



Memo

To: National Directors Acute Operations and Community Operations
Deputy Director General, Operations
National Director QAV
National Director QID

From: Dr Colm Henry, Chief Clinical Officer

Cc: National Lead, National HSCP Office
Director, ONMSD
NCAGL Acute, NCAGL Primary Care, NCAGL Mental Health, NCAGL Chronic Disease
National Director Cancer Control Programme

Re: **Change over to use of the International Dysphagia Diet Standardisation Initiative Framework in Ireland, commencing September 2019.**

The Irish Association of Speech and Language Therapists (IASLT) and the Irish Nutrition and Dietetic Institute (INDI) recommended that the *International Dysphagia Diet Standardisation Initiative Framework* (IDDSI, 2015) replace the current *Irish Consistency Descriptors for Modified Fluids and Food* (2009) developed by IASLT and INDI. Following a process of review and engagement with the Clinical Leads and Clinical Advisory Groups, in November 2018, the HSE Leadership Team agreed to adopt the International Dysphagia Diet Standardisation (IDDSI) Framework.

The adoption of IDDSI Framework is also incorporated into the HSE Food, Nutrition and Hydration Policy for Adult Patients in Acute Hospitals (2019).

Dysphagia (a disorder of swallowing) is broadly estimated to affect 4% of the general population (Bhattacharyya, N. (2014)). This percentage is much higher among older people and in people with conditions such as stroke, Parkinson's disease, dementia, head and neck cancer. Feeding, eating, drinking and swallowing difficulties are also prevalent in certain paediatric populations. Persons with dysphagia can experience difficulty feeding, chewing, swallowing food, drinks or medication and be at risk of choking events. Dysphagia can occur at any age and may be short or long term, with the most common causes of dysphagia being related to underlying medical or physical conditions.

There are a number of significant potential consequences related to dysphagia including life-threatening chest infection (or pneumonia), malnutrition, dehydration and reduced health-related

quality of life. One of the most common ways of managing dysphagia is the use of texture modified foods and thickened liquids. Due to the enormous variation in types of foods and drinks as well as their properties, it is challenging to categorise foods and drinks to ensure universal understanding of the types of foods and drinks that would best meet the needs of an individual with dysphagia. Confusion and miscommunication regarding diet textures and drink consistencies has resulted in increased risk of illness and even death. These are some of the reasons that the IDDSI Framework was developed and agreed by a panel of international experts and is being widely adopted globally.

Transitioning from existing descriptors used in Ireland to IDDSI descriptors will need careful clinical management, cooperation with product providers, supported by training for staff and information for service users, to ensure risks to people with dysphagia are minimised.

At my request, the National Health and Social Care Professionals (HSCP) Office established a working group which has coordinated the review and approval of the IDDSI guidelines for the HSE and also assessed the impact of transitioning from existing diet descriptors to new ones.

Some of the nutrition companies had already applied to change labelling on thickening agents. This posed a potential clinical risk to people requiring altered consistency diets and fluids, across all settings and especially in organisations without access to Speech and Language Therapy. However, further to recent discussions with product providers and involving PCRS and HSE Procurement, it was agreed that a coordinated approach is required. It was agreed that changeover to the IDDSI Framework should take place between September 2019 and April 2020.

It is proposed that implementation of IDDSI framework would occur on a phased basis with implementation planning commencing as soon as possible for all services. Some acute hospital settings may be in a position to commence transition early in the timeframe, particularly for patients with new diagnosis of dysphagia and also those with an existing condition in contact with the service. It is important that all service areas prepare for this transition by establishing a governance group and local implementation plan at Hospital Group/ CHO/ Service provider level as appropriate. It is suggested that in acute hospitals the local governance group may be the Nutrition and Hydration Steering Committee and in all settings Speech and Language Therapy and Dietitian Managers will have a key role to play in the governance group and implementation. It is also noted that an integrated approach would be appropriate given that patients with dysphagia are often assessed by therapy services as inpatients when commencing modified diet and fluids but managed in the community in the long term. This should include consideration of stocks and supplies of new and old product as well as education of relevant staff and patients.

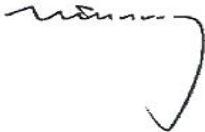
To assist with the implementation of IDDSI guidelines at service level, a suite of resources has been developed by the working sub groups to support operational services during the transition including:

- Generic implementation plan and proposed implementation team;
- Suite of educational resources and recommended training for various staff;
- Generic communication resources;
- High level risks identified nationally together with existing controls and additional actions in progress.

Materials will be hosted on a specific section, Dysphagia 2019 – Change over to IDDSI, on www.hseland.ie

I would be grateful if service managers could be informed of this initiative and that the associated resources attached are forwarded to relevant service managers in acute and community settings with a request that planning for the transition to IDDSI Framework is coordinated locally. A suggested circulation list is attached for convenience.

Yours sincerely,



Dr. Colm Henry
Chief Clinical Officer

NOTE

A number of resources have been attached to this memo to support IDDSI implementation in your setting. These include:

- Generic Implementation plan and proposed implementation team;
- IDDSI Implementation Objectives: resource outlining objectives of adopting IDDSI in Ireland;
- IDDSI Implementation Checklist: resource for use by local IDDSI Implementation Committees to support IDDSI implementation;
- 'Change to IDDSI Safety Notice' poster - educational resource for staff and service users detailing change to IDDSI framework, associated risks and pathway to follow if deterioration in swallow function occurs and medical attention/reassessment of swallow function is required. It is also recommended that this poster is presented to service users with thickening products with new IDDSI labelling;
- Assessment of Staff Training Need - tool that enables calculation of time needed to train staff within an organisation. It also details the training resources recommended for different professional groups and their location;
- Stakeholder communication guidance;
- Summary of high level risks, controls in place, actions in progress and suggested areas for local consideration;

Further resources to support IDDSI implementation will be available on HSELand in the coming weeks.

Suggested circulation list

Acute services

- Hospital CEOs
- Chief Operations Officers
- Clinical Directors
- Directors of Nursing
- Heads of Service
- Speech and Language Therapy Managers
- Dietitian Managers
- Nutrition and Hydration Steering Committees
- Catering Managers

Community Services

- Dietitians
- S&L Therapists
- Nursing
- Area Medical Officers Primary Care
- Catering Staff
- GPs
- Pharmacists
- All residential and day care settings across the community
- Mental Health Approved Centers
- Section 38s and 39s
- Home helps and meals on wheels