



A fact sheet for aged care residents

Informed choice and supported decision making for people who eat and/or drink when there may be a risk

This fact sheet outlines your right to make choices about your food and drink. This includes how your care team can support you to make an informed choice about food or drink that may be a risk to your health.



Why it's important

Swallowing difficulties, known as dysphagia, may mean when you eat or drink you are at risk of choking, repeated chest infections, malnutrition, dehydration or other risks. Each individual's risks are different. Choking where food blocks your airway can be distressing to those around you and can lead to sudden death. When food or liquid 'goes down the wrong way', it can lead to coughing or difficulty breathing.

Swallowing difficulties can be mild or sometimes make it very uncomfortable or hard to eat.

Swallowing problems may be noticed by you, a carer, a staff member, family member or when a new health condition arises, such as a stroke. Once aware, your care team need to discuss with you and your representative and work together to find a way forward. This means you are actively involved and are given choices about next steps.



Likely action includes a referral to a speech pathologist who can assess your individual swallowing. They may make recommendations to make swallowing easier, to reduce risks and to make your mealtimes a more comfortable experience. They can also recommend the safest ways of helping you to eat – i.e. such as positioning you in a certain way or giving you plenty of time to eat.

Your speech pathologist may discuss texture modified food and drinks. These sometimes help you to swallow more safely and comfortably to avoid coughing, drooling, or having food stuck in your throat. Some people may find texture modified food or drink less enjoyable and they might lose interest, lose weight and miss some pleasures that are important to them – like a cup of tea, glass of beer or certain favourite foods.

If recommended, you may wish to have texture modified foods and drinks, and these might help you considerably. You may decide to continue to have your preferred food and drinks sometimes or at all times, despite the risks. The choice is yours. This is known as 'eating and drinking with acknowledged risk'.

How it's done – A planned approach to eating and drinking with acknowledged risk

Your provider will work with you to support your informed choice, to understand the risk and to meet their duty of care to you and staff who provide support at mealtimes. Remember that other people may be alarmed if you are distressed when eating, so take this into account in your discussions.

Your care team will engage a speech pathologist to assess your swallowing with your consent. The speech pathologist can discuss these recommendations and risks with you so you can make an informed choice about what to do next. You can choose to follow the recommendations sometimes or all the time. There may also be compromises you can consider to balance your safety and pleasure.





Consumer choice

Standard 1 of the [Aged Care Quality Standards](#) reinforces the right to make informed choices and be supported to take risks to “live the life I choose”.

Right number 7 of the [Charter of Aged Care Rights](#) also reinforces the right to “have control over and make choices about my care, and personal and social life, including where the choices involve personal risk”.

Aged care providers have a regulatory and ethical responsibility to ensure mechanisms are in place to recognise consumer choice and for appropriate processes to be undertaken to fulfill their own legal obligations of appropriate care in the context of Eating and Drinking with Acknowledged Risk.



If you choose to follow the recommendations your care provider will:

- ✓ develop and implement a mealtime support plan based on the recommendations and agreed decisions
- ✓ ensure you know you can ask to review the plan or change your mind at any time
- ✓ monitor risks of reduced enjoyment and reduced intake of food and drinks associated with texture modified food
- ✓ try to make your texture modified food and drink as tasty and nutritious as possible.



If you make an informed choice NOT to follow the recommendation of texture modification your care provider will:

- ✓ ensure your wishes are always taken into account
- ✓ seek your informed consent to accept the risks identified
- ✓ document your decision and any mealtime support you require in your mealtime support plan and communicate this information with all staff
- ✓ monitor you so that if you are unhappy, are not eating enough, or if your situation changes, then you can be reassessed
- ✓ ensure you know you can ask to review or change your mind at any time.



Examples

Mara has noticed some difficulties swallowing after a recent stroke. She mentions this to her daughter and to the care staff. A speech pathologist reviews Mara's swallowing and, after an examination and discussion, recommends that puree food and thickened fluids will make Mara's swallowing easier. Mara understands this recommendation and is keen to give this a try, but is also worried that she will not be eating the foods she loves. After discussion, it is agreed that Mara will mostly have the recommended puree diet and thickened fluids but will still have her morning cup of coffee and special cakes brought in by her family. A dietitian reviews Mara's diet, intake and nutritional status and helps ensure that the food Mara eats is still nutritious and suited to Mara's preferences and taste. Mara eats sitting in a chair and is given plenty of time to eat slowly. Her medication is reviewed to identify any drugs that might make her swallowing worse.

Vince has been eating softer texture food for a few months, which started when he was in hospital. He is losing weight and rarely eats a whole meal. A dietitian review identifies that George is not happy at all with his current food and gets no pleasure from meals. He is not eating enough to maintain his nutrition or his weight. A speech pathologist reviews George's swallowing and discusses the risks and the options. George decides he would like to try going back to regular food and is aware that this has some risks. He wants to 'give it a go'. George goes back to eating a few specific preferred meals in the dining room. He eats more, gains weight and is much happier with his quality of life. He coughs sometimes while eating but so far does not find this too uncomfortable and is being monitored closely for any impacts on his health by his GP.





What to do if your choice is being limited

If you have concerns that your choice is being limited by your aged care provider, you can:

1. talk to your aged care provider in the first instance
2. speak with an aged care advocate at the Older Persons Advocacy Network on **1800 700 600** or visit opan.com.au, for support to raise your concerns
3. contact the Aged Care Quality and Safety Commission on **1800 951 822** or visit the website, agedcarequality.gov.au. The Commission can help you resolve a complaint about your care.

Further information

Swallowing:

- [Supporting safe and enjoyable mealtimes for people with swallowing difficulties fact sheet](#)
- [Nutrition and texture modified food and drinks: eating and drinking when you have problems with swallowing fact sheet.](#)



Phone

1800 951 822



Web

agedcarequality.gov.au



Write

Aged Care Quality and Safety Commission
GPO Box 9819, in your capital city