



Office for People With
Developmental Disabilities

Prevention of Choking and Aspiration



2023

The Office for People With Developmental Disabilities (OPWDD) recognizes that individuals with developmental disabilities present a high risk for dysphagia (difficulty swallowing) that can lead to both choking and aspiration.

This online course reviews preventative measures to decrease the risks of choking and aspiration.

Course Expectations

In this course, you will review the following:

- Definitions of choking and aspiration
- Common issues that people with developmental disabilities face when eating or drinking
- Identification and reduction of hazards through observation of the person and their environment
- Interventions to reduce the risks of choking and aspiration
- Appropriate first aid responses to an incident

Definition of Choking

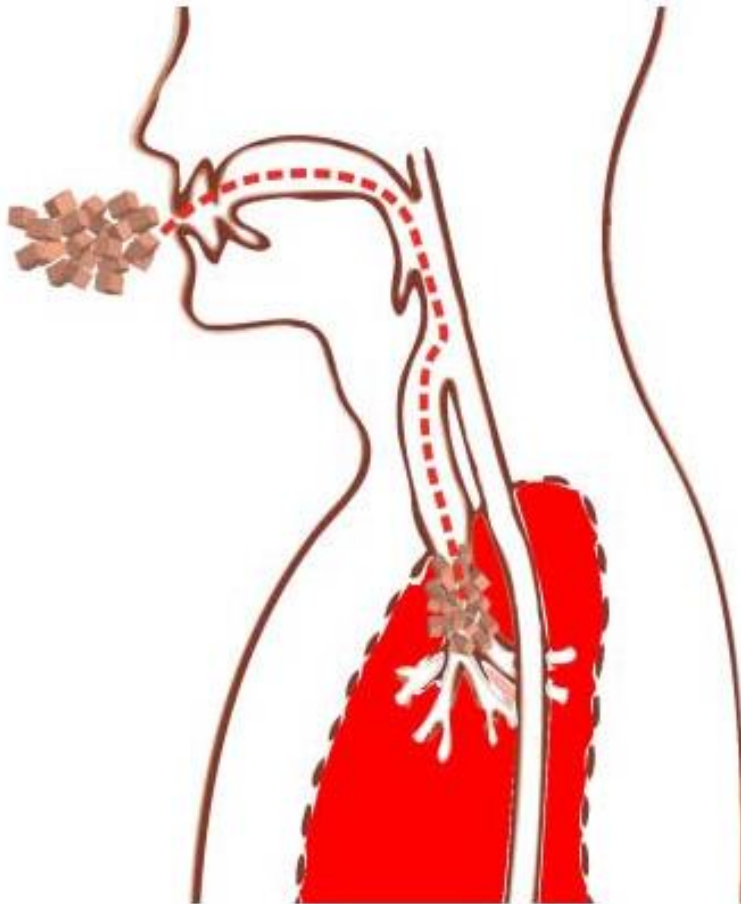


DEFINITIONS

CHOKING

Choking is the blocking of the airway by foods, liquids or foreign objects.

Definition of Aspiration



DEFINITIONS

ASPIRATION

Aspiration is the inhaling of foods, liquids or foreign objects into the lungs. This is also known as "going down the wrong pipe".

Common Issues (1. of 3.)

For people with developmental disabilities, common issues exist that place a person at risk for choking and aspiration:



- The person has decreased muscle coordination and/or tone which is causing problems with their chewing or swallowing.
- The person has difficulty holding their head up or sitting up straight.
- The person has impaired mobility which leaves them unable to properly position themselves for adequate swallowing.

Common Issues (2. of 3.)

- The person has been diagnosed with Gastroesophageal Reflux Disease, commonly referred to as GERD or acid reflux.
- The person has dental concerns or problems.
- The person takes medications that affect the muscles of the throat or mouth and cause delayed swallowing.

Common Issues (3. of 3.)

- The person has poor self-eating skills and is prone to food stuffing or rapid eating.
- The person has difficulty swallowing anything with inappropriate fluid or food consistencies.
- The person is assigned a staff team member who has not been trained in supporting people with their eating/drinking.

Prevention is Critical

- Some incidents are completely preventable.
- Mealtime can be pleasurable for some and a difficult time for others.
- If we identify problems and develop interventions early, we can ensure the health and safety of individuals and make eating and drinking a pleasant experience.



Your Challenge!!

- The greatest error made by most treatment teams is failing to identify the source of the real eating/drinking problems.
- Treatment teams should routinely consider a wide range of potential causes.
- Intervention and prevention strategies should be identified and noted in the Life Plan, Comprehensive Functional Assessment (CFA), any risk assessments and Dining Plans.
 - How a person eats should be discussed during the Interdisciplinary Service Planning Session, and, if risks are present, a good plan of prevention should be discussed, written down, and shared with all staff that support the individual including day program staff.



Observation (1. of 4.)

Observation is the greatest incident prevention tool you have. When helping a person eat or drink make sure your attention and focus stays on the person.



What to observe:

- Does someone else put food or fluid into the person's mouth?
- Does the person cough or choke during or after finishing their food or beverage?
- Does food fall (or fluid drool) out of the person's mouth?

Observation (2. of 4.)

- Does the person regularly refuse liquids?
 - Answer “yes” if, for example, they will not drink for certain staff or if they like drinks that are only thick or only thin.
- Does the person regularly refuse food?
 - Answer “yes” if, for example, they will not eat for certain staff or they do not like certain consistencies.

Important:

If a person’s eating or drinking pattern changes immediately notify the nurse or supervisor.



Observation (3. of 4.)

- Does the person have a medical condition such as cerebral palsy, acid reflux, difficulty swallowing or a hiatal hernia?
- Does the person have chronic chest congestion, frequent pneumonia, rattling when breathing, persistent cough or does the person chronically use cough or asthma medication?
- Does the person complain of chest pain or heartburn or have small, frequent vomiting (especially after meals) or frequent or wet burping?
- Does the person eat or drink too rapidly or stuff food into their mouth that may cause choking?



Observation (4. of 4)

- Does the person have extreme food seeking or liquid seeking behavior that may cause them injury?
- Does this person engage in pica behavior?
 - Some people with developmental disabilities have a condition called pica that causes them to eat non-edible items such as rubber gloves, batteries, cigarette butts, or paper. It is very important to pay close attention to the environment of the home if there is a person with pica living there.

Interventions (1. of 2.)

INTERVENTIONS are methods to help reduce the risks of choking and aspiration

- Know the person's written Dining Plan.
- Prepare the appropriate food texture and liquid consistency per physician's order.
- Only trained staff are to assist with eating.
- If there are swallowing difficulties immediately consult with a nurse or supervisor.
- Carefully stop the person from eating if they cough, choke, or gag.
- Call for help and apply first aid, if needed, to ensure the safety of the person.

Interventions (2. of 2.)

- Maintain a slow pace of eating and decreasing the size of bites.
- Be sure the person is seated for meals and snacks in proper sitting position to encourage safe swallowing.
- Do not engage in power struggles with a person that is having a behavioral issues when eating.
- Maintain a calm environment while eating and drinking.

Supervision



- Supervision is critical for choking prevention
- Supervise all individuals when they are eating and/or drinking at meals, snack time, medication administration, in program or in the community:
 - Movies
 - Picnics
 - Ball games
 - Restaurants

Training Protocols

- Staff should be trained in prescribed food and liquid consistencies.
- If there is any possibility a person is choking, do not wait, call 911 or activate the Emergency Medical Services (EMS) and assist the person immediately by applying choking interventions per your First Aid training.
- If a person is assigned to one-to-one staffing, staff must follow the one-to-one protocol.
- Staff must be trained in the Dining Plan for each person they support.

Food Consistencies

- Whole
- 1" Pieces Cut to Size
- 1/2" Pieces Cut to Size
- 1/4" Pieces Cut to Size
- Ground
- Puree
- Liquidized (Added 2023)

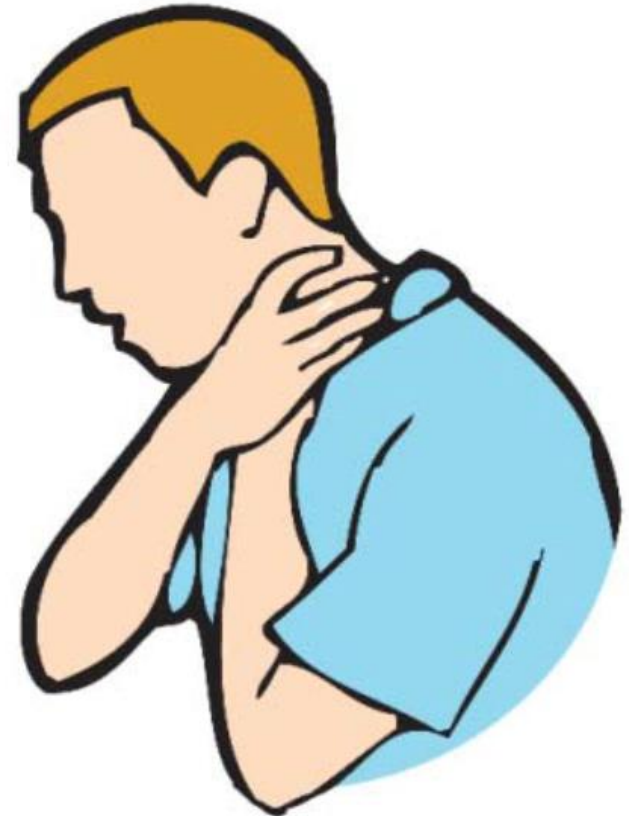
Food Consistencies Table

Term	How to Prepare	Size	Description	Examples
Whole	Prepared according to recipe	As prepared	No changes	Moist, tender cooked chicken breast
1" Pieces Cut to size	Cut by staff	Cut into 1" pieces	Pieces of food approximately the width of a fork	Moist, tender cooked chicken breast cut in 1" pieces
½" Pieces Cut to Size	Cut by staff	Cut into ½" pieces	Moist, tender pieces of food approximately the width of a butter knife	Moist, tender cooked chicken breast cut in ½" pieces
¼" Pieces Cut to Size	Cut by staff	Cut into ¼" pieces	Moist, tender pieces of food approximately the width of a #2 pencil	Moist, tender cooked chicken breast cut in ¼" pieces
Ground	Prepared using food processor or comparable equipment	Relish-like	Moist, cohesive, no larger than a grain of rice; relish – like in appearance, must be served with a low-fat gravy, sauce or condiment	Moist, tender ground chicken served with low fat gravy
Puree	Prepared using food processor or comparable equipment	No lumps, food is not sticky, pasty, or runny	Smooth, pudding like, moist	Moist, tender cooked chicken with low-fat gravy processed to smooth product with no lumps.
Liquidized	Prepared using food processor or comparable equipment	No lumps, food is not sticky	Smooth	Similar to a puree consistency, but with a honey or nectar thickness.

Universal Sign for Choking

Universal Sign For Choking

- Call for help
- Use your first aid training
- Seek medical treatment



Course Review Questions

Your training is nearly complete, however, to ensure you take away the most important points you will now test your knowledge with review questions.

Question 1 of 4

1. If there is a possibility a person is choking:
- A. Call 911 or activate EMS
 - B. Assist the person immediately
 - C. Wait for the person to ask for help
 - D. Both A & B are correct
 - E. None of the above

Question 2 of 4

2. Walking around while eating can increase the risk of choking.

- True
- False

Question 3 of 4

3. Any time a person with a developmental disability is eating, you should (choose all that apply):

- A. Leave the room if they ask for privacy
- B. Be sure they are seated while eating
- C. Allow them the freedom to eat how they wish
- D. Ensure that their food is cut up properly
- E. Encourage them to eat slowly

Question 4 of 4

4. If a person's eating or drinking pattern changes you should do the following:

- A. Cut their food into smaller pieces
- B. Offer the person additional fluids
- C. Immediately notify the nurse or supervisor
- D. Spoon feed the person to complete the meal

Acknowledgements

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