

WHAT IS AN ORAL EATING AND DRINKING CARE PLAN?

An Oral Eating and Drinking Care Plan (OEDCP):

- is a document describing the safest, most efficient and most effective ways to provide mealtime support to a child who has some difficulties with eating or swallowing
- is designed to support people who are assisting a child at mealtimes
- is provided to meet [Occupational Health, Safety and Welfare](#) and [Duty of Care](#) requirements for workers
- it is the responsibility of the child's parent or guardian to provide their school with an Oral Eating and Drinking Care Plan written by an appropriate health professional, if requested. Without an OEDCP, DECS staff may be unable to assist the child with mealtimes.
- can be provided by a Novita speech pathologist in response to a referral from the child's parents or guardian
- helps to make mealtimes safe and enjoyable for a child at:
 - Educational settings including pre-school and school
 - Childcare
 - Family Day Care
 - Respite
 - Out of School Hours care
 - Vacation Care.
- is provided as part of the Personal Care Support Plans developed by the [Department of Education and Children's Services \(DECS\)](#).

WHO CAN PROVIDE AN ORAL EATING AND DRINKING CARE PLAN?

Care plans can be provided by Novita speech pathologist for registered Novita Children's Services clients. This is often done with the involvement of other team members such as a dietician, physiotherapist, occupational therapist and medical specialist.

Care plans can be only be provided by an appropriately qualified health professional.

WHAT IS INVOLVED IN DEVELOPING AN ORAL EATING AND DRINKING CARE PLAN

- A setting where personal support is being provided may request an OEDCP (if needed to meet [Duty of Care](#) and [Occupational Health, Safety and Welfare](#) standards)
- A parent or guardian may request an OEDCP from:
 - a Novita Speech Pathologist
 - another qualified health care practitioner (but will need to meet any costs involved).
- In developing the plan, the speech pathologist will:
 - gather information from a range of people including families, teacher, support providers and other health professionals
 - include information about a range of possible ideas and methods that will help make mealtimes safer, more effective and enjoyable for the child.
- The 'life' of the OEDCP, or how long it can be used before needing to be updated, is included in the document.

WHAT DOES AN ORAL EATING AND DRINKING PLAN CONTAIN?

Recommendations may include:

- ideas for positioning of the child and their support provider
- instructions about the required consistency (thickness) of food and drink
- how quickly and how often food should be presented to the child
- special utensils or cups to use at mealtimes
- [communication signals](#) the child may use to show things such as when they are ready for more food or when they are full
- a description of indicators that may show a new plan is required.

Because the OEDCP must take the safety and confidence of the worker supporting a child into consideration, there may be times where the recommendations in the plan are different to the approach used by families at home.

TRAINING REQUIREMENTS AND THE OEDCP

- The OEDCP includes recommendations about the training that personal support providers require to put the plan into practice.
- It is recommended that staff working with a child attend the Personal Care Support training provided by DECS. The training includes information about swallowing and support for children with swallowing difficulties (also called dysphagia). For more information see the [DECS document relating to Health Care Support Planning](#).
- The speech pathologist who prepares an OEDCP for the child is also responsible for deciding if support staff will need extra training to support a particular child and for providing this training.

JENNY'S STORY

Jenny is a 5 year old girl with cerebral palsy who has recently moved from interstate and been registered with Novita. Though Jenny is not able to talk, her parents have learned:

- the subtle facial expressions or body movements that she uses to show how she is feeling
- when Jenny is uncomfortable or happy
- when she is full or when she is really hungry
- when she just wants a drink compared to when she wants something different to eat.

They often spend an hour or more each mealtime helping her to eat while she lies in their arms and have learned all sorts of little 'tricks' to help Jenny manage when she coughs and pushes food out of her mouth with her tongue.

When Jenny's parents go to enroll at the primary school the Principal of the school asks them what support Jenny will need. Between them, they work out that:

- staff who will be supporting Jenny at school will need to learn about the specific support Jenny needs at mealtimes
- a Novita speech pathologist provide an Oral Eating and Drinking Care Plan and training to the school staff.

Jenny's mum agrees to contact the speech pathologist.

The Novita speech pathologist:

- arranges to do an assessment of Jenny's eating and drinking – this includes:
 - a home visit to observe Jenny eating a range of different foods
 - a visit to the school to observe Jenny being given her lunch by her mum (this provides the speech pathologist with a good understanding of the situations Jenny will experience at mealtimes)

- develops an outline of the plan, which she talks through with Jenny's parents
- sends the plan to Jenny's parents to read. Jenny's parents can then forward a copy to the school principal.

Because Jenny has some difficulties with her swallowing, the speech pathologist has made the following recommendations in the OEDCP:

- That people supporting Jenny attend the DECS Care planning module.
- That training to meet Jenny's specific individual needs be provided to the people who will be supporting her.

Because Jenny is young and her abilities with chewing and swallowing may change, the speech pathologist sets the 'life' of the OEDCP at 6 months. Jenny's parents and her principal take note of the date and agree that Jenny's parents will organise a re-referral for another OEDCP in four and a half months to give the speech pathologist plenty of time to re-assess Jenny's eating and drinking. The school can also make a referral for an OEDCP at any time if they have concerns about her eating and drinking skills.

GLOSSARY

Communication signals – Body, hand or head movements or placement that can be interpreted by a person's communication partners as a message, such as, 'I am full' or 'I don't like that'.

Duty of Care - A duty owned by one to another to take reasonable care not to cause physical, psychiatric or economic loss or harm

Occupational Health, Safety and Welfare – Activities, processes and legislation that aims to protect workers from injury or illness associated with exposure to hazards encountered in the workplace.

Positioning - Changing the posture of a person to improve their function and health and to prevent deformities.