

Reference: HSC (SQSD) 16/18 Date of Issue: 5 July 2018

# Resources to support safer modification of food and drink

For Action: Related documents:

Chief Executives HSC Trusts for cascade to:

Directors of Mental Health Services
Directors of Disability Services
Directors of Acute Services
Chief Executive HSCB/PHA
Chief Executive RQIA
Chief Executive, NIMDTA

For Information:

Distribution as listed at the end of this circular.

Report on the Regional Choking Review
Analysis – Thematic Review

Implementation: 1 April 2019

DoH Safety and Quality Circulars including Patient Safety Alerts can be accessed on: <a href="https://www.health-ni.gov.uk/topics/safety-and-quality-standards/safety-and-quality-standards/safety-and-quality-standards">https://www.health-ni.gov.uk/topics/safety-and-quality-standards/safety-and-quality-standards</a>

circulars

## **SUMMARY**

NHS Improvement has issued Patient Safety Alert <a href="NHS/PSA/RE/2018/004">NHS/PSA/RE/2018/004</a> "Resources to support safer modification of food and drink" to eliminate use of the imprecise term 'soft diet' and assist providers with safe transition to the International Dysphagia Diet Standardisation Initiative (IDDSI) framework, which introduces standard terminology to describe texture modification for food and drink.

## **ACTION**

#### Chief Executives of HSC Trusts should:

- Identify a senior clinical leader who will bring together key individuals and stakeholders to plan and co-ordinate safe and effective local transition to the IDDSI framework and eliminate use of imprecise terminology including 'soft diet'.
- Develop a local implementation plan, including revising systems for ordering diets, local training, clinical procedures and protocols, and agree roles and responsibilities for communicating patient information.



 Through a local communications strategy (e.g. newsletters, local awareness campaigns etc.) ensure that all relevant staff are aware of relevant IDDSI resources and importance of eliminating imprecise terminology including 'soft diet', and understand their role in the local implementation plan.

## Chief Executive, HSCB and PHA should:

- Disseminate this circular to all relevant HSCB/PHA staff, community services, General Practices and Community Pharmacies.
- Consider it through the normal HSCB/PHA processes for assuring implementation of safety and quality alerts.

## Chief Executive, RQIA should:

• Disseminate this circular to all appropriate Independent sector providers.

## Chief Executive, NIMDTA should:

• Disseminate this circular to doctors in training in all relevant specialties.

# **BACKGROUND**

A review of National Reporting and Learning System (NRLS) incidents over a recent two-year period identified seven reports where patients appear to have come to significant harm because of confusion about the meaning of the term 'soft diet'. These incidents included choking requiring an emergency team response, and aspiration pneumonia; two patients died. An example incident reads: "Patient with documented dysphagia given soft diet including mince and peas at lunch...unresponsive episode.... Difficulty ventilating patient overnight. Peas [suctioned out via] endotracheal tube." Around 270 similar incidents reported no harm or low harm such as coughing or a brief choking episode. These incidents suggest the continuing widespread use of the term 'soft diet' can lead to patients needing a particular type of modified diet being harmed.

Dysphagia is the medical term for swallowing difficulties and a sign or symptom of disease, which may be neurological, muscular, physiological or structural. Dysphagia affects people of all ages in all types of care setting. Food texture modification is widely accepted as a way to manage dysphagia.

Terms for fluid thickening, such as 'custard thickness', have varied locally and numerical scales have been used by industry. National standard terminology for modified food texture, including terms such as 'fork-mashable', was agreed in 2011 and widely adopted by the hospital catering industry and many clinical settings. However, local variations have persisted for both food and fluid texture, confusing patients, carers and health and social care staff. The imprecise term 'soft diet' continues to be used to refer to the modified food texture required by patients with dysphagia, and others without dysphagia, for example, with lost dentures, jaw surgery, frailty or impulsive eating.



The International Dysphagia Diet Standardisation Initiative (IDDSI) has developed a standard terminology with a colour and numerical index to describe texture modification for food and drink. Manufacturers will be changing their labelling and instructions accordingly, and aim to complete this by April 2019.

Transition from the current range of food and drink texture descriptors to IDDSI framework for people with dysphagia needs careful local planning to ensure it happens as soon and as safely as possible.

The alert issued by NHS Improvement provides links to a range of resources to assist with transition to the IDDSI framework and eliminate the use of imprecise terminology.

## **Enquiries:**

Any enquiries about the content of this circular should be addressed to:

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Yours sincerely

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#### Distributed for information to:

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Director of Nursing and Allied Health Professions, PHA
Director of Performance Management & Service Improvement, HSCB
Safety and Quality Alerts Team, HSC Board

Chief Executive, NIAS

Prof. Donna Fitzsimons, Head of Nursing & Midwifery, QUB

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