**Informal title:**

**Implementation Checklist for Healthcare, Senior Living, Rehabilitation and SNF**

**Individualize this to meet your facility needs.**

**Resource the** [**IDDSI Implementation Guide on IDDSI.org**](https://iddsi.org/Resources/Implementation-Guides) **for further consideration.**

|  |  |  |  |
| --- | --- | --- | --- |
| **IDDSI Implementation Checklist** | | | |
| **Plan: Forming IDDSI Team/Timeline** | **Assigned To** | **Goal Date** | **Completed Date** |
| Create an IDDSI Interdisciplinary Team (Senior Executive, Health Care Provider, RN, RN Educator, Speech Pathologist, Dietitian, Food Production Manager or Chef, Activities. Ad Hoc: Communications, supply chain, radiology) |  |  |  |
| What is the IDDSI Team's knowledge of the existing dysphagia diet (i.e. National Dysphagia Diet) vs. new IDDSI terminology?  1. Provide education.  2. Initiate Diet Order CROSSWALK (map) for current diets to IDDSI diets. Include abbreviations. Some of the facility's current diet levels may map directly to IDDSI such as puree:puree, regular:regular. Facilities currently provide BREAD on non-regular diets may consider transcribing orders for appropriate IDDSI level with physician order for “bread is allowable;” this is important to determine early on in the process. |  |  |  |
| SLP, RDN and NURSING establish processes to **identify** current clients that are on modified diets and may warrant re-evaluation for chronic dysphagia and are at-risk for malnutrition, dehydration. Begin after *crosswalk (map)* in place and prior to rollout with appropriate re-evaluations continuing throughout the implementation process. |  |  |  |
| IDDSI Team creates timeline, decides frequency of meetings and implementation date. |  |  |  |
|  |  |  |  |
| **Do: Determine goal dates and assignments. Tasks are worked on simultaneously in sub groups.** | Goal Date | Assigned To | Completed Date |
| Identify educational needs and provide on a rolling basis. Set up a schedule. Create a competency assessment tool. (Resource coming soon). |  |  |  |
| Review the diet manual and IDDSI content. Explore and confirm new standardized terminology and abbreviations as it will appear in EHR. Compare with Diet Order CROSSWALK (map), keep consistent and look for gaps/concerns. How will diet order show on all forms? Diet tickets, spreadsheets, production records? |  |  |  |
| Confirm final diet sets with RDN Leader and EHR team, **AFTER s**ome initial IDDSI testing confirms direction. |  |  |  |
| Update Diet Manual and have it approved by medical director/health care team. Update Diet Order CROSSWALK (map) if needed. |  |  |  |
| **FOOD & LIQUID TESTING** |  |  |  |
| Develop a spreadsheet to evaluate all foods and liquids served. |  |  |  |
| Create a list of all recipes and items offered to clients from kitchen/pantry; populate spreadsheet. Include all liquids, supplements and purchased pre-thickened products. |  |  |  |
| Provide targeted education to kitchen management and staff on IDDSI and IDDSI testing methods. |  |  |  |
| Create a plan with the kitchen staff on how to evaluate and test all foods/liquids. Consider doing liquids and puree first. Consider testing in “categories” of foods: meats, casseroles, starch, veg, dessert, soups/stews… (Refer to IDDSI Food/Liquid Testing Spreadsheet Template). |  |  |  |
| Test, determine how to fix, re-test and establish new recipe or cooking practices.  Document! Use [IDDSI Audit tools.](https://iddsi.org/Resources/Audit-Tools)  Test continuously from the start, making it standard operating practice. Apply knowledge learned immediately to recipes; produce and serve modified versions; and continue to test, fix and adjust recipes. |  |  |  |
| Identify improved quality of products produced. Discuss at IDDSI team meetings. |  |  |  |
| Involve more disciplines in testing. Add Testing at point of service. Use a test tray approach. |  |  |  |
| As confidence builds, add dining observation and monitoring as part of standard practice.  Create a system for point-of-service audits & action plan: Which team members will be contacted? Who will be involved and responsible? |  |  |  |
| Ensure standardized thickener is sourced. Test with IDDSI Testing Methods. Engage manufacturers to assist with training. |  |  |  |
| Confirm all food recipes are updated and have IDDSI guidelines and testing expectations. |  |  |  |
| Ensure all liquids, food items and recipes are built and loaded into menu software platforms. Work with a software specialist to correct any gaps. |  |  |  |
| Create Pre Select Spread Sheets for IDDSI diets in menu software platforms or on paper in the absence of technology. |  |  |  |
| Update printed menus with IDDSI options. |  |  |  |
| **CLINICAL PROTOCOLS, SPEECH THERAPY** |  |  |  |
| Speech to update diet and swallowing recommendations following client assessment; New admissions & acutely ill patients warrant SLP evaluation as indicated by facility referral pathways. |  |  |  |
| On a patient-by-patient basis, SLP may request physician order for evaluation of client considering the following diagnoses as support for re-evaluation in the context of heightened risk for developing complications from aspiration: COPD with or without exacerbation, post-COVID, neurological disease, change in medications, use of antipsychotics, change in ability to independently feed OR to mobilize/transfer independently. (Please note this is not an all-encompassing list, other comorbidities may also support dysphagia evaluation.) |  |  |  |
| It should also be recognized that with more food texture levels available, some clients may be appropriate for diet advancement as well. |  |  |  |
| Use your evaluation process to develop your facility’s ongoing assessment protocol. |  |  |  |
| **EDUCATION CATEGORY CHECKLIST** | Goal Date | Assigned To | Completed Date |
| Speech Pathologists and Dietitians to update patient educational handouts to reflect IDDSI levels. Utilize Diet Manual and Patient Educational resources at IDDSI.org. |  |  |  |
| Review of available resources on IDDSI website including USTIRG (USA Flag). Establish what may be applicable to use and how. |  |  |  |
| Identify IDDSI trainers for speech therapy, nursing, diet office, RDNs, other specific departments and health care providers and volunteers/family members. |  |  |  |
| Meet with RN Leadership to communicate diet + IDDSI changes  - All communication/education avenues  - Any additional education materials |  |  |  |
| Meet with SLP to communicate diet + IDDSI changes  - Review menu  - Any additional preparation |  |  |  |
| Education and train production and patient services on IDDSI - Determine and set weekly/bi-weekly meeting |  |  |  |
| Trainor customizes IDDSI PPT training module as needed to the appropriate learner level. (See resources) |  |  |  |
| Competency Training and testing: locate or develop a form to track.  Demonstrate and test trays for all IDDSI levels (food + liquids) with:  - Patient Services  - Dietitians  - SLP  -CNAs |  |  |  |
| Complete training in all areas. |  |  |  |
| Market changes via internal communications, Shift Change, Team Meetings and other. |  |  |  |
| Post laminated Education Cards in kitchen and nursing pantries. |  |  |  |
| GO LIVE |  |  |  |
| The authorized designee (Dietitian, SLP, provider) orders the correct IDDSI diet level to begin at the designated Go Live meal. |  |  |  |
| Consider pilot on 1 unit or a single facility in instances of multi-unit. Pilot should include all forms and documents used, not just service. |  |  |  |
| Replace old dysphagia menus with new. |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |
| **EVALUATION TASKS:** |  |  |  |
| SLP reevaluates swallow process as needed and adjusts diet order as appropriate. |  |  |  |
| Conduct point-of-service audits and test trays to assess compliance and problem solve. |  |  |  |
| Conduct competency assessments and reassessments as appropriate. |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |
|  |  |  |  |
|  |  |  |  |