



Patient Safety Notification

Managing the Risk of Choking



43

The number of choking-related incidents reported on NIMS in Q4 2020



Examples of incidents where choking has occurred:

- Service user was eating an unsuitable diet consistency
- Bones present in food, particularly from fish or chicken
- Dietary care plan not followed
- High risk of choking was not recognised / highlighted
- Nil by mouth instructions were not followed

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This patient safety notification was prepared in consultation with the Health Service Executive (HSE), Irish Association of Speech & Language Therapists (IASLT), and Irish Nutrition and Dietetic Institute (INDI).



IASLT | The Irish Association of
Speech + Language Therapists

Advice for reducing the risks of choking incidents

Choking can result in serious or fatal outcomes and the risk of its occurrence can be reduced through careful risk assessment and management. Those identified as being at higher risk of choking include those with neurological conditions such as stroke and motor neuron disease; people with dysphagia (difficulty with swallowing) or oesophageal pathology; people with mental health difficulties; and older people. The [Clinical Risk Unit](#) in the [State Claims Agency](#) has noted the frequent reporting of choking incidents on NIMS and has prepared the following advice.

Risk Considerations

A number of risk factors have been identified which may contribute to choking incidents:

- Dysphagia, particularly impaired chewing
- Incorrect diet consistencies or food not prepared to correct level in line with the International Dysphagia Diet Standardisation Initiative (IDDSI)
- Lack of awareness or communication of dietary requirements, including during transfer of care between different settings
- Food that may contain bones
- Maladaptive mealtime behaviours such as increased rate of eating or eating food in inappropriate amounts / size
- Pica (eating non-food items)
- Poorly fitting dentures and reduced oral care
- Side effects of polypharmacy or certain psychotropic medications
- Reduced level of consciousness

References:

1. HSE (2019) *International Dysphagia Diet Standardisation Initiative (IDDSI)*. Available [here](#).
2. HIQA (2015) *Regulatory Guidance for Residential Services for Older People*
3. *Reducing the Risk of choking for people with a learning disability – A multi- Agency Review in Hampshire 2012*
4. *Irish Association of Speech and Language Therapists (IASLT) (2016), Speech and Language Therapy Provision for People with Dementia, IASLT Position Statement*
5. Hemsley B. et al (2019) *Dying for a meal: an integrative review of characteristics of choking incidents and recommendations to prevent fatal and nonfatal choking across populations. American Journal of Speech-Language Pathology 28 (3) 1283-1297*

Advice for Safe Practice

- Provide people with **different levels of dysphagia**, as described in the IDDSI, with food, meals and fluids that are **appropriate to their needs**
- Ensure **all staff** working with service users with dysphagia are **trained in the IDDSI**
- Make appropriate **referrals** to a **speech and language therapist** for assessment and management
- Seek **dietetic input** advice on adequacy of nutrition where **modified consistency diets** are recommended
- Clearly **communicate** dietary care plans to all members of the **multi-disciplinary team** including **catering personnel**
- Use dietary status **signage** (where appropriate), in line with the **IDDSI**, to aid communication.
- Ensure **family members and carers** are aware of any modified diet and restrictions to dietary intake.
- Ensure appropriate **supervision** is in place for those identified as **having a higher risk of choking** when eating or drinking
- Modify the mealtime environment by allowing sufficient time for service users at mealtimes and reducing distractions.
- Address any higher-risk eating behaviours such as impulsivity.
- **Optimise oral health care** and ensure correct fit of dentures.
- Ensure all staff members have regular training in performing **abdominal thrusts (Heimlich manoeuvre)** and **basic life support** on people of all ages.