

## SFHCHS159 - SQA Code HC7L 04

Provide support to individuals to develop their skills in managing dysphagia



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### Overview

This standard covers working under the direction of an appropriate specialist, to support individuals participating in therapy programmes to restore or maintain optimum independence in the management of dysphagia.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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#### Performance criteria

- You must be able to:*
- P1 obtain valid consent from the individual before carrying out the agreed treatment programme
  - P2 carry out the skill development activities correctly as specified in the individual's care programme using the methods directed by the therapist
  - P3 seek immediate advice and assistance from a relevant contact where the level of support needed by the individual is beyond your scope of practice
  - P4 provide the individual with relevant information and advice, as instructed by an appropriate specialist, at a level and pace that is appropriate to their:
    - P4.1 level of understanding
    - P4.2 culture and background
    - P4.3 preferred ways of communicating
    - P4.4 needs
  - P5 refer any questions which are outside your scope of practice to answer to a relevant member of the individual's care team
  - P6 provide the individual with sufficient time, opportunity and encouragement to practice existing and newly developed skills, in accordance with the individual's care programme
  - P7 encourage the individual to develop their knowledge and understanding of dysphagia and the techniques used in its management
  - P8 support and encourage the individual to promote their own health and wellbeing and be as self managing as possible
  - P9 provide oral intake in the consistency and appearance identified in the individual's care programme
  - P10 provide accurate and prompt feedback to the individual's therapist and care team to support them in their effective future planning of the individual's care
  - P11 keep accurate, complete and legible records of the support provided and the individual's response to it, in line with organisational policy

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---

#### Knowledge and understanding

*You need to know and understand:*

- K1 the current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to providing support to individuals to develop their skills in managing dysphagia
- K2 your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance
- K3 the duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer
- K4 why it is necessary to obtain valid consent prior to working with an individual and the methods used to achieve this where the individual is not able to give their valid consent directly
- K5 why you should seek to support and encourage the individual to promote their own health and wellbeing and how this might be achieved
- K6 the sorts of secondary difficulties that can arise in individuals suffering from dysphagia, how to recognise their emergence and what action you should take to deal with them
- K7 the importance of communication that is responsive to the needs of the individual
- K8 the types of information and advice which you are able provide the individual with according to your scope of practice
- K9 the types of activities that can be carried out with people in order to help them develop swallowing skills
- K10 the types of information that should be fed back to the individual's therapist and/or the rest of the care team, and when and how you should do this
- K11 the information that should be recorded and the importance of doing this contemporaneously
- K12 record keeping practices and procedures in relation to diagnostic and therapeutic programmes/treatments
- K13 anatomy and physiology relevant to maintaining a safe swallow
- K14 the main clinical causes of dysphagia
- K15 why the environment and support required by the individual is important including:
  - K15.1 lighting
  - K15.2 heating
  - K15.3 environmental stimulus (i.e. distractions)
  - K15.4 posture and mechanical supports (i.e. pillows, standing frames, specialist seating)

## SFHCHS159 - SQA Code HC7L 04

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---

- K15.5 utensils, cutlery and feeding aids
- K15.6 sensory aids (i.e. glasses, dentures, hearing aids)
- K15.7 verbal and physical prompts
- K15.8 rate of presentation of oral intake
- K15.9 verbal and non-verbal cues from individual
- K16 how an individual's medical and physical state may impact on their ability to swallow, in terms of:
  - K16.1 sensory impairment
  - K16.2 loss of bodily function
  - K16.3 loss of cognition
- K17 the sorts of issues and risks that can arise with dysphagia
- K18 the main types of dysphagia and their presentation/identification
- K19 the reasons for modification of the consistency and appearance of oral intake including:
  - K19.1 impact on nutrition
  - K19.2 safe working practices when modifying oral intake
  - K19.3 complying with manufacturers instructions and local protocols

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### Additional Information

#### External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB7 Interventions and treatments

The candidate and assessor must only sign below when all Performance Criteria and Knowledge points have been met.

**Unit assessed as being complete**

<b>Candidate's Name:</b>	
<b>Candidate's Signature:</b>	
<b>Date submitted to assessor as complete:</b>	

<b>Assessor's Name:</b>	
<b>Assessor's Signature:</b>	
<b>Date assessed as complete:</b>	

**Internal Verification —**

to be completed in accordance with centre's IV strategy

<b>Evidence for this Unit was sampled on the following date/s:</b>	<b>IV's Signature</b>	<b>IV's Name</b>

This Unit has been subject to an admin check in keeping with the centre's IV strategy.

<b>Date of admin check</b>	<b>IV's Signature</b>	<b>IV's Name</b>

**Unit completion confirmed**

<b>IV's Name:</b>	
<b>IV's Signature:</b>	
<b>Date complete:</b>	