

PENINSULA COLLEGE MEALTIME POLICY



Help for non-English speakers

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Introduction:

This policy provides structure and guidance to ensure safety around students with additional needs during mealtimes. The guideline has been prepared for Peninsula College by the school Speech Pathology team in collaboration with other relevant disciplines including Occupational Therapy, Physiotherapy and school nurses. This policy is aimed at ensuring safety for students with eating and drinking difficulties as well as a pathway forward for students who require varying levels of support during mealtimes to develop functional skills to enhance mealtime independence where possible.

Purpose:

This guideline reflects what is currently regarded as a safe and appropriate approach to support students with feeding difficulties at Peninsula College. There may be some factors which cannot be covered by a single set of guidelines. Further, this policy may be used to guide a pathway to support students to develop skills to enhance mealtime independence where possible. This document should be used as a guide to support students but does not replace the need for application of varied Tier 3 support for students with unique or individual presentations.

Feeding difficulties are prevalent in children with developmental delays or chronic illness, estimating 80-90% of this cohort having varying degrees of feeding difficulties (Royal Children's Hospital, 2025). Common types of presentations include but are not limited to access factors, oro-motor challenges, environmental factors, behavioural factors and/or dysphagia.

Examples of types of presentations of Paediatric Feeding Disorders/Difficulties:

Access factors	• May require assistance in meal preparation and/or set up e.g., opening packaging, using the microwave, food cut up to appropriate and manageable size, support to use utensils • Bringing hands to mouth for self feeding
Oro-motor challenges	• Retained feeding reflexes e.g., tongue thrust • Limited range of tongue movements

	• Limited range of jaw movements • Poor lip closure • Hypersensitive gag reflex
Structural challenges	• Post facial surgery • Structural abnormalities e.g., malocclusions
Environmental factors	• Positioning • Seating / Belt -Harness system • Access to communication during mealtimes • Sensory responses e.g., noise of mealtimes
Behavioural factors	• Sensory responses e.g., taste and texture • Sensory food aversions
	• Presence of food in mouth e.g., pockets food in cheeks, overstuffing mouth
Dysphagia	• Complex mealtime needs • High risk of aspiration and/or choking • Full assistance and supervision by trained staff • Mealtime plan provided by external speech pathologist or medical professional • Training provided by external speech pathologist responsible for writing mealtime plan • Specialised equipment provided by families where necessary
Nil oral	• PEG • Enteral feeding plan provided by medical professionals • Full assistance and/or supervision by trained staff or school nurses

Peninsula College follows an indirect intervention approach for paediatric feeding difficulties and dysphagia.

Indirect support may include but is not limited to staff training, bolus modification, specialised equipment and environmental supports and/or adjustments (West, 2024).

Where appropriate or necessary, the Allied Health or nursing team at Peninsula College may refer on to relevant medical or allied health professionals for direct interventions or adjustments including:

- Swallowing assessment
- Direct dysphagia interventions
- Oral motor interventions
- Sensory-based interventions
- Systematic desensitization
- Behavioural interventions

Due to the high and varied prevalence of paediatric feeding challenges and difficulties associated with paediatric disability, a tiered approach is followed at Peninsula College.

Tier 1: All students

At Peninsula College, all students have access to the following supports and/or adjustments to ensure feeding freedom, skill development and participation during mealtimes at school:

- Support to access food e.g., support taking lunchbox from bag
- Support preparing food e.g., cutting up fruit, microwaving meals or using toasters
- Access to communication supports where necessary e.g., Aided Language Displays and chatboards

Tier 3: Mealtime Plans

Students who require Tier 3 support are students who are at increased risk of aspiration and/or choking due to dysphagia. Students with dysphagia must be supported in the following ways to ensure safety while eating and drinking at school:

- Liaise with external speech pathologist/ medical professionals
- External speech pathologist must provide training to staff to ensure safe mealtime practises at school
- Mealtime plans are provided by external Speech Pathologist or relevant medical professionals
- Mealtime plans should be updated every 12 months by relevant professional, relevant training provided to accommodate any changes
- 1:1 mealtime supervision and support provided to student by trained staff
- Any diet modification instructions are carefully followed. Thickeners are not to be administered at school by Teachers or Education Support staff unless given permission by Speech Pathologist.
- Any changes to student's mealtime plans must be communicated immediately to Peninsula College

- Mealtime plans must be displayed in the classroom where they can be viewed by all staff
- Choking First Aid must be displayed in the classroom where they can be viewed by all staff
- Students who have mealtime plans must also have a Student Health Support Plan (DET Policy and Advisory Library, 2025).
- Students with oro-motor challenges e.g., tongue thrusting may require supervision to ensure safety while eating and drinking. This may look like encouraging students to chew their foods and clear bolus by offering water

Tier 3: Mealtime Independence Routine

The Allied Health team may collaborate to support students who require additional support

e.g., supervision, environmental adjustments during eating and drinking. Support is provided to promote students' safety, dignity, participation, and opportunities to develop greater independence with mealtime skills.

Support may be informed by a Responsive Feeding Therapy approach, which recognises each students' individual needs, preferences, abilities, and developmental stage.

Supports may include:

- Students with structural differences or altered muscle tone: Students with conditions such as hypotonia may experience increased drooling or difficulty managing oral secretions. Where required, students will be offered appropriate protective clothing, such as bibs or smocks, and supported to maintain personal hygiene, comfort, and dignity.
- Adaptive equipment: Students who require specialised or adapted equipment, such as modified cutlery, cups, plates, or other mealtime aids, may be supported to use these safely and effectively.
- Students with ARFID (Avoidant/Restrictive Food Intake Disorder): Where clinically appropriate, students may have an individualised list of preferred or accepted foods to support participation in mealtimes and ensure their nutritional and sensory needs are considered.
- Individual supervision and support: Some students may require 1:1 supervision or assistance during eating and drinking to promote safety, participation, and independence.
- Mealtime routines and strategies: Allied Health staff may provide advice and recommendations regarding mealtime routines, positioning, equipment, environmental adjustments, and strategies to support positive and successful mealtimes.

Staff, caregiver(s) and external therapist roles and responsibilities:

Peninsula College Principal Team	• Ensure mealtime policy is circulated and available to school community • Ensure staff and caregiver(s) understand their roles and responsibilities • Ensure and advocate that students requiring Tier 3 support receive 1:1 support where necessary
Department Leaders	• Responsible for organising roster for students requiring Tier 3 1:1 support. • Ensure mealtime policy is circulated and available within their department.
Speech Pathology	• Liaise with external speech pathologists to organise mealtime training where relevant • Ensure mealtime plans are up to date (12 months) by following up with external Speech Pathologists • Indirect interventions/ adjustments • Support students to eat and drink during mealtimes where necessary • Referral where necessary
Occupational Therapy	• Sensory assessment and recommendations of adjustments to the environment including provision of sensory tools • Sensory assessment of foods to avoid/include • Assessment and provision of adaptive cutlery/daily living aids • Provision of documented routines detailing the role of the support person and the specific level of participation by the student to ensure consistent capacity building/independence • Work in collaboration with caregivers/ nursing team to complete Student Health Support Plan
Physiotherapy	• Seating assessment for students with additional mobility requirements. • Document seating and positional guidelines for students as required. • Work in collaboration with caregivers/ nursing team to complete Student Health Support Plan
Nursing team	• Provide staff with student specific PEG training as required • Ongoing assessment of staff competence with PEG feeding

	• Give guidance to staff regarding health related concerns specifically any student that may have choking concerns,safety of consuming oral liquids • Student Health Support Plan
Classroom teacher	• Responsible for communicating with Allied Health team • Responsible for ensuring up to date mealtime plans are displayed in the classroom where they can be viewed by all staff • Responsible for ensuring Choking First Aid is displayed in the
	classroom where they can be viewed by all staff • Support students at a Tier 1 level • Ensure mealtime plans are read, understood and followed by classroom staff. • Provide support to students with Mealtime Plans requiring Tier 3 support following training from Allied Health team. • Follow Allied Health team advice RE Mealtime Support Routines • In an emergency call nurses on 115
Education support	• Support students at a Tier 1 level • Ensure mealtime plans are read, understood and followed as written. • Provide support to students with Mealtime Plans requiring Tier 3 support following training from Allied Health team. • Follow Allied Health team advice RE Mealtime Support Routines • In an emergency call nurses on 115
Parents/ caregivers	• Advise Peninsula College of students who are at risk of choking or who have a mealtime plan upon enrolment • Contact and advise Peninsula College should any mealtime concerns or changes arise • Provide mealtime plan if relevant and ensure these are up to date each 12 months • Ensure external Allied Health professionals involved in creating and implementing mealtime plans are contactable by school • Provide specialised equipment

	• Provide thickeners and clear bolus modification instructions where necessary
External therapists and broader care team	• Liaise with Peninsula College Wellbeing team where necessary • Provide mealtime plans • Provide training to ensure mealtime plans are followed and understood. • Provide list of 'Preferred Foods' for students with ARFID (where necessary).

Policy review and approval:

Last reviewed	August 2026
Approved by	Principal Trevor Hodsdon <i>Trevor Hodsdon</i>
Next review	August 2028

Definitions:

Dysphagia	Dysphagia is the name used to describe problems with chewing and swallowing. Signs of swallowing difficulties include: • Difficulty chewing solid food • Food or drinks spilling from the mouth • Food or drinks coming out the nose • Food or drinks getting stuck in the throat, drooling or dribbling • Coughing or choking on food and drink • Wet or 'gurgly' sounding voice after eating or drinking • Regular unexplained chest infections
Responsive Feeding Therapy (RFT)	Through a student centered approach, acknowledges not all students have the same end point and that mealtime independence looks different for everyone.
Pediatric Feeding Disorder (PFD)	Any difficulty a child may have with oral intake

Avoidant/restrictive food intake disorder (ARFID)	AFRID is a multifaceted eating disorder and neurodivergence. AFRID is characterised by severe food avoidance or restriction. It can originate from sensory processing differences (low threshold to taste/smell input, reduced interoceptive awareness) and anxiety or fear around food and/or eating (e.g. choking).
Oro-motor	Muscles and movements associated with the mouth and face related to eating, drinking or speaking.
Aspiration	Inhalation of foreign material like food, liquid or other substances into the airway or lungs e.g., 'went down the wrong pipe'
Bolus	A soft mass of chewed food
Indirect interventions/adjustments	• Caregiver training • Bolus modification • Specialised equipment • Environmental supports and adjustments (West, 2024)
Direct interventions/adjustments	• Swallowing assessment • Direct dysphagia interventions • Oral motor interventions • Sensory-based interventions • Systematic desensitization • Behavioural interventions (West, 2024)
Bolus modification	The alteration of food or liquid characteristics to make it safe and easier to swallow (temperature, consistency, volume, size), particularly for people with dysphagia.
IDDSI Levels	The International Dysphagia Diet Standardisation Initiative (IDDSI)
	framework uses a system of eight levels (0-7) to categorise food textures and drink thickness for individuals with dysphagia (IDDSI, 2025).
Specialised equipment	Refers to tools that are designed for specific or unique tasks. They can be custom made or modified.
Adaptive equipment	Devices or tools designed to help individuals with disabilities or limitations perform daily tasks more easily and independently
Environmental supports and adjustments	• Consideration of the eating environment to ensure that a student can be as regulated as possible • Seating adjustments
Malocclusions	Imperfect positioning of the teeth when the jaws are closed.

References:

Babble and Munch. (2025). Circles to Feeding.

Eating and drinking supervision: Policy. (n.d.). Department of Education, Victoria |

VIC.GOV.AU | Policy and Advisory Library.

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Feeding development and difficulties : Feeding difficulties. (n.d.). The Royal

Children's Hospital : The Royal Children's Hospital.

<https://www.rch.org.au/feedingdifficulties/difficulties/>

West, K. M. (2024). Treating pediatric feeding disorders and dysphagia: Evidence-

based interventions for school-based clinicians. Language, Speech,

and Hearing Services in Schools, 55(2), 444-457.

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Audit trail

Details

FILE NAME Mealtime policy.docx - 05/10/2026, 11:21

STATUS  Signed

STATUS TIMESTAMP 2026/10/05
03:07:37 UTC

Activity



SENT

alexandra.nemaric@education.vic.gov.au **sent** a signature request to:
• Trevor Hodsdon (trevor.hodsdon@education.vic.gov.au)

2026/10/05
00:22:26 UTC



SIGNED

Signed by Trevor Hodsdon (trevor.hodsdon@education.vic.gov.au)

2026/10/05
03:07:37 UTC



COMPLETED

This document has been signed by all signers and is **complete**

2026/10/05
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