

Guidelines for Assisting a Pupil with their Eating

These guidelines are intended to ensure a safe and pleasant eating experience for the pupils.

Each pupil is unique and therefore it is important that their individual needs and preferences are taken into account when planning for their eating profile.

Training will be provided by the Speech and Language Therapy Service which will raise the profile of specific Health and Safety issues related to assisted eating.

Eating profiles should be planned following consultation with a range of professionals and parents. These may include teachers, speech and language therapists, occupational therapists, dieticians, school nurses.

- Staff will ensure that the highest standards of health and safety are maintained.
- Staff must ensure that their hands are washed prior to assisting a pupil with their meal.
- Water free hand wash and white paper rolls are provided in the dining hall.
- Pupils are provided with an apron to protect their clothes if this is necessary.
- Staff will wear an apron if assisting a pupil with their eating.
- Staff must familiarise themselves with a pupil's eating profile prior to assisting them with their meal.
- Correct equipment must be used as outlined in individual eating profile.
- Pupils' will be provided with opportunities to develop independence skills related to eating and drinking.
- They will be offered choice related to food.
- Social and communication skills will be promoted at mealtimes.
- Staff must ensure that eating programmes are followed, that the pupil being assisted is comfortable and correctly positioned ready to eat their meal.

The pupil's position:

- A pupil should be supported in an upright symmetrical position with their head and body inline.

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- They should be sat well back in their chair with their knees at 90 degrees to their hips.
- The pupil's feet should be flat on the floor or on their footplates at 90 degrees to their knees.
- A tray or table should ideally be available for the pupil to rest their hands and arm on.
- Their head should be upright and central.
- The back of the pupil's neck should be lengthened with a slight chin tuck.
- The pupil should be able to see their assistant and their food and drink.

The assistant's position:

- The assistant must be sat at the pupil's eye level.
- Usually you would sit straight in front of the pupil or just slightly to one side.
- Standing is NOT appropriate.

Basic Techniques

Pupils with low tone/open mouth

- Encourage the best position that enables good head control
- Offer support to the head/chin if necessary
- Lip and tongue exercises could encourage better movements (see Therapist)
- When using a spoon there is a temptation to scrape food off the pupil's upper teeth. Instead, hold the bowl of the spoon level in the pupil's mouth to encourage them to clear the food using their own movements. These pupils often need more time to initiate movements.

Pupils with high tone

- Aim for as calm an environment as possible
- Provide calming activities prior to eating
- Seek advice on any sensory issues
- Discuss positioning with pupil's physiotherapist or OT
- Provide support to achieve good positioning using rolled towels, etc.

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Pupils with a bite reflex

- Hard and brittle spoons or cup spouts can contribute to a bite reflex. Use softer spoons/spouts
- Don't try to pull the spoon out of the mouth!!
- Speak calmly and reassure the pupil
- Reduce environmental stimuli
- To break the pattern, either: wait for the pupil to relax or push the chin upwards slightly to release the spoon.
- Offering food slightly off midline may help

Pupils with a tongue thrust

- Ensure that the pupil's breathing is not compromised. They may use this to aid their airway
- Encourage good positioning: tongue thrust usually goes with extensor patterns
- The shape and size of the spoon is important, Use the bowl of a larger, flatter teaspoon to gently guide the tongue back into the mouth as you help the pupil to eat
- Pupils' with abnormal sensory patterns often have a tongue thrust. Seek advice on sensory issues

Aspiration

- This is the term used when food or drink enters the lungs
- Persistent aspiration can be very dangerous and result in chest infections, pneumonia and even death
- Pupils who have a weak cough reflex are prone to aspiration
- Aspiration can happen during a meal, drink or due to a build-up of residue in the mouth
- Texture of food can be highly related to aspiration

Signs of aspiration

- Coughing/choking
- Eyes watering
- Change in colour
- Getting very hot
- Distress
- Refusal to eat

Stop immediately if you feel the pupil is aspirating.

- **Seek support from a first aider.**

- **Give time to recover.**
- **If pupil does not recover following a choking episode then alert nurses immediately.**
- **Inform Speech and Language Therapists.**

COVID Addendum

During the COVID pandemic all children have an IICRA – Individual Infection Control Risk Assessment – which details the Personal Protective Equipment – PPE - required to keep the child and staff safe. This will relate to assisting a child with eating procedures in children who require support with this due to the bodily fluids and risks associated.