



Practice Alert

Dysphagia, safe swallowing, and mealtime management

November 2020

Key points

- ‘Dysphagia’ is difficulty with swallowing.
- NDIS providers have obligations to provide competent and safe supports to participants with dysphagia and manage the associated risks
- Symptoms include: difficulty biting or chewing on food, coughing or choking on food or fluid, and food or drink falling from a person’s mouth.
- Dysphagia symptoms can worsen as people get older.
- Dysphagia is associated with a wide range of disabilities and health conditions.
- People with disability who have dysphagia are more likely to die from choking or respiratory illnesses or have serious health complications because of poor management of dysphagia.
- Training and knowledge about identifying and managing swallowing problems can minimise risks of serious health complications and improve a person’s mealtime-related quality of life.
- A proper assessment of a person’s swallowing and nutritional needs can reduce the negative impacts of dysphagia and improve a person’s safety and quality of life.

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.

Provider obligations related to dysphagia

NDIS Code of Conduct

You must comply with the NDIS Code of Conduct when providing supports or services to NDIS participants with dysphagia or swallowing difficulties.

The NDIS Code of Conduct requires all NDIS providers and workers who deliver NDIS supports to NDIS participants to, among other things:

- provide supports and services in a safe and competent manner with care and skill
- promptly take steps to raise and act on concerns about matters that might have an impact on the quality and safety of supports provided to people with disability.

NDIS Practice Standards

If you are a registered NDIS provider, you also have obligations under the NDIS Practice Standards, as part of your conditions of registration, that relate to the delivery of safe, quality supports and services, and the management of risks associated with the supports you provide to NDIS participants.

The NDIS Commission's guidance on the [NDIS Practice Standards and Quality Indicators](#) provides a further resource to assist registered NDIS providers understand their obligations.

The NDIS Practice Standards that are most relevant to this alert include:

- **Access to appropriate supports:** Each participant can access supports appropriate for their needs
- **Safe environment for supports:** Each participant can access supports in a safe environment which is appropriate for their needs
- **Risk Management:** Risks to participants are identified and managed.
- **Quality Management:** Each participant benefits from a quality management system relevant and proportionate to the size and scale of the provider, which promotes continuous improvement of support delivery.
- **Information Management:** Each participant's information is managed to ensure that it is identifiable, accurately recorded, current and confidential. Each participant's information is easily accessible to the participant and appropriately utilised by relevant workers.
- **Incident Management:** Each participant is safeguarded by the provider's incident management system, ensuring that incidents are acknowledged, respond to, well-managed and learned from.
- **Human Resource Management:** Each participant's support needs are met by workers who are competent to carry out their role and have the relevant expertise, experience and qualifications to provide supports.

Recommended ways to support NDIS participants with dysphagia

There are a number of steps you can take to provide safe and competent supports to participants with dysphagia to try to avoid the risks of choking or aspiration pneumonia, which could lead to the participant's death or serious health complications.

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

Ensure staff know dysphagia symptoms and risks

Your staff should have training to improve their knowledge and develop skills so they can support participants 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 participants with possible swallowing difficulties to be assessed for dysphagia

If a participant shows any sign or symptom of swallowing difficulty, you should 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 participants with dysphagia to have a mealtime management plan

You should support a participant with dysphagia 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

You should ensure that:

- staff 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 staff are available to monitor people with dysphagia during mealtimes
- staff know how to respond if a participant starts to choke during mealtimes, including when they should call an ambulance
- mealtime safety issues for people with dysphagia are regularly considered in staff meetings and addressed in day-to-day procedures, participants' documentation, and plans for transition to hospital

Ensure mealtime management plans are regularly reviewed

Mealtime management plans need to be reviewed regularly. You should support a participant 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 you should request a review.

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](#).

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General enquiries

Call: 1800 035 544 (free call from landlines). Our contact centre is open 9.00am to 4.30pm in the NT, and 9.00am to 5.00pm in other states and territories Monday to Friday, excluding public holidays.

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