

Dysphagia Care Plan

Name: <div style="text-align: center; font-size: 1.2em;">Mary Smith</div>	Location: <div style="text-align: center; font-size: 1.2em;">Ward 2</div>
Equipment: <div style="text-align: center; font-size: 1.2em;">10ml Provale Cup</div>	
Positioning: <div style="text-align: center; font-size: 1.2em;">Ensure Mary is sitting fully upright with head support</div>	
Drinks: <div style="text-align: center; font-size: 1.2em;"> IDDSI Level Fluids </div> <div style="text-align: center; font-size: 1.2em;"> Nutilis Clear 2 scoops p/200ml </div>	
Food: <div style="text-align: center; font-size: 1.2em;"> IDDSI Level SOFT & BITE-SIZED Diet </div>	
Supervision: <div style="text-align: center; font-size: 1.2em;">Constant 1:1 Supervision</div> <div style="text-align: right; font-size: 0.8em; margin-top: 5px;">PTO for definitions of supervision</div>	
Medication: <div style="text-align: center; font-size: 1.2em;">Small tablets only, one at a time, slowly, with IDDSI L2 fluid</div>	
Strategies: <ol style="list-style-type: none"> 1. Small mouthfuls, one at a time, slowly 2. Encourage a sip of fluids every 3-4 mouthfuls 3. Ensure Marys mouth is clear after eating 	
Please monitor for signs that the person may not be managing oral intake: <ul style="list-style-type: none"> •Coughing or choking during eating or drinking, wet sounding voice during and/or after intake •Shortness of breath (SoB), spikes in temperature, deteriorating chest status <p style="text-align: center; font-size: 0.9em;">If you are concerned, please raise this with the most relevant person e.g., medical team, GP, nurse or care manager for advice and action</p>	

SLT: D. Lightful

Contact Number: 555 1234

Date: 01/08/2021

Supervision Definitions

for People with Dysphagia

Constant 1:1 Supervision:

Is required for people who have been clinically assessed as requiring uninterrupted 1:1 supervision by a designated, appropriately skilled staff member who ensures the dysphagia care plan is adhered to in full. This type of supervision is only requested for people at the highest risk of aspiration or choke, who may have low insight into their swallowing difficulties or who require careful support to carry out strategies that help reduce risk.

Cohort Supervision:

Is required for people who have been identified as having some managed risk of choke. This should be provided by a designated and appropriately skilled member of staff who can see the person at all times and be close enough to respond to any incident immediately. This type of supervision is often used for people who have a history of intermittent choke or who are progressing in dysphagia rehabilitation.

Intermittent Supervision:

Is required for people who have been clinically assessed as requiring intermittent prompts to follow strategies. This level of supervision should be provided by a designated and appropriately skilled member of staff. This type of supervision is often used when independence is being encouraged or where recommendations have recently changed.

Encouragement, Support and Assistance (+/- mealtime set-up):

Is required for people who have mild swallowing difficulties or people who require support with encouragement, prompting, or assistance with dexterity and coordination tasks. This level of supervision can be provided by any designated member of staff. This type of support can include ensuring all necessary items are in reach and assisting with opening, cutting or spreading.

Independent:

No supervision or support is required.