

DYS3 Undertake a specialist dysphagia assessment

OVERVIEW

This standard is about assessing the needs of individuals requiring specialist interventions and/or instrumental dysphagia examinations to identify dysphagia problems. It is particularly relevant to those working with neonates or individuals with complex presentations e.g. patients with tracheostomies, those at very high risk of aspiration. This standard is for people who are specialists in determining the underlying cause of dysphagia, formulating a differential diagnosis and developing a working hypothesis for the treatment strategies in order to manage presenting complex problems. In relation to instrumental dysphagia examinations this competence covers the role of an assessing clinician in carrying out a Videofluoroscopic Swallow Study (VFSS) and Fiberoptic Endoscopic Evaluation of Swallowing (FEES). Separate competences exist for radiographers and endoscopists involved in VFSS and FEES respectively. Users of this standard will need to ensure that practice reflects up to date information and policies. Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

- 1.local policies which affect your work practice in relation to working with individuals who may require a specialist dysphagia assessment
- 2.your responsibilities under the current European, national and local legislation and policies on your actions within the care environment
- 3.the ethics and responsibilities of practitioners, and relevant professional bodies, codes of conduct, and guidelines
- 4.evidence-based practice and its role in improving care
- 5.the legislation relating to the:
 - 1.role of practitioners and clinical practice
 - 2.health and safety
 - 3.the care of individuals, including impact of the Human Rights Act
 - 4.freedom of information and data protection
- 6.government and organisational policies relating to the provision of specialist dysphagia assessments
- 7.the national assessment framework for the client group with which you work
- 8.health and safety procedures for specific dysphagia assessments and the potential consequences of poor practice
- 9.the scope of your practice and level of competence.
- 10.the referral process within the multi-disciplinary team

- 11.national and local policies and guidelines relating to the management and effective use of assessment resources
- 12.organisational management structures, roles, and responsibilities
- 13.the organisational policy and practices with regard to the keeping and sharing of clinical records, recording information and maintaining confidentiality
- 14.legislation and legal processes relating to consent
- 15.the principles of valid consent, including implied consent and expressed consent
- 16.the methods used to achieve consent where the individual is not able to give their informed consent
- 17.statutory statements, living wills, advanced directives, and other expressions of an individual's wishes
- 18.how to deal with issues of confidentiality and who has the right of access to recorded information and images
- 19.how to provide supported conversation and adapt communication styles in ways which are appropriate to different people e.g. age, culture, language or communication difficulties
- 20.the ways in which carers should be involved in communication in order to deliver the most effective outcome for the individual
- 21.the needs of individuals and carers, including issues relating to dignity, confidentiality, and privacy
- 22.the role, responsibilities, needs, and relationships between individuals and carers
- 23.the services and assistance that the individual and their carers should be entitled to
- 24.the type of information that is most useful to individuals and their carers, their rights to obtain it, and how they can access it
- 25.how individuals and carers respond to specific assessment procedures
- 26.the anatomy and physiology of swallowing including:
 - 1.anatomical structures involved in the swallowing process
 - 2.physiology of swallowing
 - 3.development of swallowing function
 - 4.effects of aging on swallowing
 - 5.airway support mechanisms
 - 6.effects of physical disabilities (e.g. scoliosis)
 - 7.effects of surgical interventions
 - 8.effects of radiotherapy, chemotherapy and brachytherapy
- 27.the underlying causes and contributory factors of abnormal swallowing including:
 - 1.longstanding but functional abnormal eating and swallowing patterns e.g. adapted and compensatory swallow physiology
 - 2.underlying congenital, developmental, neurological and acquired disorders that may predispose dysphagia
 - 3.behavioural issues
 - 4.environmental issues
 - 5.medical condition
 - 6.medication
 - 7.physical condition i.e. sensory and postural state
 - 8.psychological state
 - 9.cognitive functioning
- 28.the sorts of issues and risk that can arise with dysphagia
- 29.the signs of abnormal swallowing including acute and chronic signs of aspiration
- 30.the health risks and secondary difficulties, that can arise in individuals suffering from dysphagia and how to recognise their emergence, e.g. respiratory compromise, malnutrition and dehydration
- 31.the centres of research and development on dysphagia assessment and

- management, and the current issues and research debates
- 32.sources of authoritative information on dysphagia assessment and management, including evidence based information
 - 33.established and new assessment procedures and techniques that are available for use with dysphagic individuals
 - 34.the suitability of assessment procedures and techniques for specific groups of individuals
 - 35.the risks and potential complications of specific dysphagia assessment procedures and techniques
 - 36.the guidelines and procedures for quality assurance, and evidence of effectiveness of specific dysphagia assessment procedures
 - 37.the range and efficacy of augmentative examinations that contribute to the assessment process for individuals with complex needs
 - 38.the range and efficacy of instrumental dysphagia examinations and the indicators for their use
 - 39.the methods to assess and monitor the individual during dysphagia assessment procedures
 - 40.the impact of the environment on a dysphagia assessment
 - 41.the psychological, emotional and communicative impact of dysphagia on the individual and their carers
 - 42.the support an individual may require in order to participate in a specialist dysphagia assessment
 - 43.the impact of presentation, pacing, consistency and taste of food and drinks on the assessment process and outcomes
 - 44.remedial techniques and their application in the assessment process
 - 45.what actions must and must not be taken to minimise discomfort when assessing an individual presenting with different types of symptoms
 - 46.biofeedback techniques to facilitate the individual's and carer's understanding of the assessment outcomes and effective therapeutic interventions
 - 47.actions you should take to prevent or respond to adverse reactions to the assessment procedures
 - 48.the importance of a systematic and logical approach to information use and analysis, and the risks associated with jumping to a premature conclusion
 - 49.the interpretation and application of assessment findings including those from augmentative examinations and further investigations
 - 50.the steps you should take when unable to arrive at a satisfactory diagnosis, including individuals presenting with unclear or conflicting symptoms
 - 51.the role of other professionals and how they can contribute to assessment, treatment and care of individuals with dysphagia
 - 52.local services, agencies and community resources that may be relevant to the types of individuals with whom you work, and how to access these
 - 53.the information that should be recorded and the importance of doing this contemporaneously
 - 54.organisational record keeping practices and procedures in relation to dysphagia assessments.

PERFORMANCE CRITERIA

You must be able to do the following:

- 1.select appropriate assessment methods consistent with the agreed purpose and nature of the specialist assessment and organisational procedures, including:
 - 1.remedial techniques
 - 2.augmentative examinations
 - 3.instrumental dysphagia examinations
- 2.ensure the environment is as conducive as possible to effective assessment
- 3.explain the assessment process, evidence base and any potential outcomes to the individual and the carers they specify
- 4.obtain the valid consent of the individual for the actions undertaken on their behalf, and agree the information which may be passed to others
- 5.ensure that health and safety measures relevant to the assessment procedures are undertaken
- 6.undertake the specialist assessment in line with locally agreed criteria and using standardised documentation
- 7.collaborate effectively and proactively with other practitioners, if appropriate, to ensure a safe and effective assessment
- 8.direct the individual through appropriate tasks and manoeuvres as required for a complete and comprehensive evaluation
- 9.evaluate the effectiveness of remedial techniques to inform care management
- 10.provide the individual with sufficient time, support and encouragement to contribute to the assessment
- 11.encourage the individual to observe the examination to facilitate understanding of swallowing, assessment outcomes and remedial techniques
- 12.monitor the individual's comfort and safety and take appropriate action to adjust or stop the assessment if any adverse situation occurs
- 13.interpret the results from the specialist assessment including any augmentative and/or instrumental examinations, in order to develop a working hypothesis and diagnosis
- 14.agree the actions to be taken with the individual, and their carer if appropriate, based on the results of the assessment and other relevant factors
- 15.provide accurate and prompt feedback to the care team to ensure effective care management consistent with the individual's wishes
- 16.provide referral information to other practitioners and services in accordance with any guidelines or requirements stated by those receiving the referral
- 17.keep accurate, complete and legible records of the assessment, agreements and any subsequent reviews in line with organisational policy

ADDITIONAL INFORMATION

This National Occupational Standard was developed by Skills for Health. This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004): Dimension: HWB6 Assessment and treatment planning