

# choking awareness

## General advice for feeding a person with a choking risk



## General advice

Being fed can feel threatening with a loss of control, dignity and respect. It is important before you support anyone that you find out how best the person likes to be supported. Every person is different. Eating independently is more natural and safe. People should be encouraged and allowed to be as independent as possible. Some people can feed themselves part of the meal, others may need help to load their fork and guide it to their mouth while others may be completely reliant. Remember you are there to assist you should never force.

## Feeding a person with a choking risk

- Check if the person has a swallowing difficulty or is known to have a choking risk
- The person may have a care plan, Personal Place Mat or swallowing report with information about their swallowing
- If they are on a modified dysphagia diet check the food provided is the correct consistency and is prepared as recommended
- If you are supporting someone who has swallowing difficulties ensure you have swallowing training
- If you are supporting someone with a known choking risk ensure you have first aid training and choking awareness training
- Ensure you are aware of and follow local choking guidelines and/or policy.

## Setting

- Promote a quiet, calm and relaxed environment
- Turn off the TV and reduce excess noise
- Consider protected mealtimes with no visitors, phone calls, unnecessary interruptions or other activities going on at the same time
- Ensure the person is awake and alert. Avoid feeding if the person is tired, upset or stressed. It is important that the person maintains good alertness for the duration of the meal to ensure they swallow as safely as possible
- It is important to introduce yourself and the food but try to avoid talking while the person is eating, drinking and swallowing. If they want to talk allow time after the meal to have a chat
- Make sure you have all the food, drink and other resources equipment you need before you start to avoid interruptions.



## Position

- Ensure the person is sitting as upright as possible with their feet on the floor
- Do not feed a person who is lying down
- If they have to be fed in bed ensure that they are supported to sit as upright as possible
- If the person is in a wheelchair ensure it is as upright as possible, with their feet supported and use their wheelchair tray if available
- Encourage them to stay seated when they have food in their mouth
- You should position yourself facing the person or slightly to the side and at the person's eye level. Do not stand above a person
- If you have any concerns regarding a person's position, contact Occupational Therapy.



## Time, pace and meal duration



- You need to concentrate and be focused on supporting this person to eat and drink safely. It is important that you do not have other tasks at the same time
- Make sure you have plenty of time for the meal and are not rushing off
- It can be useful to encourage the person to go to the toilet before a meal
- Encourage the person to eat slowly, never rush
- Closely observe the person so that you know when they are ready for another spoonful. Do not put another spoonful of food in their mouth until they have cleared and swallowed what is in their mouth
- Never overfill the fork. Give a small amount of food at one time
- You may need to encourage the person to chew and swallow
- Be extra cautious at the end of a meal the last few spoonful's are often large and given at a fast pace
- Do not wipe or clear food from a person's face while they are trying to swallow
- If mealtimes are long (over 30 minutes) consider a break giving their pudding later or several smaller meals throughout a day rather than three large ones
- When supporting someone to have a drink encourage small sips at a slow pace, alternating between food and drink can help clear residue.

## Foods and liquids

Ensure the presentation, colour, aroma, taste, texture and temperature of food is appetising.

Soft and smooth foods are generally easier to swallow.

The following types of food can cause a higher risk of choking and may need to be modified or avoided for some people:

- Hard, tough, chewy, fibrous, stringy, dry, crispy, crunchy or crumbly foods
- Pips, seeds, pith/inside skin; skins or outer shells eg. on peas, grapes; husks
- Skin, bone or gristle
- Round or long-shaped foods eg. sausages, grapes, sweets. Hard chunks eg. pieces of apple
- Sticky foods eg. cheese chunks, marshmallows
- 'Floppy' foods eg. lettuce, cucumber, uncooked baby spinach leaves
- Juicy food where juice separates off in the mouth to a mixed texture eg. water melon
- Foods of mixed consistency (eg. solids mixed with gravy, soup with lumps of vegetables).

If you have any concerns about a person's nutrition or hydration contact a Dietitian.





## After mealtimes:

- The person should not lie down immediately after eating as any residue in their throat could fall into their airway; encourage the person to remain seated upright for 30 minutes
- Ensure their mouth is clear of food; food left in the mouth can cause bad breath, mouth infections and can cause choking if it falls into the throat when the person is not expecting it
- Encourage regular teeth brushing or denture cleaning.

## SWALLOWING ASSESSMENT

Consider a referral to Speech and Language Therapy for a swallowing assessment if any of the following signs are observed while eating and drinking:

- Coughing/choking on food and/or drink immediate or delayed
- Your voice may sound wet or gurgly after eating or drinking
- Breathlessness after swallowing
- Food sticking in mouth/throat
- Difficulty clearing own saliva or managing own secretions
- Reduction in oral intake
- Change in colour after eating/drinking
- Please note if you are having any difficulty taking medications contact your prescriber for a medication review.

