

Roche Dietitians Top 17 IDDSI Tips



Here are some tips on what we have learned about IDDSI. It doesn't cover everything but gives you an idea of the overall "flavor" of IDDSI. Sign-up for updates at www.Rochedietitians.com.

1

It's all about safety. Your initial response may be that you don't have time to study IDDSI and fit it in with all the many other things you must do. We thought the same thing. But when you learn about the safety benefits of IDDSI, you know it's the best way to provide food and drink to those with dysphagia.

2

It's a standard of practice. Another reason why we should do it. The Academy of Nutrition and Dietetics has adopted IDDSI as of May 1, 2019.

3

In the long run it will make things easier. Think about the time you spend on diet orders transferred into your institution. Or even how to interpret orders from different prescribing practitioners. There is currently very little consistency in terminology. Even if there is the same terminology you may not define the diets the same way. Won't it be great to have all the same terms and definitions for texture modified foods and thickened liquids?

Bonus Tip: You don't have to adopt all diet levels. Compare the IDDSI diets to what you are serving now and see which diets match best. Perhaps you will not need to serve all IDDSI levels.

4

Get interdisciplinary buy-in and identify a champion. Diet orders, beverages and meal service are not singularly a Food and Nutrition responsibility. Many disciplines including physicians, nursing, speech language pathology, activities, administration and even marketing need to be part of the new diet terminology and implementing the needed changes. Take your time to involve all disciplines ahead of time to save confusion and roadblocks later. In addition, recruiting a champion who believes in IDDSI and who can influence other disciplines will be an asset every step of the way.

5

Testing is new and what makes IDDSI worth it. One of the greatest features of IDDSI is the standardized, easy, accessible-to-all testing methods. Testing makes it easy to be sure we are serving the liquids and diets that were prescribed. There is now a way to confirm every time a person with dysphagia eats or drinks, they are getting the correct consistency for his or her needs. Testing foods will need to be integrated into your processes for obtaining, preparing and serving foods as well as interdisciplinary training.

6

Do not change or alter IDDSI. For IDDSI to truly be standard, we cannot create our own versions, no matter how small the change or alteration may be. If we use the same terminology as IDDSI, the definition of the diet or beverage thickness need to remain the same. This is how IDDSI puts it: "Alterations to elements of the IDDSI framework may lead to confusion and errors in diet texture or drink selection for patients with dysphagia. Such errors have previously been associated with adverse events including choking and death."

7

Start with liquids as they are the easiest. When implementing IDDSI, start with the liquid levels and testing methods. The terminology will change (Thin (Level 0), Slightly Thick (Level 1), Mildly Thick (Level 2), Moderately Thick (Level 3)), so diet orders will need to change but the level of thickness is probably very close to what you are using now. Starting with liquids is a good way to test your process for education and training, diet order changes and testing processes.

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8

Puree gravy is different. A big change to Puree (Level 4) Diets is the need to be sure that the gravy is as thick as the pureed food. You may elect to not use gravy. Per the IDDSI framework, puree food must: Show some very slow movement under gravity but cannot be poured. Liquid must not separate from the puree food. And it must not be sticky. Thus, one of the tests for Puree (Level 4) is the spoon tilt test to make sure the puree food slides off a spoon when tilted.

9

Liquidized Diets (Level 3) must be tested. Having a standard term and definition for liquidized (sometimes currently called blenderized) foods will help maintain the nutritional integrity of liquidized diets. You will have to test and perhaps update your recipes to verify that the final products are not too thick or too thin and smooth without “bits or particles”.

10

Minced & Moist (Level 5) may be your greatest challenge. Minced & Moist (Level 5) Diet guidelines state that ALL food must be minced (4mm or less for adults, 2mm or less for pediatric), soft (easy to squash with tongue) and moist (but without separate liquid). For example: Meat must be minced and served in extremely thick, smooth, non-pouring sauce or gravy. Soft foods that we may have not minced in the past such as noodles and well-cooked vegetables will need to be minced and served with any liquid drained.

11

Soft & Bite-Sized (Level 6) presents a new emphasis on soft. Now chopped or cut up foods have a clear definition. Bite-sized is defined as 15mm or less for adults which is approximately ½ inch. Pediatrics is 8mm or less which is about ¼ inch. Foods must also be soft. Food should easily squash with a fork and not return to its original shape. Testing is important as some foods (such as bananas) may be soft or not depending on the individual food item.

12

Regular, Easy to Chew (Level 7) is a new addition to IDDSI. Some individuals may need soft foods but not need as much modification as Soft & Bite Sized (Level 6) or Minced & Moist (Level 5). Therefore, IDDSI has introduced Regular, Easy to Chew (Level 7). It is not a new diet level, rather a modification of the Regular (Level 7) Diet. Foods are soft/tender and can break apart easily with the side of a fork or spoon. Food piece size is not limited but biting and chewing is required.

13

Bread is only appropriate on the Easy to Chew and Regular Diet (Level 7). In the literature, bread is often identified as a cause of choking. Bread and sandwiches require the ability to both bite and chew. Bread cannot be easily mashed or broken down. If is sticky, especially when wet. Therefore, IDDSI considers bread only appropriate for the Regular (Level 7) diet. When bread is served on IDDSI Pureed diet (Level 4), IDDSI Minced & Moist (Level 5), and IDDSI Soft & Bite-Sized (Level 6) diets it must be pureed, soaked, slurried or modified in a way where it passes the testing method for that diet level.

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14

You may consider changing to separate diet orders for liquids and foods if you are not already doing so. It will provide further clarification of what is most appropriate for individuals. Clear prescription of liquid thickness is also helpful with mixed consistency foods and foods like soups and hot cereals.

15

Liberalize Diets for older adults before implementing IDDSI. Current standards of practice (see The New Dining Practice Standards: Pioneer Network) state that restrictive therapeutic diets typically do not benefit the frail older adult and do not outweigh the risk of under-nutrition. By liberalizing most diets to regular diets before implementing IDDSI, Food and Nutrition departments can focus on serving the diets that will benefit the frail older adult the most.

16

IDDSI.org is an important resource. All the important documents are there. The entire IDDSI framework with definitions and guidelines, audit tools, printable posters of the framework and testing methods as well as past webinar presentations are readily available.

17

Get the help of a dietitian who knows what to do. Roche Dietitians has been helping organizations get IDDSI implemented by consulting on implementation processes, completing recipe and menu work, updating diet manuals, creating training content and conducting continuing education. And we just launched comprehensive IDDSI training materials! Finally, resources specially designed for the food service worker. Check it out at www.RocheDietitians.com

Let's talk. Call us at 708-442-0123.

Don't forget to sign up for email updates and additional information at www.rochedietitians.com