



Defining the Role of the Dietitian in Dysphagia Assessment and Management

**A Statement of
Dietitians of Canada**

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Executive Summary

This paper describes the dietitian's role in dysphagia assessment and management. Practice is based on the principles and ideals of evidence-informed, interprofessional, safe, competent and ethical client-centred care.

The dietitian's role is to provide services to meet the nutrition-care needs of individuals, and there is a direct relationship between swallowing function and nutritional status. Dysphagia assessment and management falls within the dietetic scope of practice in provincial legislation in all jurisdictions in Canada.

In dysphagia assessment and management, dietitians:

- provide client- and family-centred care; they respect and are responsive to client preferences, needs and culture, ensuring the client and family understand options for assessment and treatment, and provide informed consent;
- obtain and interpret information from mealtime/feeding observations, including estimation of daily nutrient intakes;
- identify signs and symptoms of dysphagia;
- assess the client's nutritional status and requirements for food, fluid and nutrition;
- identify the nutrition diagnosis(es) such as swallowing difficulty;
- conduct or coordinate a clinical (bedside/ tableside) swallowing assessment and/or instrumental swallowing assessment, where permitted by law;

- identify the risk of choking, aspiration and associated risk of pneumonia;
- consider the balance of risks and benefits of a swallowing assessment and treatment for individual clients;
- determine appropriate interventions and obtain client consent for diet, meal pattern, nutritional supplements and/or assistive devices as needed, food texture and liquid consistency modifications, positioning and the route of feeding;
- develop enteral and parenteral feeding regimes;
- provide client and/or family education and counselling;
- document and communicate the nutrition care process;
- monitor and evaluate a client's response to nutrition interventions, and modify the care plan as needed;
- act as a resource for clients and their care providers;
- work collaboratively and consult with other health care providers in the interprofessional team the circle of care; and
- facilitate ethical decision-making discussions, with the client's values guiding clinical decisions.

This statement reaffirms the professional practice obligation of the registered dietitian to meet client care needs by practicing to full scope, recognizing context and practice setting, while appreciating the value of interprofessional collaboration and effective team work.

A full statement can be accessed online at www.dietitians.ca/dysphagia.

Introduction

This paper is an update to a previous Dietitians of Canada (DC) paper (1) and describes the dietitian's role in the context of practising to the full professional scope of practice.^a It is one of several papers (1-5) that address the role of the dietitian in the context of engaging in safe, quality dysphagia assessment and management.^b

The paper is derived from a review of the literature, expert opinion, and a review of provincial legislation. It is based on the principles and ideals of the profession, including client-centred care for evidence-informed, interprofessional, safe, competent, and ethical practice. It is a statement that reflects professional practice obligations to optimally meet client care needs by practising to full scope, recognizing both the context and practice setting, and the value of interprofessional collaboration. Underpinning the main messages of this paper is emerging research that indicates the client experience is integrally tied to the principles of client-centred care (6).

Scope of Practice

The scope of practice for regulated health professionals is established in provincial legislation. Dysphagia assessment and management falls within the professional dietetic scope of practice in all jurisdictions across Canada. Legislation differs in each province, and therefore practice varies across Canada. Dietitians are accountable to practise dysphagia assessment and management in accordance with their provincial regulatory body's standards and policies. Upon entry to practice, dietitians have a foundational

^a Professional scope of practice: the roles, functions and accountabilities that dietitians are educated and authorized to perform (10). The professional scope of practice differs from the individual scope of practice, which falls within the professional scope but reflects a practitioner's personal limitations and competencies.

^b Dysphagia assessment and management: the care process in relation to a swallowing disorder.

knowledge and skill-set related to dysphagia assessment and management, and continue to develop expertise in the context of their practice.

Dysphagia and the Nutrition Care Process

The dietitian's role in the provision of nutrition care is to provide services to meet the nutrition-care needs of individuals (7). There is a clear and direct relationship between swallowing function and nutritional status.^c The function of the swallow has a direct impact on the ability to consume sufficient energy, fluids and nutrients. Nutritional status has a direct impact on the ability to swallow safely and efficiently (3). Undiagnosed and/or unmanaged dysphagia may negatively impact health status. It has been associated with increased risk for malnutrition, dehydration, choking episodes, aspiration, chest infections or pneumonia and/or death (1,5,8). Malnutrition and dehydration alter the immune system and increase the risk of pneumonia in the presence of pulmonary aspiration (3). Difficulties arising from dysphagia may also lead to psychosocial problems, such as social isolation and embarrassment, which may reduce quality of life (9).

Dietitians practise according to the steps in the nutrition care process,^d thinking critically, and making decisions in a systematic manner to provide safe, effective, client-centred care. A swallowing assessment is one component of a comprehensive nutritional assessment.^e As a result of the assessment, the

^c Nutritional status: the body's state of nourishment/state of the body in relation to the consumption and utilization of nutrients.

^d Nutrition care process: a standardized process for providing care. There are four steps in the process: nutrition assessment, nutrition diagnosis, nutrition intervention, and nutrition monitoring and evaluation (11).

^e Nutritional assessment: the interpretation of information from dietary, laboratory, anthropometric and clinical studies (12).

dietitian identifies the nutrition diagnosis^f and subsequent nutrition intervention(s).

In the context of dysphagia, *swallowing difficulty* is usually a preliminary nutrition problem or *nutrition diagnosis* identified within the nutrition assessment completed by a dietitian. Other related nutrition diagnoses may include *inadequate energy-protein intake*, *inadequate fluid intake*, *inadequate oral intake*, *biting/chewing difficulty*, *chronic disease or condition-related malnutrition*, and *predicted suboptimal nutrient intake*. These terms and their definitions are defined within the international Nutrition Care Process Terminology (NCPT) lexicon and are commonly used within dietetic practice around the world. *Diagnosis* in this context is not a diagnosis of a medical condition but rather of an identified nutrition problem that could contribute to development of and/or difficulty in managing a medical condition.

In dysphagia assessment and management, dietitians:

- provide client- and family-centred care; they respect and are responsive to client preferences, needs and culture, ensuring the client and family understand options for assessment and treatment, and provide informed consent;
- obtain and interpret information from mealtime/feeding observations, including estimation of daily nutrient intakes;
- identify signs and symptoms of dysphagia;
- assess the client's nutritional status and requirements for food, fluid and nutrition;
- identify the nutrition diagnosis(es), such as swallowing difficulty;
- conduct or coordinate a clinical (bedside/ tableside) swallowing assessment^g and/or

instrumental swallowing assessment, where permitted by law;^{h,i}

- identify the risk of choking and aspiration, and associated risk of pneumonia;
- consider the balance of risks and benefits of a swallowing assessment and treatment for individual clients;
- determine appropriate interventions and obtain client consent for diet, meal pattern, nutritional supplements and/or assistive devices as needed, food texture and liquid consistency modifications, positioning and the route of feeding (5,8);
- develop enteral and parenteral feeding regimes;
- provide client and/or family education and counselling;
- document and communicate the nutrition care process;
- monitor and evaluate a client's response to nutrition interventions, and modify the care plan as needed;
- act as a resource for clients and their care providers;
- work collaboratively and consult with other health care providers in the interprofessional team the circle of care; and
- facilitate ethical decision-making discussions, with the client's values guiding clinical decisions.

^f Nutrition diagnosis: a specific nutrition problem that can be resolved or improved through treatment/intervention by a dietitian (11).

^g Clinical (bedside/tableside) swallowing assessment: an assessment of a person's ability to manage food and/or liquid taken orally, as assessed through food and/or liquid trials, using foods of various textures and/or liquids of various thicknesses. A clinical swallowing assessment includes

reviewing the medical history, medication effects, reported/observed swallowing difficulty, and monitoring of dysphagia signs and symptoms as well as an assessment of oral/pharyngeal functions, oral processing efficiency, response to bolus, laryngeal elevation, respiratory function and airway protection.

^h Instrumental swallowing assessment: a swallowing study that requires the use of radiologic means (videofluoroscopy) or flexible endoscopes (FEES) to visually identify swallowing issues.

ⁱ For example: In Ontario, dietitians do not have the authority to conduct the controlled act of performing a procedure with an instrument beyond the larynx. More information is available from the College of Dietitians of Ontario regarding delegation of controlled acts.

Context of Practice

Dietitians involved in dysphagia assessment and management are employed in a range of settings with various contexts of practice (e.g., long-term care facilities, homecare, community hospitals, acute healthcare centres). The dietitian's role is defined by the needs of the client and the environment in which care is provided (4). In some settings, dietitians are the first health professionals to recognize swallowing difficulties because they perform routine nutritional screening through mealtime observations and regular monitoring of body weight and food intake. The dietitian independently performs a swallowing assessment or does so in collaboration with other health professionals (e.g. speech language pathologists (SLPs), occupational therapists (OTs), physiotherapists (PTs), and nurses (RNs)).

Dietitians assess and develop care plans relevant to their clients' unique needs and personal care choices ensuring informed consent. For example, some clients/client designates may decline an instrumental swallowing assessment if transportation to a more specialized facility is an additional burden of care and would negatively affect the client's experience from a holistic care point of view. The client's experience is integrally tied to the principles of client-centred care, individualized care, and tailored services to meet client care needs (6).

Defining the Role of the Dietitian in Collaborative Interprofessional Practice

Each member of the interprofessional team provides unique and valuable contributions based on their particular knowledge and training (13). Dietitians contribute profession-specific expertise to the client experiencing dysphagia (8). Dietitians are trained to assess, interpret and monitor nutritional status (e.g., based on anthropometric, biochemical and dietary data); to develop the nutritional care plan, including texture modification; to monitor and evaluate the effectiveness of the nutrition care plan for the management of dysphagia; to identify the need for nutritional supplements and/or assistive devices; to recognize when nutrition support is indicated; and to develop enteral and parental nutrition support regimes.

The dietitian is uniquely trained to consider all of the client's medical diagnoses and conditions in the assessment of nutritional status and determination of the nutrition care plan. When there are multiple pathologies (e.g. diabetes, renal insufficiency and dysphagia), nutrition interventions must be compatible and not compromise other diagnoses/conditions. Simply modifying a food texture or liquid viscosity cannot be done without considering the nutrition care plan as a whole (3).

Dietitians are trained to use a systems approach to ensure that nutrition care plans and mealtime management protocols are safe, practical and feasible. Despite the use of texture modification as an intervention to facilitate a safe swallow, "there is no single convention with respect to the terminology used to describe levels of liquid thickening or food texture modification for clinical use" (14). There is risk to the client with dysphagia if the texture intended is not provided (15,16). Therefore, it is essential for the clinical and foodservice dietitians to collaborate to

ensure texture-modified menus meet clients' needs (e.g. acceptance, nutritional and hydration requirements), and ensure composition is standardized and the consistency is appropriate for effective treatment. Dietitians use their foundational knowledge in food science and rheology to ensure appropriate consistencies and viscosities are provided to clients.

Dietitians are educated in the principles of ethical decision-making and counselling/communication techniques. They therefore lead discussions with clients, families, and relevant others regarding decisions related to dysphagia assessment and management. With their global view of the nutritional care plan, they should always be involved and consulted when a client is choosing to accept risks associated with oral intake, making decisions to accept or remove a feeding tube, and considering options for palliative care.

In addition to the unique skills and perspectives each professional brings to the team, team members will share similar knowledge and skills. Communication and collaboration enables an interprofessional team to recognize and best utilize overlapping scopes of practice so that clients receive optimal care in a timely manner (13). In particular, the scopes of practice of SLPs, OTs, PTs, and RNs with respect to dysphagia assessment and management are recognized and valued, providing potential for some role overlap, shared skills and complementary roles. Dentists and denturists also offer significant value to the interprofessional dysphagia care team. The individual expertise within health care teams and institutional policies typically contribute to decisions regarding role delineation and the scope of practice exercised by professionals in a given practice setting. The context of care, environment and availability of other team members will determine the extent to which dietitians will collaborate. Notwithstanding the importance of the professional care team, new understanding about the integral nature of client and family as active

participants across the spectrum of care adds an additional dimension to the continuum of care in dysphagia assessment and management.

Practice Implications

Dietitians across Canada are practising to full scope with regard to dysphagia assessment and management. They are independently conducting swallowing assessments. They are providing leadership on dysphagia care teams. To further enhance client care, and support and advance the profession, dietitians will continue to:

- demonstrate effective leadership on interprofessional teams;
- communicate the value of dietitians' expertise in dysphagia assessment and management;
- advocate for the dietitian's role in the care of clients with dysphagia;
- participate in practice-based research related to dysphagia assessment and management;
- contribute to product development of texture-modified foods and consistency-modified fluids;
- act as mentors to, or seek mentorship from, other dietitians and/or health professionals;
- recognize the value of the client and/or family's point of view and all healthcare providers' contributions; and
- participate in ongoing continuing education to enhance knowledge and skills in dysphagia assessment and management.

Supporting and Advancing Dietetic Practice in Dysphagia Management

Dietitians of Canada provides continuing professional development opportunities and resources through means such as distance education (19) and mobile, professional learning, the *DC Practice Blog*, regularly updated information in the international knowledge translation service Practice-based Evidence in Nutrition (PEN®), and publication of practice-based research in the *Canadian Journal of Dietetic Practice and Research*. In addition, DC supports strong member engagement, mentorship and knowledge exchange through formal professional practice-based networks such as the Dysphagia Assessment and Treatment Network.

These DC supports enable dietitians to attain and maintain relevant competencies for dysphagia assessment and management and promote leadership of interprofessional teams. DC encourages and facilitates the exchange of ideas, innovation, and experiences in dysphagia assessment and management. DC resources, tools and networks support dietitians to become skilled, independent dysphagia practitioners.

Dietitians of Canada supports national and international initiatives which broaden our understanding of dysphagia and how best to care for those experiencing it. This includes the work of the International Dysphagia Diet Standardization Initiative to standardize language used to describe texture and liquid modifications and the innovative change required in the health system described by the Canadian Academy of Health Sciences (17) that reflects a model of care that optimizes quality, access and expenditures for sustainability.

Dietitians of Canada is committed to building alliances to support interprofessional collaboration in dysphagia assessment and management. These alliances will ideally lead to opportunities, such as the development of an interprofessional framework (e.g. the UK's Inter-professional Dysphagia Framework (18)). DC believes that the best outcomes for Canadian patients can be achieved within the context of a well-developed interprofessional team that recognizes and utilizes the full scope of dietetic practice as offered by the registered dietitian.

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Comments

Dietitians of Canada invites comments, suggestions, and inquiries on the development and application of *Defining the Role of the Dietitian in Dysphagia Assessment and Management*. (2015). Please forward comments to contactus@dietitians.ca.



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