



Dear Colleagues,

It's now only 15 days until our 1 May IDDSI implementation date. It is wonderful to see so many organisations getting ready for IDDSI. Please don't panic if you're not quite ready. Our aim is for organistions to be aware of IDDSI and for planning to be in place. Read on for information about resources and commonly asked questions.

WHAT'S NEW?

Australia IDDSI Q&A webinars:

The Australian IDDSI Q& A Webinars are now complete. Summaries from the March and April sessions are included below.

Summary from 13 March and 10 April Q&A sessions:

- Q: How do we ensure safety in our facilities as pre-thickened labels change?
 - A: New labels encourage people to look more closely. One hospital had consulted their Patient Safety Team who advised their staff to focus on the words (e.g. Mildly Thick, Moderately Thick, Extremely Thick), especially during the transition period for safety. Other organisations have created their own local transition posters using the products that they use at the organisation. There are also 'This will soon be called..." jpegs that can be printed onto stickers available from the resources page of the IDDSI website.

Q: How are different facilities managing the transition process?

- A: Ongoing education and 'on ward audits'. Rolling education using small group huddles including checking of mid meal trolleys as well as meal trolleys. As above, some groups are also using stickers to assist in the transition process. For large health groups, having an IDDSI Champion at each site has been very helpful as the central point of communication.
- Q: How are organisations handling the food piece size requirements for Level 6 Soft & Bite-Sized?
 - A: Some hospitals are manipulating on-site where they have extra support to manually cut the meals just prior to being given to the patient. Others are liaising directly with manufacturers to have meat for example, cut so that when cooked it is 1.5x1.5cm, remembering that meat shrinks when cooked.
- Q: When will the Australian to IDDSI Food Diagram be updated to include Level 7 Easy to Chew, as speech pathologists are using the poster to help nurses become accustomed to the new IDDSI Levels
 - A: The poster has been updated and will be available from the Australia specific section of the <u>resources page of the IDDSI website</u> or by emailing the Project Officer on <u>australia@iddsi.org</u>
- Q: Is it ok to prescribe combination diets such as Level 5 Minced meat with Level 6 Soft & Bite-Sized vegetables?

- A: Yes, if the organisation is able to provide this type of diet, then this may offer people with dysphagia increased food texture variety and choices.
- Q: Are the electronic diet and aged care mangement systems aware of IDDSI?
 - A: Yes, information has been sent to many diet and aged care management systems. In addition to information coming from IDDSI, please also contact your electronic diet and aged care management teams to see how they can assist your transition to IDDSI.
- Q: For paediatric Level 6 Soft & Bite-sized it feels like there is a big jump from 8x8mm to Level 7 Easy to Chew. Do you have any suggestions?
 - A: Consider including the adult food piece size for Level 6 Soft & Bite-sized (1.5x1.5cm) as a step up from Paediatric 8x8mm, and before commencing Level 7 Easy to Chew where there is no particle size restriction. Consider the the needs of the individual and what is required to meet their needs.
- Q: Are paediatric hospitals that have developed recipes for thickened liquids using a range of different thickening agents typically used in paediatric dysphagia willing to share their recipes?
 - A: If there are paediatric hospitals who have developed thickened liquid recipes willing to share their recipes and corresponding IDDSI levels, please email the Project Officer on <u>australia@iddsi.org</u>

Using the IDDSI Flow Test with carbonated drinks, nutritional supplements, and other liquids

The IDDSI Flow Test is designed to measure the thickness of smooth homogenous liquids without lumps, fibres etc. Liquids thickened by hand that have small lumps in them will clog the syringe tip and affect the flow rate. IDDSI International has received some questions about using the IDDSI Flow Test with carbonated drinks and nutritional supplements. The following information has been provided by IDDSI.

Carbonated drinks: these are foams where you have a ratio of liquid to air. If there are just a few bubbles in the thick drink and it is pourable, it should be able to flow through the syringe and be classified as Level 1, 2 or 3. If there are so many bubbles that it won't flow through the syringe, then check with the IDDSI Fork Drip Test to see if it meets the reqirements for Level 3 Moderately Thick dripping in slow dollops continuously through the Fork, or Level 4 Extremely Thick where it holds in a mound above the fork with a small tail beneath it. At Level 4 Extremely Thick it also needs to pass the IDDSI Spoon Tilt Test to ensure that it is not too sticky. Be aware that if you have added thickener to the liquid it needs to be completely incorporated so that you don't end up with a mixed consistency of 'thick foam' and 'thin liquid'. This is visible in the Flow Test where you can see the foam in the bottom of the syringe and then the unthickened, thin liquid sitting on top of it. This alerts the clinician that the thickener has not acted upon the entirety of the liquid, only the foam. This is potentially a choking risk as it is a mixed consistency requiring oral skills to section out the foam and swallow it whilst also containing and managing the thin liquid portion in the mouth.

Solution: Ensure the thickener is well incorporated into the drink. This may need 5-10+ minutes to occur and should always be checked to make sure that all parts of the drink have been thickened, not just the foam portion.

Nutritional Supplements: Nutritional supplements have been identified by IDDSI as complex liquids. They behave differently to standard drinks such as water and juice, for example. Nutritional supplements are often difficult to thicken as there are ionic and microstructural interactions that occur with the ingredients in the nutritional supplement and the thickening agent. There are different interactions depending on whether the main ingredient in the thickener is starch or gum. When thickened by hand, some nutritional

supplements do not thicken at all, and some take a considerably long time to thicken (+ 20 mins). There are miniature solids particles within these drinks. Due to gravity these will flow more quickly towards the syringe tip and may cluster there causing slower flow, with the liquid portion sitting above them. This may give the impression of a thicker liquid on the IDDSI Flow Test than what the eye perceives.

Solution: Always ensure that the liquid is well mixed prior to testing. Test the liquid at least three times. You are looking for 2 readings that are within 1mL of each other for a consistent result. If you have 3 different readings, move to 5 tests. If you still cannot find 2 readings within 1mL of each other the liquid you are testing is not homoegeous and you need to determine whether it is safe to provide to someone with dysphagia. If you are at all concerned that the liquid appears thinner than IDDSI Flow Test use your clinical judgement to determine if it is safe for the person you are treating. For pre-thickened nutritional supplements, ensure that the solution is shaken well to disperse the tiny solids well throughout the liquid for optimal flow through the syringe. Again, if there are any concerns about the thickness level, use clinical judgement to determine if the thickness is safe for the person you are treating. Liquid indigestion medications must also be thoroughly shaken to ensure that the contents are thoroughly mixed before testing. Barium also requires good incorporation and stiring just prior to use so that the barium is well dispersed in the liquid.

Questions: Syringe use for the IDDSI Flow Test in the kitchen and on the ward

Q: Can syringes be used in the kitchen for the IDDSI Flow Test?

A: Yes, syringes can be used in the kitchen. When used for the IDDSI Flow Test they are used as a testing tool. The sample used for testing should not be consumed or re-added to a batch. It should be used for testing purposes and then discarded.

Comment: There has been a push on medical wards to the use enteral syringes for enteral feeds. Some nurses are concerned that there are new syringes specifically for these purposes. IDDSI has assessed the dimensions of the enteral syringes and found they are not 61.5mm from the zero line to the 10mL line, the nozzle opening is different to the IDDSI recommended syringe and as a result they do not provide flow rates that are compatable with the IDDSI levels. Remember that the IDDSI Flow test is a testing tool – like a funnel. It is not intended that patients should ever be fed from the syringe. As in the kitchen, the sample used for testing to confirm a thickness level should be discarded after testing.

Q: Can I use any 10mL syringe?

A: No. You need to be sure that the 10mL syringe you use measures 61.5mm from the zero line to the 10mL line. You can also test by placing 10mL of water in the syringe and letting it flow for 10 secs. The water should run completely through the syringe in 7 secs. You can also use this method to see if a syringe that has been cleaned has any remaining particles in it. To comply with the IDDSI International flow test specifications the BD REF 302143 (10 mL) syringe should currently be used in Australia. At present, to the best of our knowledge, no other syringes available in Australia comply with the IDDSI Flow Test specifications at this time. There are different codes for this product in different parts of the world.

Resources

New RESOURCES

The Australian IDDSI Steering Committee is pleased to announce the availability of a generic presentation training Powerpoint

A generic presentation in powerpoint pdf and accompanying notes can be accessed from the Australian country specific section of the <u>resources page of the IDDSI website</u>. There are many slides available on the powerpoint. Please use the ones that best suit your needs. To credit the slides, please use:

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Reminder - 2018 Australian Webinars and other resources are available on the IDDSI website

All 2018 Australian webinars are available for viewing **free of charge** on the <u>IDDSI Resources page</u> under the *Videos* and also the *Webinar recordings* tab. Webinar content is relevant to all stakeholders (Clinicians, Food service, Catering, Industry, Suppliers, Government, NGOs, Professional Associations, Individuals with dysphagia, Carers)

Encourage people to contact their Speech Pathologist and Dietitian

The introduction of IDDSI has allowed a coordinated focus on helping people with dysphagia. The provision of thickened drinks and texture modified foods is a routine part of the assessment and management of feeding and swallowing difficulties (dysphagia). During this phase of increased awareness clinicians are encouraged to reinforce the key role that Speech Pathologists and Accredited Practising Dietitians provide by including the following types of messages in their education.

If you need assistance with the level of drink thickness of food texture modification needed, please contact your speech pathologist. To find a Speech Pathologist go to: https://www.speechpathologyaustralia.org.au/

If you require support to determine whether a drink of texture modified diet is meeting nutrition and hydration needs, please contact your Accredited Practising Dietitian (APD). To find an APD go to: https://daa.asn.au/find-an-apd/

HAPPY TO HELP

Please feel free to forward this email to others and encourage them to be added to the newsletter group by emailing australia@iddsi.org

Dr Julie Cichero Australian IDDSI Project Officer (0.2 EFT) On behalf of the Australian IDDSI Steering Committee email: <u>australia@iddsi.org</u>

AUSTRALIA: IDDSI Implementation AWARE 1 December 2016 PREPARE 1 January 2018 ADOPT 1 May 2019

Australian IDDSI Steering Committee Members: Dietitians Association of Australia, Speech Pathology Australia, Institute of Hospitality in HealthCare, International Dysphagia Diet Standardisation Initiative, NestléHealth Science, Precise ThickN, Flavour Creations.