From The Inside Out Supporting Residents in Care Home with Swallowing Difficulties

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A Literature and Consensus Based Approach to the Development of a Dysphagia Management Guide in The Care Home Setting

Research Team

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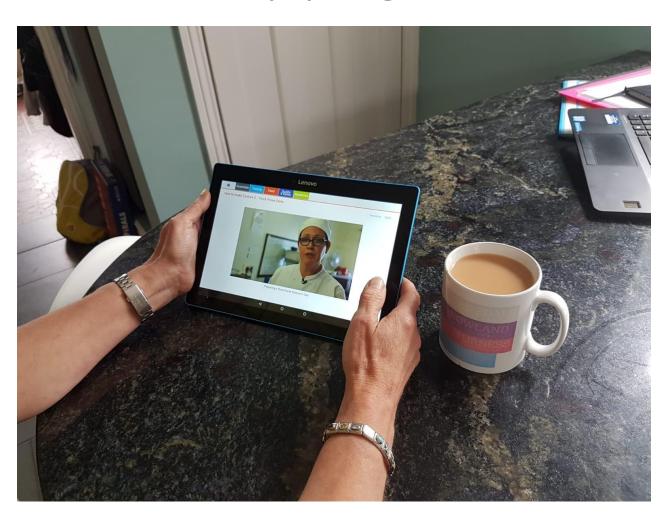
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Co-designed Care Home Guide to Dysphagia



The Idea

Do staff find SLT advice helpful?

Why are staff 'non compliant'

What would help staff provide optimal dysphagia care?

Do staff regard good management of dysphagia as important?

What gets in the way of providing best dysphagia care?

Development of the Guide

- Year 1
- Literature Search
- Finding out Peoples experiences- Focus groups
- Thematic Analysis
- Consensus prioritisation method
- Year 2
- Collaboration with Elaros / D4D
- Development of content and digital format
- Testing of design and content

Literature Search

'What are the approaches to dysphagia management in care homes and what is the effectiveness of different approaches?'

Results

- 62 'of interest'
- 31 papers included
- 13 literature reviews

Themes

- Skill mix + staff resourcing
- Knowledge and Training
- Interventions (staff practice, direct, sensory)
- Protocols screening, interventions, documentation
- Diet and drinks –
 palatability, nutritional
 content
- Oral health & positioning

Finding out peoples experiences 'What are the barriers and facilitators to good dysphagia management?'

4 Care Homes

- 8 Focus Groups
- 6 Resident Interviews
- 4 manager Interviews
- 4 Quality Manager Interviews
- Recruits = 81
- Participants = 51 from across all roles in the workforce

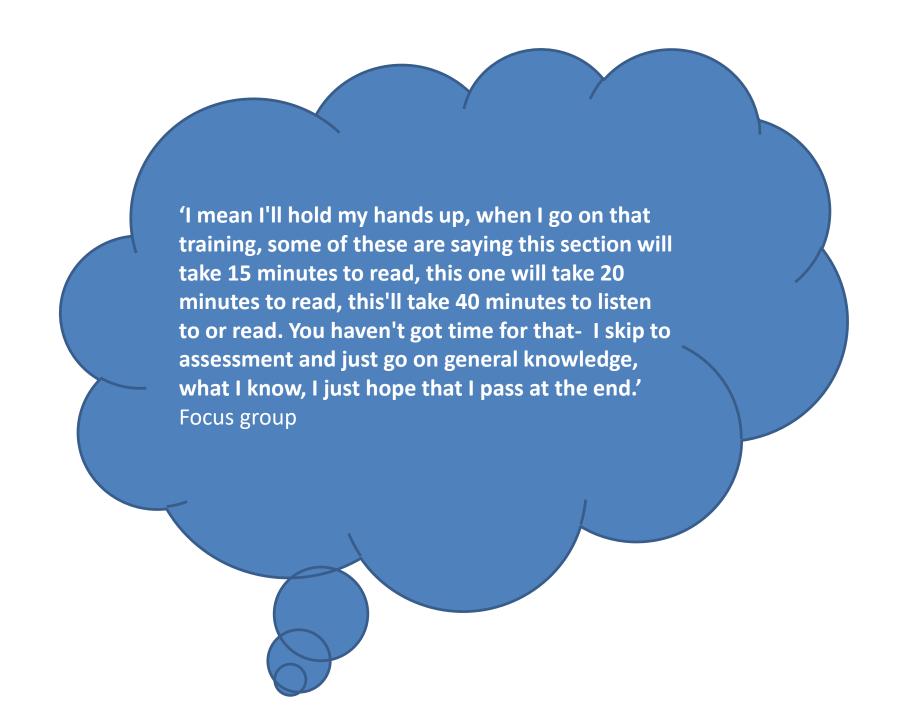
Thematic Analysis

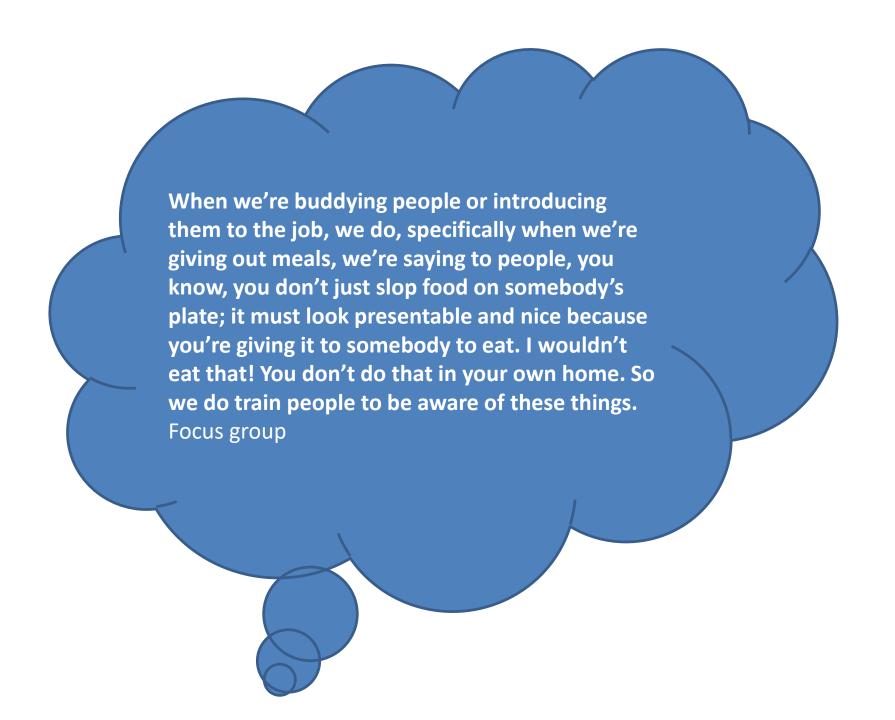
Method

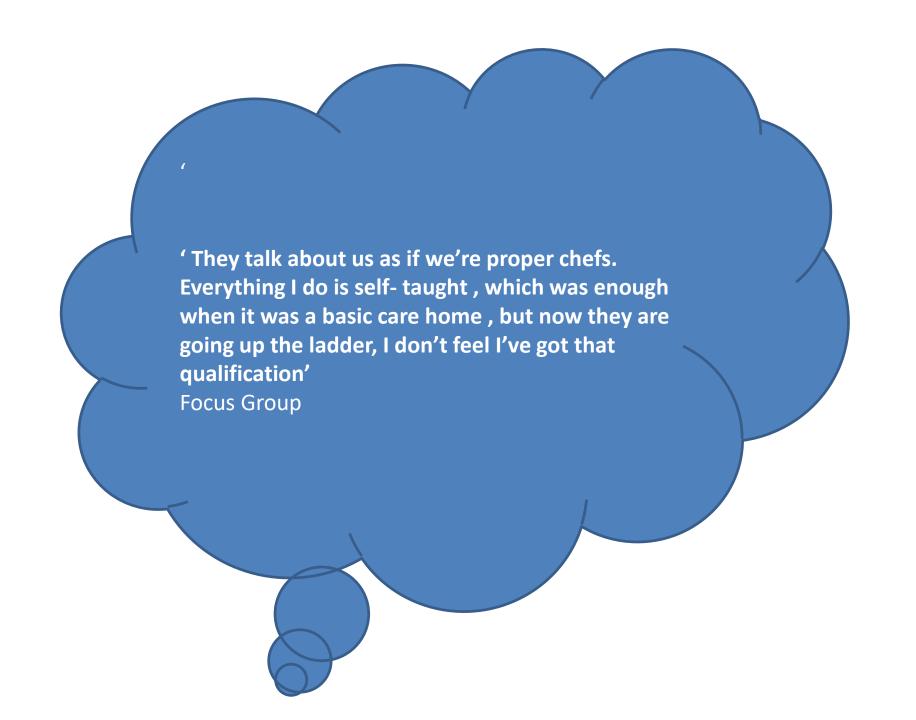
- Based on Framework analysis
- Development of thematic map

Themes

- Identification of dysphagia
- Training and education
- Other health professionals
- Staffing / workforce
- Catering (timing of meals, menus)
- Mealtime assistance
- Transfer of information
- Impact of E & D difficulties on residents & staff
- Relative / family carer issues
- Policies and procedures







'From what I've seen, you know, there've been times when things have been very similar and there's not been much of a choice'.

Focus Group

'it's hard to find snacks and I was just wondering: is that a situation in - It's hard—isn't it?—if somebody's not able to eat cake or bread or a bun or biscuit' Focus Group

'it would be nice to have good recipes for you guys, I mean we've got good cooks here, but I mean as in ways of doing things that you might not thought of doing' Focus Group

'What's this, what I'm eating now? Don't you know? I said if I'd have known I wouldn't have asked you. She said it's trout.'

Resident: Interview

'Basically it looks as though someone's got either a decent-sized ladle, and put it out and it's just sort of settled into different sort of round-ish, oval-ish shapes.'

Focus Group

'We will monitor them, not for too long, and probably we will try a little bit of adjustments with the initial sort of diet and drinks to see, I know it's not a quick fix but sometimes it seems to take weeks to see the SLT, and in those weeks there's more weight loss. We can't give a soft diet unless we're told to give a soft diet so sometimes some people will be struggling and then they'll be struggling for a while and then your referral goes in. Then, as you know, it can take up to three or four weeks to get a speech therapist out' Focus Group

'For them, it's not about so much how to do it, - It's more about giving them the time to go and do it' Manager: Interview

'It's having the time to – I mean if you're in the kitchen on your own... cooking 50 odd meals, and to actually stop and do a blending from start to finish can take you an hour out of your day 'Focus Group

'Having one of those blenders would be an amazing thing. You could do it'
Focus Group

Production of the Care Home Guide to Dysphagia

 Development of Guide in collaboration with Elaros and Devices for Dignity



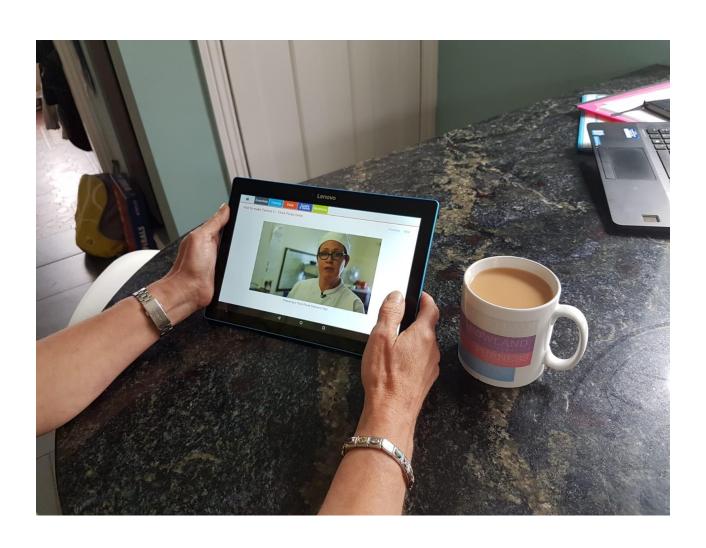




Innovate UK

- Designing the Guide
- Population of the Content (Consensus prioritisation)
- User testing

The Care Home Guide to Dysphagia

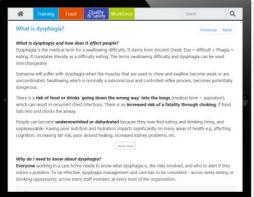




- Android App for tablets
- Text , embedded videos, photos, web links
- 5 topic areas
 - -Dysphagia Essentials
 - -Food
 - -Quality and Safety
 - -Workforce
 - -Training
- Rapid access to the most relevant information with easy navigation
- 52 pages
- Embedded analytics

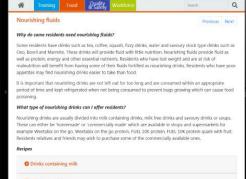














Initial testing

Care Home Guide to Dysphagia

Training

Dysphagia
Essentials

Quality
& Safety

Workforce

- 4 participating care homes
- 57 staff recruited
- X2 tablets / home over 12 week period

Evaluation tools

- In built analytics activity monitored remotely
- Questionnaire Likert scales and free text.
 demographics; perceptions of change in knowledge / practice; usability
- Informal interviews with managers / staff

Analytics – pages visited

- Pages displayed : 1913 over pilot period
- More than half of activity in 2 sections
- Food (33%) and Essentials (22%)
- All pages visited at least twice
- 77% of the pages visited > 10 times.
- Average time spent per page = 50 secs

Most visited pages:

- What is dysphagia (60)
- Texture modified diets &drinks (42)
- Thickened drinks (37)
- Suitable foods for texture modified diets (36)
- Online resources (32)
- How to make Texture C (30)
- A balanced diet (29)
- Aspiration and coughing (28),
- Finger Foods (26).

Questionnaires - demographics

Participants 57; Returned Questionnaires 36

Gender and age

Female 86%

age	16-24	25-34	35-44	45-54	>55
%	11	17	14	19	25

Male 14%

age	16-24	25-34	35-44	45-54	>55
%	0	8	3	3	0

Role

Management/training 26%; Nurse 8%;

Health Care Assistant 47%; Kitchen staff 17%; Other 2%

Experience

Years	< 1	1-2	2-5	5-10	>10
%	6	8	22	22	42

Questionnaires – 12 Likert questions Design, content, usability, accessibility, impact

Positive

- Impact 73% reported Guide had helped them in their job
- **Usability** 90% reported Guide was easy to use
- Design 93% felt the organisation of information was clear
- Videos 80% felt the videos were helpful
- 88 % would recommend the Guide to other care home staff

Negative

 Accessibility – 25% reported that the tablet was not available when they wanted to use it

Questionnaires – Free text

Reflected the results from the Likert data Identified participants liked the content, design and usability

Qu. What did you like best about the guide?

Easy to use. Information was clear and easy to understand. It had really good information and ideas in it. (Manager)

Easy to access the guide on which bit was needed (HCA)

There was enough information to explain dysphagia and videos were a big help (Health Care Assistant)

I liked every aspect of the guide, as it was easy to understand and clear. (Kitchen assistant)

It was easy to find the information I required and had videos if I was unsure of a texture (cook)

Future Plans

- Creation of an app that is low cost at the point of access
- Available to ALL staff who work in care homes
- Parent organisations could use it to support them to provide good and consistent care for their residents with swallowing difficulties

Recent publication

Pownall, S., Barnett, E., Skilbeck, J., Jimenez-Aranda, A., Fowler-Davis, S. (2019) The **Development of a Digital Dysphagia Guide with Care Homes: Co-production and Evaluation of a Nutrition Support Tool**. *Geriatrics*, 4(3), 48: https://doi.org/10.3390/geriatrics4030048

Seeking funding for wider scale evaluation