Policy
Nag 5

BLOMFIELD SPECIAL SCHOOL & RESOURCE CENTRE
DYSPHAGIA POLICY

RATIONALE:
The Board, Principal, parents and staff agree that:

1. Students must be safe while eating in school. This includes providing trained personnel, appropriate food, and procedures to minimize risks for choking and aspiration during oral feeding.
2. Students should be adequately nourished and hydrated so that they can attend to and fully access the school curriculum.
3. Students should be healthy (e.g. free from aspiration pneumonia or other illness related to malnutrition or dehydration) to maximize their attendance at school.
4. Students should develop skills for eating efficiently during meal and snack times, so that they can complete these activities with their peers safely and in a timely manner.
   (ASHA, 2007)

PURPOSE:
This statement relates to all staff, work experience students and volunteers working in the school. It identifies the practice for orally and non-orally fed students affected by eating, drinking and swallowing difficulties (Dysphagia). Eating, drinking and swallowing include the introduction, preparation, transfer and transport of food and liquid from the mouth through the oesophagus and into the stomach. In addition, management of saliva and oral intake of medications are included.

Guidelines

Students with difficulties may demonstrate

- Choking, aspiration and/or penetration
- Oral motor impairments
- Coughing/throat clearing during and/or after eating and drinking
- Wet breath sounds
- Spillage of food and liquid from mouth
- Drooling
- Food remaining in mouth (pocketing) after swallowing
- Swallowing solid food without chewing
- Inability to drink from different vessels

- Multiple swallows per bite of food or sips of liquid

- Effortful swallow
- Gagging or vomiting associated with eating or drinking
- Sensory impairments
- Maladaptive behaviours during eating activities such as ritualistic behaviours.
- Refusal to eat
- Prolonged/stressful mealtimes
- Restricted acceptance of food and liquids
- Other problems
- Weight loss or lack of weight gain
- Nutrition and hydration deficits
- Frequent respiratory illness resulting in reduced school attendance
- Constipation, diarrhoea or other gastrointestinal tract problems
- Need for special strategies or distractions at mealtimes

Roles and Responsibility:

Speech Language Therapist (SLT)

- Is the key worker in dysphagia
- Screens new students on arrival
- Identifies at risk students by developing and maintaining a school wide risk feeding register in accordance with the International Dysphagia Diet Standard Initiative (IDDSI)
- Provides assessment, treatment and review in a timely manner
- Recommends a videofluoroscopy swallow study (VFSS) or other instrumental evaluation when indicated
- Works with health professionals to order VFSS
- Attends VFSS when possible
- Communicates closely with health SLT performing VFSS (in accordance with the operational protocol and the Local Level Agreement)
- Establishes safe eating, drinking and swallowing plan – based on recommendations from:
  a) clinical feeding assessment and where further investigation for management is required
  b) VFSS
- Monitors and reviews students swallowing and feeding plans
- Trains school based personnel and parents when needed
- Provides therapeutic intervention
- Communicates with parents regarding assessment, intervention and review
- Communicates with relevant medical professionals when required
- Brings to attention of H & S officer and or Principal when assessments identify student at high risk of
  - i) aspiration
  - ii) penetration
  - iii) or risk of choking
- Coordinates plans and procedures for non-orally feed students based on community nurse recommendations, dietician's plans and parental recommendations
- Convene the wider team – medical, whānau and senior leadership when required
- Stays up to date with current best practice through reading relevant research, articles and attending professional development.

Parents

- Shares knowledge of student's feeding habits, food preferences and meal time environment
- Provides medical and feeding history
- Shares beliefs and cultural practice related to food and eating
- Implements swallowing and feeding goals and strategies in home
- Shares preferences for managing non orally fed students

Occupational Therapist

- Assesses, implements and reviews :
  fine motor skills related to self-feeding
  sensory and regulatory issues
  position and adaptive equipment for eating (in liaison with physiotherapist)

Physiotherapist

- Assesses, implement and reviews:
  postural skills and mobility issues (in liaison with occupational therapist)

Classroom teacher

- Implements the eating, drinking and swallowing plan in the classroom
- Ensures that all staff in the classroom have familiarised themselves with the student's feeding folder
- Monitors changes in student's eating, drinking and swallowing in the classroom, and refers to the SLT
- Coordinates the personnel responsible for feeding students
- Communicates with the parent/guardian
- Oversees mealtime environment to make it safe

Senior Management Team

- Requests medical history of eating, drinking or swallowing difficulties from parents/guardian on enrolment and inform relevant SLT
- Requests medical records of the student on enrolment and during checkpoints
- Ensures that policy for the management of students with eating, drinking and swallowing difficulties are made available to all members of staff
- Coordinates training opportunities for all staff members and ensures that staff only work with individual students when they have had appropriate training and information
- Supports SLT in ongoing professional development in eating, drinking and swallowing difficulties
- Oversees health and safety of student and staff, and makes decisions to support care welfare safety and security of all

Procedures

- Information relating to each student's eating, drinking and swallowing skills will be gained from parents by Assistant Principal/Deputy Principal/Therapy Team Leader at checkpoint or whenever changes occur.
- New students and transitioning students will be screened by SLT to identify whether there is a need for an eating, drinking and swallowing assessment
- Eating, drinking and swallowing assessment will be carried out in a multidisciplinary framework led by the SLT, including the occupational therapist (OT) and physiotherapist (PT) as identified. Additional support may be sourced from health SLT, dietitian and/or nurse.
- Eating, drinking and swallowing assessment and plans to be shared with relevant staff and families/carers. Copies are to be sent to relevant outside agencies.
- Eating, drinking and swallowing plans to be updated and reviewed as identified by SLT After appropriate training, staff are expected to follow the eating, drinking and swallowing plans. It is their responsibility to notify the SLT if they have any questions, problems or difficulties. Staff must understand that if they do not follow the plan they will therefore be held responsible for the health and safety of the student.
- There will be in class ongoing training for all staff on basic principles and theory of eating and drinking. Until new staff have met with the SLT and discussed a plan, they may only assist students who present with no dysphagic difficulties and require minimal assistance. They will be monitored and supervised by more experienced staff within the class team.
- Where identified outside personnel will come in to train staff e.g. community nurse for tube fed students.
- For students transitioning between classes the relevant staff will meet to share feeding information
- Each student with eating, drinking and swallowing difficulties will have a feeding plan in the classroom that contains relevant information. The following may be found in the student file.
    - Feeding plan from SLT
    - Dietitian plan
    - Recommendations from community nurse and/or parents
    - Blomfield Gastrostomy procedures
    - Starship Children's Health Parents/ Caregivers guide for Gastrostomy Care
    - Mickey Button Action Plan
    - Contact details of relevant personnel e.g. community nurse, parent, SLT etc. and when to contact them
    - Modified diet/thickened fluids

Referrals for eating, drinking and swallowing

- **Internal referrals**
  All students at Blomfield Special School will be assessed and monitored for their eating, drinking and swallowing skills as part of the service they receive while attending school. Students previously assessed will be reviewed periodically or when requested by staff or family. If staff or family have any concerns they should contact the SLT directly.

- **Onward referrals and second opinions**
  It may be the SLT's opinion that a further assessment (such as videofluoroscopy) or second opinion is required. The SLT will seek permission from the parents/guardian prior to making the referral.

Cultural considerations

The school will work with parents and/or carers to take into consideration their cultural values and beliefs when assessing, planning intervention and reviewing students eating, drinking and swallowing.

Disagreements

- If a disagreement occurs in the management of a student between the family/carers and the team (SMT, SLT or any other relevant professionals) there will be an attempt to find a resolution between the parties through discussion.
- If no agreement can be met then further counsel will be sought from the paediatrician and the principal.
- The school will then inform the family via letter on their position regarding management. If agreement cannot be made it will be the responsibility of the family to feed the student at school.
- The school will take no responsibility for the outcomes of the student based on their feeding management.

Non-orally fed students

- All information relating to student's non-oral feeding will be kept in their feeding folder that is in the classroom and accessible to all relevant staff.
- All staff working with the student will have training by the student's community nurse in how to tube feed and care for the gastrostomy and stoma, this will be arranged by the SLT assigned to the student.
- Where a student is fed via a pump the Nutrica community nurse will also provide training to the relevant staff in its use and care; this will be arranged by the SLT or AP assigned to the student.
- An easy to follow plan for the staff to manage the student's feeding during school will be written by the SLT based on the dietitian's plan, community nurse recommendations and parents' recommendations.
- An up to date dietitian's plan will be in the feeding folder.
- Staff will follow the school's gastrostomy procedures that are based on Starship's Children Health Parents/Caregivers guide for Gastrostomy Care.

Reference:
American Speech Language Hearing Association. (2007). *Guidelines for speech-language pathologists providing swallowing and feeding services in school* [Guidelines]. Available from www.asha.org/policy.

Ministry of Health & Ministry of Education. (2014). Local Level Agreement: Effective Interagency and Multidisciplinary Service Delivery of Therapy and Assistive Technology/Equipment Services for Children and Young People with Disabilities for the Waitakere Teams of the North West District.

Definitions

Aspiration
The action of material (e.g. food) entering the airway below the true vocal folds. This can occur before, during and after the swallow.

Dysphagia
A feeding and swallowing disorder that occurs in the mouth, pharynx, larynx and/or esophagus, indicating a delay and/or disorder in the development of eating/drinking skills. This includes difficulty with ingestion of food and liquid, saliva management, and taking oral medications

Penetration
The action of material entering the larynx above the true vocal folds.

Videofluoroscopy swallow study
A radiologic examination of swallowing function that uses a special movie-type x-ray called fluoroscopy. The patient is observed swallowing various types of substances that can be seen by fluoroscopy (usually liquid barium and/or foods coated with barium) in order to evaluate his or her ability to swallow safely and effectively. Patients are often observed swallowing various consistencies and textures, ranging from thin barium to barium-coated cookies. This exam is often performed with a speech-language pathologist present.

Reviewed and adopted by the Board of Trustees: 22.09.2022

Chairperson: ..... Date: 22.09.2022

Shirley Harvey

Next review: Sep. 2025