



## People at Risk of Choking

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<b>To be issued to: (check as needed)</b>			
<input type="checkbox"/> Board of Management <input type="checkbox"/> All Staff <input type="checkbox"/> ET/SLT <input type="checkbox"/> Head Office Managers <input type="checkbox"/> Head Office Staff <input type="checkbox"/> Finance <input type="checkbox"/> Housing <input type="checkbox"/> Asset <input type="checkbox"/> ICT		<input checked="" type="checkbox"/> OD <input checked="" type="checkbox"/> Compliance <input checked="" type="checkbox"/> All Care & Support <input type="checkbox"/> C&S Managers (RM, OM, CSM) <input type="checkbox"/> C&S Staff <input type="checkbox"/> Contractors <input type="checkbox"/> Agency Staff <input type="checkbox"/> Unite the Union <input type="checkbox"/> Employee Voices Group <input type="checkbox"/> Other: _____	
<b>Method of Delivery: (check as needed)</b>			
<input checked="" type="checkbox"/> Learn Pro <input type="checkbox"/> Board Portal <input checked="" type="checkbox"/> Line Manager to Share (e.g. Agencies)		<input type="checkbox"/> Policy Owner to Notify (e.g. Contractors) <input type="checkbox"/> Other: _____	
<b>Stakeholder Consultation Completed (check as needed)</b>			
<input type="checkbox"/> Board of Management <input type="checkbox"/> All Staff <input type="checkbox"/> ET/SLT <input type="checkbox"/> Head Office Managers <input type="checkbox"/> Head Office Staff <input type="checkbox"/> Finance <input type="checkbox"/> Housing <input type="checkbox"/> Asset <input type="checkbox"/> ICT		<input type="checkbox"/> OD <input checked="" type="checkbox"/> Compliance <input type="checkbox"/> All Care & Support <input checked="" type="checkbox"/> C&S Managers (RM,OM, CSM) <input type="checkbox"/> C&S Staff <input type="checkbox"/> Contractors <input type="checkbox"/> Agency Staff <input type="checkbox"/> Unite the Union <input type="checkbox"/> Employee Voices Group <input type="checkbox"/> Other: _____	

## Version Control

Date	Owner	Version	Reason for Change
Feb 2022	Brian Gunn/C&S	2	Cyclical Review
Jan 2023	Lesley McDonough	3	Cyclical Review
May 2024	Lesley McDonough	4	Cyclical Review

## Summary of Changes

Section	Change
Contents	Alignment Changed from Operational Management Team to Leadership Team
3.0	Included the dispensing of medication as this can pose a risk of choking  Change from Good Life Planning to Care Planning to reflect name of current procedure
5.0	Included the Health and Social care standards as these are used when assessed by regulatory body the Care Inspectorate
6.0	Changed from Operational Management Team to Leadership Team
7.0	Changed wording to reflect AIMS in relation to named documentation (Good Life Support Plan/R&V)
11.0	Updated to include L&D, H&S in consultation process
12.1	Changed from OMT to LT



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## 1.0 Ark's Values

Ark's values are true to the core purpose of the organisation and the services we deliver. They determine our behaviours towards one another and what we should expect in our relationships with one another. Working within the following values will guide and help us deliver our vision and mission of Ark being an organisation where everyone is equal:

### Trust

We have confidence in our people to deliver excellent services and trust in them to do so. We will develop trusting and honest relationships and our customers will feel assured that they can rely on us to deliver.

### Respect

We treat everyone fairly and we listen. We are respectful of each person with whom we come into contact and expect our people to respond professionally and treat others as they would wish to be treated.

### Understanding

We will operate with empathy and compassion and approach each situation with an open mind. We will question and challenge to ensure we achieve the right outcomes for customers and our people.

### Equality

We believe everyone is equal and expect our people to create positive experiences where everyone feels valued and included.

### Integrity

We will do the right thing and take responsibility for our actions. We will work together to uphold the highest standards of behaviour and practice.

## 2.0 Purpose

This policy and associated procedure explains how Ark will provide safe and effective management for staff to support people who are identified as at risk of choking.

### 3.0 Policy Statement

Ark will provide support with eating and drinking including the dispensing of medication where identified and we will only be involved in this activity as led by appropriate clinical staff, while ensuring that individuals are able to exercise their right to make choices and live independently as far as they are able. This means that providing the minimum amount of staff involvement according to the individual's needs and level of understanding.

Care & Support services will seek to provide the maximum amount of choice and control to the individual, while minimising the risks to the individual, their staff, and the organisation by using robust Care Planning and accurately assessing choking risk. See: **CS02 Care Planning**.

### 4.0 Scope

This policy and associated procedure applies to all Care & Support teams. It includes agency staff, volunteers and students undertaking direct practice with supported people on behalf of Ark.

### 5.0 Legal/Regulatory Framework

The key piece of legislation underpinning this policy is the Health and Safety at Work Act 1974.

The Health and Social Care standards are expectations set out for people using Health, Social Care or Social Work services in Scotland. These standards are:

- 1: I experience high quality care and support that is right for me.
- 2: I am fully involved in all decisions about my care and support.
- 3: I have confidence in the people who support and care for me.
- 4: I have confidence in the organisation providing my care and support.
- 5: I experience a high-quality environment if the organisation provides the premises.

In terms of regulatory expectations, Standard 1.3, of the Scottish Housing Regulator's Regulatory standards of Governance and Financial Management requires each RSL should ensure that it complies with its constitution and its legal obligations, and Requirement 3, have assurances and evidence that it is meeting all its legal obligations associated with

housing and homelessness services, equality and human rights, and tenant and resident safety.

## 6.0 Responsibilities

### 6.1 Board of Management

Ark's Board of Management is responsible for consideration and approval of this policy, and for ensuring that its decisions are taken in accordance with relevant legislation, regulatory expectations, training and guidance.

### 6.2 Executive Team

Ark's Executive Team is responsible for ensuring that this policy is reviewed in accordance with Ark's schedule for review of policies, or sooner if required. The Executive Team is responsible for ensuring that this policy is implemented in Ark.

### 6.3 Leadership Team

Ark's Leadership Team is responsible for review of the policy, and for ensuring that this policy is implemented and followed within each function.

### 6.4 Managers

Ark Managers will be responsible for the effective implementation of this policy within their area of responsibility. They must also ensure that each member of their team, through induction, and team meetings, is made aware of this policy and participates in relevant training, as necessary.

### 6.5 All Staff

All Ark Care & Support staff including agency, relief, students and volunteers are required to familiarise themselves with this policy and comply with its provisions as well as undertake any training required as part of this policy or associated procedures.

All Care & Support staff mentioned above must report immediately any choking incidents to the Care & Support Manager.

## 7.0 People at Risk of Choking

Support with eating and drinking can range from limited involvement where the individual is able to manage their own food and drink consumption and has chosen to do so, to Ark staff supporting individuals with all aspects of food preparation and consumption.

Any risks related to the management of an individual's eating and drinking which have been assessed by relevant Health professionals must be recorded in their Good Life Support Plan/Risk & Vulnerability (R&V) on Ark's Information Management System (AIMS). Any dietary requirements and assessed support requirements must also be documented in individuals' Good Life Support Plan/R&V. Any paper copies must be stored electronically in the supported person's file and a copy held at the individuals home accessible for staff. These are subject to regular review to confirm accuracy with the supported person's current abilities and needs.

All records relating to choking risk will be kept for the duration of the service, and for at least 3 years after the service ends. See: **G17 Retention of Documents**.

## 8.0 Related Policies & Procedures

- HS25a Risk of Choking Procedure
- CS02 Care Planning
- CS06 Reducing Restrictive Practice
- G13 Openness & Confidentiality
- G24 Privacy & Data Protection
- G34 Equality
- G36 Keeping People Safe
- HR15 Whistleblowing
- HS04 Incident Reporting

## 9.0 Equality Impact Assessment (EIA)

An EIA is a tool to assess the impact that a proposed activity will have on the different protected groups. An EIA has been completed in relation to the development of this policy.

## 10.0 Data Protection Impact Assessment (DPIA)

Data protection implications have been identified in relation to the development of this policy, and consequently a DPIA been completed.

## 11.0 Stakeholder Consultation

In developing this policy the following groups were consulted:

- Ark Board of Management;
- Ark Executive Team;
- Ark Leadership Team;
- Ark Policy Review Group;
- Ark L&D Department;
- Ark Health & Safety Adviser;
- Ark Care and Support Managers;
- Ark Operations Managers;
- Ark Staff.

## 12.0 Monitoring and Review

### 12.1 Monitoring

Ark's Executive and Leadership Teams will monitor implementation of this policy on an ongoing basis, particularly in relation to ensuring that all persons affected by the policy and the procedure which supports it comply with its terms.

### 12.2 Review

This policy will be reviewed annually from the date of approval by our Board of Management, in accordance with Ark's policy review framework.