

Mildura Disability Support Services| **Mealtime Management Policy**

1. Introduction

1.1. Purpose

The purpose of this Policy is to provide a clear framework for Mildura Disability Support Services to ensure each of their Participant's requiring mealtime management receives appropriate support tailored to their individual needs. These procedures guarantee Mildura Disability Support Services is compliant with the NDIS Quality Indicators, specifically the Mealtime Management Practice Standard, and relevant national legislation and regulations.

1.2. Scope

This Policy is applicable to all Workers affiliated with Mildura Disability Support. It is the responsibility of every individual, regardless of their employment status, to fully comprehend and comply with the commitments outlined in this policy. All Workers must acknowledge that they have read, understood and will comply with the contents of this Policy.

1.3. NDIS Quality Indicators

- a) Providers identify each participant requiring mealtime management.
- b) Each participant requiring mealtime management has their individual mealtime management needs assessed by appropriately qualified health practitioners, including by practitioners:
 - 1) Undertaking comprehensive assessments of their nutrition and swallowing; and
 - 2) Assessing their seating and positioning requirements for eating and drinking; and
 - 3) Providing mealtime management plans which outline their mealtime management needs, including for swallowing, eating and drinking; and
 - 4) Reviewing assessments and plans annually or in accordance with the professional advice of the participant's practitioner, or more frequently if needs change or difficulty is observed.
- c) With their consent, each participant requiring mealtime management is involved in the assessment and development of their mealtime management plans.
- d) Each worker responsible for providing mealtime management to participants understands the mealtime management needs of those participants and the steps to take if safety incidents occur during meals, such as coughing or choking on food or fluids.

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- e) Each worker responsible for providing mealtime management to participants is trained in preparing and providing safe meals with participants that would reasonably be expected to be enjoyable and proactively managing emerging and chronic health risks related to mealtime difficulties, including how to seek help to manage such risks.
 - f) Mealtime management plans for participants are available where mealtime management is provided to them and are easily accessible to workers providing mealtime management to them.
 - g) Effective planning is in place to develop menus with each participant requiring mealtime management to support them to:
 - 1) be provided with nutritious meals that would reasonably be expected to be enjoyable, reflecting their preferences, their informed choice and any recommendations by an appropriately qualified health practitioner that are reflected in their mealtime management plan; and
 - 2) if they have chronic health risks (such as swallowing difficulties, diabetes, anaphylaxis, food allergies, obesity or being underweight) – proactively manage those risks.
 - h) Procedures are in place for workers to prepare and provide texture-modified foods and fluids in accordance with mealtime management plans for participants and to check that meals for participants are of the correct texture, as identified in the plans.
 - i) Meals that may be provided to participants requiring mealtime management are stored safely and in accordance with health standards, can be easily identified as meals to be provided to particular participants and can be differentiated from meals not to be provided to particular participants.
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2. Policy statement

- a) Mildura Disability Support Services is committed to ensuring each Participant requiring mealtime management receives meals that are appropriate to their individual needs, taking into account nutrition, texture, preparation, preference and delivery of their meals for an overall enjoyable and safe experience.
- b) Mildura Disability Support Services will identify each participant who requires mealtime management and ensure that their needs are appropriately addressed.
- c) Each participant requiring mealtime management will undergo a comprehensive assessment by qualified health practitioners. These assessments will include evaluations of nutrition, swallowing, seating, and positioning requirements for eating and drinking.
- d) Qualified health practitioners will create mealtime management plans for participants, outlining their specific needs related to swallowing, eating and drinking.

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- e) Assessments and mealtime management plans will be reviewed annually or in accordance with the advice of the participant's practitioner, or more frequently if there are observed changes in needs or difficulties.
- f) Participants will be actively involved in the assessment and development of their mealtime management plans, with their consent.
- g) Workers responsible for providing mealtime management will receive training to understand the specific needs of participants and how to respond to safety incidents during meals.
- h) Effective planning will ensure that participants are provided with nutritious meals that align with their preferences, and informed choices as well as any recommendations by qualified health practitioners.
- i) We will proactively manage chronic health risks related to mealtime difficulties, including conditions such as swallowing difficulties, diabetes, anaphylaxis, food allergies, obesity, or being underweight.
- j) Procedures will be in place to prepare and provide texture-modified foods and fluids in accordance with mealtime management plans. Meals will be checked to ensure they match the prescribed texture.
- k) Meals intended for participants requiring mealtime management will be stored safely and in compliance with health standards. They will be clearly identified and differentiated from meals intended for other participants.

2.1. Relevant legislation

All relevant legislation to this Policy is outlined in the Legislation Register.

2.2. Related documents

- a) Participant Support Plan
- b) Mealtime Management Plan
- c) Mealtime Risk Assessment Checklist
- d) Mealtime - Fluid Chart

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3. Responsibilities and Roles

- a) Narelle Margaret Fraser is responsible for the development and review of this policy. It is expected that Narelle Margaret Fraser ensures this Policy remains compliant with all applicable laws, regulations and standards.
 - b) Key Management Personnel play a vital role in ensuring the effective implementation of this Policy throughout Mildura Disability Support. It is the responsibility of all Key Management Personnel to not only assist Workers in understanding and complying with this policy but also to comply with it themselves. By leading by example, they demonstrate the importance of adherence to the policy and foster a culture of compliance within the organisation.
 - c) Workers are responsible for understanding the contents of this policy and complying with all procedures applicable to them.
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4. Definitions

Mildura Disability Support Services means AUS DISABILITY SUPPORT PTY LTD ABN 61 684 083 574.

Key Management Personnel means Narelle Margaret Fraser and other key management personnel involved in Mildura Disability Support Services from time to time.

Director means Narelle Margaret Fraser.

Qualified Health Practitioner means an AHPRA registered health practitioner that is appropriately qualified and competent in the assessment and development of an individual mealtime management plan for a Participant and may include a dietitian, speech pathologist, registered nurse or general practitioner.

Worker means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Mildura Disability Support Services and includes the Director.

5. Procedures

5.1. Identification

Mildura Disability Support Services will ensure each Participant that requires mealtime management services and support is identified and receives appropriate mealtime management support as outlined in this Policy and their individual mealtime management plan.

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5.2. Assessment

- a) With the consent of the Participant, it is essential to establish an accurate mealttime management plan (Plan) for each Participant who requires mealttime management services and support from Mildura Disability Support. This plan is developed through a comprehensive assessment conducted by a Qualified Health Practitioner, in collaboration with the Participant, considering their inputs and preferences.

5.3. Plan development

- a) The Qualified Health Practitioner who assessed the Participant will document the Participant's mealttime support requirements within the Mealttime Management Plan (Plan).
- b) The Plan serves as a guide for Mildura Disability Support Services Workers, outlining the recommended approaches and strategies for mealttime management based on the following assessment areas:
 - 1) Nutrition and swallowing abilities of the Participant;
 - 2) Seating and positioning requirements during meals;
 - 3) Specific needs for swallowing, eating and drinking; and
 - 4) Individual preferences related to food, fluids, preparation techniques and feeding equipment.
- c) The Plan will be developed to support the Participant's nutrition and well-being by:
 - 1) Incorporating menus that provide nutritious and enjoyable meals tailored to their preferences and any recommendations from the Qualified Health Practitioner; and
 - 2) Including proactive measures to manage risks if the Participant has specific chronic health risks, such as swallowing difficulties, food allergies, anaphylaxis, diabetes, obesity or being underweight.
- d) The Plan will also identify the following elements:
 - 1) Review date of the Plan, which should occur annually or as advised by the Qualified Health Practitioner. The review process should be more frequent if the Participant's needs change as observed by a Worker;
 - 2) Recommendations for ensuring safe and enjoyable meals, while proactively managing emerging and chronic health risks associated with mealttime difficulties; and

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- 3) Guidelines for managing risks, incidents, and emergencies during meals, including necessary actions, escalation procedures, and steps to address safety incidents like coughing or choking.
- e) Ensure the Plan covers procedures for Workers to follow regarding:
 - 1) Preparing and providing texture-modified foods and fluids, ensuring adherence to the prescribed textures outlined in the Plan; and
 - 2) Guidelines for proper storage of meals in compliance with health and food standards, ensuring clear identification for specific Participants.
- f) It is imperative that all Workers providing mealtime management services and support adhere to the Plan, following the documented guidelines and recommendations.

5.4. Collaboration with Participant and workers

- a) Determine and prepare the mealtime management plan and preparation of meals in accordance with the Participant's wishes, likes and dislikes.
- b) Be aware and supportive of the Participant's dietary requirements if applicable. A Participant's diet and plan must be amended to respect their cultural or religious beliefs.
- c) Ensure the Participant is involved in the annual review process.

5.5. Signs and Symptoms of swallowing and eating issues

- a) Mildura Disability Support's Workers will always observe Participants to monitor for signs that may indicate swallowing problems. If any of the below signs are noticed, they should be recorded so that appropriate assessments and referrals can be completed:
 - 1) Complaints of difficult, painful chewing or swallowing.
 - 2) Coughing during or right after meals.
 - 3) Frequent throat clearing during or after swallowing.
 - 4) Having long mealtimes.
 - 5) Becoming short of breath when eating and drinking.
 - 6) Regurgitation of undigested food.
 - 7) Having a hoarse or gurgly voice.
 - 8) Drooling.

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- 9) Having a dry mouth.
- 10) Frequent heartburn.
- 11) Frequent respiratory infections.

5.6. Choking - Emergency Procedures

- a) Stop feeding immediately and seek nursing assistance if the Participant experiences any of the following:
 - 1) Clutching their throat.
 - 2) Coughing, wheezing or gagging.
 - 3) Turning blue in the lips and face.
- b) In the event the Participant appears to be choking, follow this procedure:
 - 1) If the Participant becomes blue, limp or unconscious, call 000 and ask for an ambulance.
 - 2) Try to keep the person calm.
 - 3) Ask them to cough to try to remove the object.
 - 4) If the coughing doesn't work, call 000 and ask for an ambulance.
 - 5) Bend the person forward and give them up to 5 sharp blows on the back between the shoulder blades with the heel of one hand.
 - 6) After each blow, check if the blockage has been cleared.
 - 7) If the blockage still hasn't cleared after 5 blows, place one hand in the middle of the person's back for support. Place the heel of the other hand on the lower half of the breastbone (in the central part of the chest). Press hard into the chest with a quick upward thrust, as if you're trying to lift the Participant up.
 - 8) After each thrust, check if the blockage has been cleared.
 - 9) If the blockage has not cleared after 5 thrusts, continue alternating 5 back blows with 5 chest thrusts until medical help arrives.
 - 10) If the Participant becomes blue, limp or unconscious, start CPR immediately.

5.7. Risk Management

- a) **Risk Identification:** The training plan and the Plan must encompass a comprehensive risk identification process. This entails recognising potential risks, outlining corresponding actions to

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mitigate them, and establishing escalation procedures. This includes adherence to Mildura Disability Support's internal reporting protocols as well as any specified reporting criteria set by the Participant's treating team.

- b) **Incident Management:** The training plan and the Plan should offer detailed guidance on effectively managing incidents that may arise. This encompasses the creation of an emergency management plan to address related incidents swiftly and efficiently.
- c) **Incident documentation:** It is imperative that all incidents are meticulously documented and reported in strict compliance with the Incident Management Policy.

5.8. Food safety, storage and preparation

- a) It is imperative to guarantee that all food produced and served is prepared in a safe and hygienic manner, adhering to the highest standards of health and safety as mandated by applicable legislation.
- b) Food must be prepared and stored in a manner that prevents it from becoming hazardous or unfit for consumption. This includes proper storage in refrigeration or freezer units, as appropriate.
- c) Emphasizes the presentation of food, considering factors such as texture, flavour, aroma, and appearance to enhance the overall dining experience.
- d) Ensure that meals cater to the individual needs of Participants, offering options like finger food, modified portions, smaller serving sizes, and thickened beverages as required.
- e) Prior to serving Participants with swallowing difficulties, food and liquids must be tested following approved IDDSI methods. Foods can be tested using methods such as Fork Drop/Spoon Tilt Test, Pressure Test, or Finger Test, while liquids can be evaluated through the Syringe Flow Test.
- f) Accommodate Participant's dietary preferences and needs, including cultural, religious, or independent meal planning considerations.
- g) Tailor meal preparation to align with each Participant's preferences, taking into account their likes and dislikes.
- h) Uphold stringent hand hygiene, cleanliness, and food safety standards throughout Mildura Disability Support's services, ensuring strict adherence to all relevant legislation and guidelines. Staff members should be well-versed in the Australia New Zealand Food Standards Code and Safe Food Australia - A Guide to the Food Safety Standards.
- i) Thoroughly clean all cooking surfaces and utensils both before and after food preparation.
- j) Never leave any electrical appliances unattended when in use.

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- k) Practice the use of disposable gloves and change them when transitioning from handling raw foods to cooked items to prevent any risk of cross-contamination.
- l) Any personnel in close proximity to food handling should be in good health. Individuals who have been ill should not be assigned to tasks involving food preparation or handling.

5.9. Mealtime Assistance

- a) Ensure that Participants receive appropriate nourishment in alignment with their Support Plan, to enhance their overall wellbeing and health outcomes.
- b) Offer Participants essential diets that promote a healthy lifestyle and overall wellbeing.
- c) Conduct frequent dietary assessments, preferably by a healthcare professional like a dietician, to ensure that dietary plans consistently align with each Participant's individual needs.
- d) Respect and incorporate Participant's cultural and religious beliefs into their meal plans to fulfill their dietary desires and requirements.
- e) When assisting Participant's with food and drink intake, Workers should adhere to the following actions:
 - 1) Position Participants appropriately for safe and comfortable seating, modifying surroundings if necessary.
 - 2) Ensure that the Participant's mouth is clear of any food remnants before introducing additional food.
 - 3) Request the Participant to demonstrate an empty mouth if further meals or drinks are to be consumed.
 - 4) Maintain close proximity to the Participant.
 - 5) Utilise adaptive cutlery and food utensils when necessary.
 - 6) Offer small amounts of drinkable liquids, such as water, before meals to alleviate potential dryness in the mouth, which may hinder swallowing and pose a choking risk.
- f) With the assistance of Workers, Key Management Personnel should:
 - 1) Provide requisite knowledge and training to staff for the proper administration of hydration and nutrition in accordance with the Human Resources Management Policy.
 - 2) Conduct assessments of Participants to evaluate their hydration and nutrition levels.
 - 3) Monitor changes in Participant weight as an indicator of dietary adequacy or potential malnutrition.

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- 4) Record all assessment findings comprehensively.
- 5) Identify shifts in Participant sleep patterns, alertness, balance, and other indicators of overall health and wellbeing.
- 6) Assess Participants for any loss of appetite or decreased hunger.
- 7) Detect social and behavioural changes.
- 8) Identify difficulties or changes in swallowing abilities.
- 9) Recognise potential alterations in Participant behaviour.
- 10) Update nutrition and hydration care plans whenever there are changes in the Participant's needs, goals, or preferences.
- 11) Act upon information and recommendations from external experts, such as dietitians, speech pathologists, or medical practitioners.

5.10. Train Workers

- a) Ensure each Worker responsible for providing mealtime management to participants is trained in preparing and providing safe meals with participants that would reasonably be expected to be enjoyable and proactively managing emerging and chronic health risks related to mealtime difficulties, including how to seek help to manage such risks.
- b) Ensure each Worker has complete accredited first aid training, holds a current First Aid certificate, and has been trained to manage all possible incidents and emergencies.
- c) Ensure training plans allow for ongoing training support, in line with updates to the NDIS Practice Standards and Quality Indicators, relevant legislation, and feedback provided by Workers.

5.11. Feedback, Complaints and Improvement

- a) Feedback is actively sought and valued from Participants, workers, and other stakeholders.
- b) Regular consultations are conducted with our Participants to facilitate continuous improvement in delivering best practice service.

6. Policy Review and Updates

This Policy is to be amended and updated according to the requirements to comply with the applicable law.

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Approval Authority: Narelle Margaret Fraser

Version: 1

Approval Date: February 2025

Review Date: February 2027