLUDING kitchen staff.

➤ Is there a list available of all residents who are currently prescribed a thickening agent and its brand?

In areas where staff are preparing food and drinks there should be a 'see at a glance' list detailing residents dietary requirement needs. This should include the IDDSI level of thickened drinks and / or food required and the brand of thickener prescribed. The siting of the list should consider patient confidentiality and be placed in a discreet place out of sight of residents and visitors e.g. inside of a cupboard door.

➤ Is it clearly identifiable which brand of thickening agent is prescribed as the preferred choice for the resident's use?

Records must clearly state the brand of thickener prescribed for the individual, stating any resident preferences. Care home staff should be aware there are a number of commercially available thickening agents. Some are gum-based, whereas others are starch-based, which have different properties and methods for mixing, which can lead to errors. The first-line choice of thickening agent in Sheffield is Nutlis® Clear which is a gum-based thickener. It is intended that the majority of residents will now use this product although alternatives should be prescribed to support patient preference or for other clinical reasons.

➤ Are thickening agents stored appropriately?

A risk assessment should be undertaken on the storage of thickening agent for each individual resident. Whilst it is important that thickening agents remain readily available for use by appropriately trained staff (and family), all need to be aware of the potential risk to safety through accidental ingestion. Care home staff should know where both the stock and the current, open container, of thickening agent are kept. Different brands should be segregated to avoid selection error.

➤ Is there appropriate recording of the use of thickening agents?

Any recording sheets (MAR charts, fluid balance charts, food charts) need to identify the resident, the brand of thickening agent and a descriptor of the thickness (see image below).

➤ Are staff aware of how to thicken food / drink to the appropriate thickness as described by the assessor?

All staff providing direct care should be trained in dysphagia as their role requires. This includes the knowledge and practical skill to make up thickened drinks correctly according to IDDSI guidance. It is recommended that this should be part of the induction training programme with refresher training given as required. A blended approach is ideal through e-learning alongside practical demonstration. Relatives should be shown how to make up drinks appropriately if giving drinks when visiting or outside the care home. When making up drinks to a required IDDSI consistency, the manufacturer's instructions on the tin should be followed. It is important to measure out the volume of fluid and use level scoops of thickener so that the ratios are correct. Occasionally the quantity of thickener may need to be adjusted in order to achieve the required consistency. In these circumstances the SLT / DTP assessor will be able to advise. Thickened drinks should be left to thicken fully before serving and re-stirred before drinking or if left standing for a while. IDDSI Levels can be benchmarked using the IDDSI Flow Test.

➤ Is there adequate stock of thickener for each resident and are opened manufacturer's containers kept clean and dry?

Thickening agents must always be available as the demand for fluids is unpredictable, especially in warm environments. Quantities are supplied in tins which should be regularly reviewed to prevent running out of stock or stockpiling. Bulk prescribing could be considered to address availability and waste concerns. Lids must be securely replaced on any opened containers and scoops kept clean and dry to prevent any moisture entering. Opened containers should be inspected periodically to ensure that they are still 'fit for use'.

➤ Can thickener be bulk prescribed?

If several residents in the care home require thickened drinks, * bulk prescription may be indicated. If prescribed in bulk from the GP, thickener must be supplied as individual tins which are stored appropriately with records identifying which residents it is for. Prescribed thickeners should not be used for catering. Alternative catering thickening agents are available to purchase e.g. Thick and Easy® Original as a catering pack.

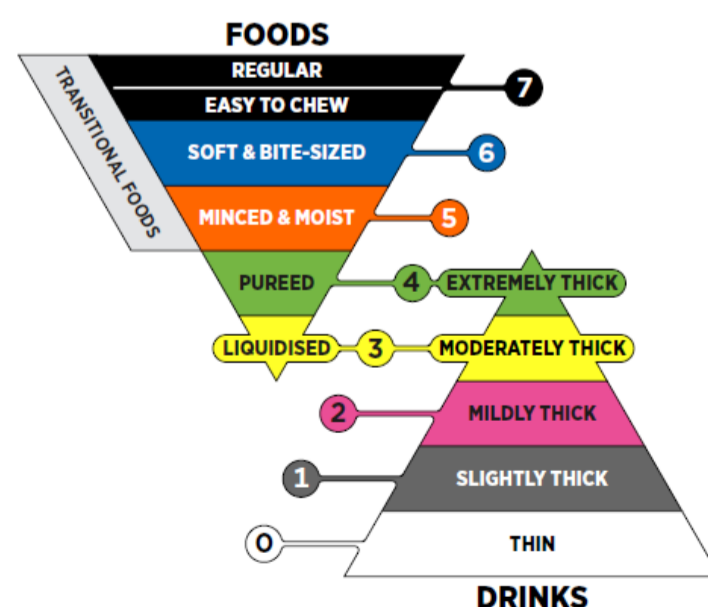
➤ Have risk assessments been performed where there are jugs of water available to residents who have their drinks thickened?

Jugs containing water left in a resident's room constitute a risk for those who have thickened drinks. Risk assessments should be performed that document appropriate storage of water jugs for each resident. Manufacturing advice from Nutricia is to 'prepare the food or drink per serving and use within 2 hours' Before serving, staff should stir and check the drink consistency remains appropriate.

To avoid confusion and to keep residents safe a common language is used to describe texture modified diets and drinks. This should be used in all verbal and written communications across care and catering.

The International Dysphagia Diet Standardisation Initiative (IDDSI) is a framework of eight levels (0-7) describing specific food and fluid textures. Each level has a name, number and colour code with detailed descriptions and ways to test if the texture / flow is correct. Fluid textures are described in Levels 0 – 4. For further information and resources including printable posters and videos and testing methods see: <http://iddsi.org>

For dysphagia learning see: HEE Dysphagia e-learning for healthcare - freely available <https://www.elfh.org.uk/programmes/dysphagiaguide/>



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