

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

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

Goal - Following a dysphagia assessment, performed by Speech and Language Therapy with involvement of the GP or any other appropriate healthcare professional, there has been a recommendation to prescribe a thickening agent.

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

Goal – Detailed information is sent from the Speech and Language Therapist in the form of a letter detailing the thickener requirement for the individual and also information for the kitchen staff. This detailed information forms the management plan and is effectively communicated to appropriate staff. This plan is readily accessible at the point of service by appropriate staff in the different areas where food and/or drink are prepared e.g. residents own room, dining room etc. The plan is followed, evidenced by written documentation. The residents management plan includes; the personalised goal, food and drink types, equipment requirement, positioning, assistance required, environment factors, likes/dislikes, communication, things to look out for, contact details and review date to assure current status of thickener for resident is appropriate. Staff have awareness if dysphagia is permanent or a temporary condition.

Q. Is there a list available, for appropriate staff, of all residents who are currently prescribed a thickening agent and its brand?

Goal – There is effective communication to ensure all staff that prepare food, feed or offer drinks to residents on thickening agents are aware of the dysphagia status of the resident, have a clear understanding of the management of the thickening agent and correct interpretation of the consistency of thickener required.

Q. Is it clearly identifiable which brand of thickening agent the individual resident is prescribed and that this is the appropriate one as well as the preferred choice for the resident's use?

Goal – Staff are aware there are a number of commercially available thickening agents. Some are gum-based and some are starch-based, some are used to thicken fluid only and others are indicated to thicken both foods and fluids. Records clearly state the brand of thickener for the individual, stating resident preferences if appropriate. Where the thickener is bulk prescribed it is stored appropriately and identifies the residents it is supplied for.

Q. Are the thickening agents stored appropriately?

Goal – A risk assessment is performed on the storage of the thickening agent for the individual residents. There is restricted access which allows ready availability for use by appropriately trained staff (and family). Staff know where both the stock and the current, open container of thickening agents are kept.

Q. Is there appropriate recording of the use of thickening agents?

Goal – The recording sheets (MAR charts, fluid balance charts, food charts) contain the residents' details, the brand of the thickening agent and a descriptor of the thickness (see table below). There should also be a record identifying the general number of scoops to actual volume to make the required consistency, the time the drink was made, the type and amount of fluid that has been thickened and the amount that has been consumed.

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

Goal – Staff are trained to ensure the interpretation of the consistency required is correct and constant. Instructions given on the manufacturer's container are followed to deliver the required consistency in line with International Dysphagia Descriptor Standardisation Initiative (IDDSI). Staff understand that scoop size differs depending on what brand of thickening agent is used. Scoops need to be kept with the correct brand of thickener. When following the descriptor, it may be necessary to adjust the quantity of thickener in order to achieve the required consistency - see below the complete IDDSI framework. Thickened drink is re-stirred prior to consumption if left standing for any period of time. Information on dysphagia management including advice on how to prepare food is made available to residents, carers and family members. Shakers supplied by the companies are used routinely to measure and prepare the thickened drinks.

Q. Is there adequate stock of thickener for each resident?

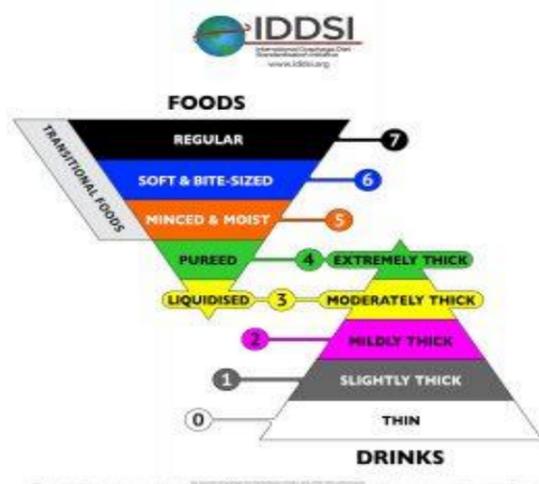
Goal – The prescribed thickener is available at all times as the demand for fluids is unpredictable especially in warm environments. Quantities are supplied in tins and are reviewed to prevent running out of stock or stockpiling in order to reduce the risk of residents being without thickening agents, borrowing from other residents or creating waste. Bulk prescribing is considered to address availability and to avoid waste*. Note that catering packs should only be used in kitchen environments in the preparation of texture modified diets.

Q. Are the opened manufacturer's containers kept clean and dry?

Goal – Lids of opened containers of thickening agents must be replaced and the scoops kept clean and dry to prevent any moisture entering the container. Opened containers should be inspected periodically to ensure that they are still 'fit for use'.

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

Goal – Risk assessments performed and documentation highlight appropriate storage of water jugs for each resident.



From October 2018 within Sheffield, the new system for describing texture modified foods and fluids replaces the current guidance. The International Dysphagia Diet Standardisation Initiative (IDDSI) provides a new global standardised terminology and definitions to describe texture modified foods and thickened liquids used for individuals with dysphagia of all ages, in all care settings, and all cultures.

The International Dysphagia Diet Standardisation Committee has introduced a dysphagia diet framework consisting of a continuum of 8 levels (0-7). Levels are identified by numbers, text labels and colour codes. They have produced resources which include printable posters and labels, conversion charts, audit sheets, implementation guides, presentations, publications, shared resources from other users and a link to the IDDSI YouTube site where they have videos and webinars available for viewing.

For further information and resources <http://iddsi.org/>