



University of Nottingham & Sheffield Hallam University

Placement A Workbook Pilot for 2018-19

Student Dietitian (Name):	
Practice Educator (Name):	
Date of Placement:	

Academic Year 2018-2019

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Overview of Placement A

On Placement A you will have an opportunity to observe dietitians and other health and social care professionals applying knowledge and using practice skills in their everyday work with service users. You will also have an opportunity to start to apply your developing knowledge, skills and professional practice, with service users with guidance from your practice educator.

In preparation for Placement A you will have studied nutrition, food composition and started to develop basic food and practice skills. You will have an opportunity to build on this learning in Placement A by observing dietitians and others using these skills in practice and by starting to apply your knowledge and skills with service users, with guidance from your practice educator. You will continue to build on this learning throughout the course and subsequent practice learning opportunities.

Placement A is the first placement that takes place in a Health and Social Care setting or other organisation where dietitians work. This placement environment will provide you with an opportunity to observe dietitians in practice and be introduced to the broader setting where your placement takes place. You will have the opportunity to develop your communication skills, apply nutritional knowledge and food skills by interacting with dietitians, service users/carers and other health and social care professionals. There will also be opportunities for you to observe professional behaviours, values and attitudes and begin to develop these in your practice. These attributes are essential requirements for all healthcare professionals, including student dietitians and as such inform professional practice.

Sheffield Hallam University Students	Three week placement (Part-time, 3 days/week Tues-Thurs with a follow up Event in the University. Takes place early on in the first year (Mar-Apr)
University of Nottingham Students	Two week placement (10 days) which takes place at the end of your first year (June or September)

The Placement A Experience Delivery model for your University is detailed below:-

Throughout the placement you will be exposed to a range of learning experiences in your programme to help you achieve the learning outcomes for placement and to support your professional development. Completing these tasks in the workbook will enable you to provide evidence that you have achieved the learning outcomes for placement. Each task is formulated to provide an introduction to the subject area, an outline as to how the task will support your learning and a series of activities or prompts to help you get the most from the experience. Please use the space provided within the workbook to make some notes as you go along and to record your completed work. You may also find it useful to insert additional pages or learning tools as required.

Though observation, reflection and discussion of your learning, your practice educator will provide constructive feedback throughout the placement to help inform and progress your knowledge and practice skills. This usually takes the form of a weekly review to discuss and consolidate your experiences and agree action points for the following week recorded on the weekly review form. To get the most out of this session you should bring your completed tasks in your workbook together with any reflective pieces you would like to share to each review session.

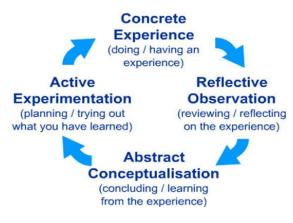
Learning on Placement

Throughout the placement we expect you to:-

- Take ownership of your learning and actions for improvement
- Strive to develop and improve your practice
- Try out new skills and learning in the practice setting with guidance from your practice educator
- Assist colleagues as appropriate in-service delivery

Placement A encompasses experiential learning. This will involve structured observation and opportunities to participate in a range of tasks to enable you to start to apply knowledge and to develop practice skills and professional behaviours. This style of learning is informed by Kolb's learning cycle (see figure) and is based on having a learning experience, reflecting on it, trying to make sense of the experience (often referring to feedback or what others have said on the subject) and planning how you are going to progress your learning or actions next time (Kolb, 1971).

Figure 1 Kolb's Learning Cycle (1971) taken from Kolb (1971) Experiential learning, New Jersey: Prentice Hall.



Structured observation involves using your communication skills (e.g. non-verbal communication skills, active listening etc.) guided prompts and written notes to inform detailed feedback and discussions of practice experiences and tasks with your practice educator. The workbook tasks are all experiential with the aim to help you explore a topic, building knowledge and developing your skills and professional practice in the placement setting. This may involve observation, talking to service users/carers, dietary assessment and analysis, observation/discussion with other health and social care professionals, applying guidelines and policies, reflection and reporting back on your learning.

An important part of the learning experience is to engage in reflective practice. We recognise that people learn in different ways however you are required to keep reflective pieces as learning tools to help you get the most from the placement and to support your professional development. You will have been introduced to reflective practice at University and be developing an approach that suits you. Reflective practice is embedded in the tasks which help to guide your development in this area. Try to reflect as you go along or shortly after an important learning experience. You are not expected to reflect on everything instead prioritise and select the most significant learning experiences for you. Remember, the most important aspect of reflection is the learning that comes from it e.g. What can you conclude from the experience and what are your action points to inform the next steps of your practice?

Placement Expectations

Practice learning is a tripartite partnership between the University, NHS Trust/other provider and yourself as a student dietitian, who have all invested resources in your learning and professional development. To achieve the placement learning outcomes all parties must operate within the requirements and guidance of the NHS Trust/other provider and the Placement Team at the University.

The learning contract below is designed to make clear the commitment from yourself and the University in partnership with the NHS Trust/Other provider participating in Placement A where there is equal responsibility for your development. Please read the learning contract below then sign and date the document. This will also be signed by the Practice Educator leading your placement.

As a student I agree:

- To demonstrate a commitment and appropriate behaviours during the placement in accordance with the Guidance for Students on conduct and Ethics (HCPC, 2016)
- To respect all people that I come into contact with throughout the placement e.g. practice educators, service users/carers, other health and social care professionals and university.
- To work within the confidentiality guidelines provided by the organisation and underpinned by the Guidance for Students on Conduct and Ethics (HCPC, 2016)
- To fully engage in the placement contributing through observations, discussions, selfdirected working and other activities.
- To support the dynamics of placement by ensuring attendance at all sessions and tutorials. The Practice Educator must agree changes for individual students. You may not be able to complete placement A, if you miss essential content
- To be punctual at all times and not to book unessential appointments when the programme is running. Let your Practice Educator know if you have problems with attendance or are going to be late as a professional courtesy.
- To turn off mobile devices in clinical areas as advised. Please use messaging services or voicemail during sessions to avoid unnecessary interruptions.
- Complete all work (e.g. reading activity, reflection on practice observation) by agreed timescales and/or notify Practice Educators of concerns in advance of deadlines.

At Sheffield Hallam University and University of Nottingham in partnership with the NHS Trust/other provider we agree to:-

- Provide you with the necessary tools and learning experiences to complete the placement.
- Facilitate the placement in a professional manner.
- Support you fully through Practice Educators and University Team.
- Respect and value each student.
- Offer learner support as appropriate.

This Learning Contract is a statement of intent for the duration of the Placement provided by Sheffield Hallam University/University of Nottingham in partnership with the NHS/other provider.

Student Signature	Print Name
University Tutor signature	Print Name
Practice Educator signature	Print Name

Pre-Placement Requirements

As part of your preparation for Placement A, you will have completed the following components at university, ensuring fitness for Placement: -

Health, Safety and Welfare

- Statutory and Mandatory training clearance
- Have University Occupational health 'Fit for Placement' clearance
- Enhanced Disclosures & Barring Service clearance
- Have a current food safety and hygiene certificate (level 2 course)

Knowledge, Skills and Professional Practice

- Be aware of the HCPC Standards of Conduct, Performance and Ethics (HCPC, 2016) and Guidance on Conduct and Ethics for Students (HCPC, 2016)
- Be aware of the structure of NHS Health and Social Care Organisations and the role of the dietitian as a registered practitioner and other professionals in delivering care.
- Can demonstrate a basic knowledge of eating habits and foods available to the public and the factors affecting these.
- Can demonstrate a basic knowledge of food portion sizes, the macro and micronutrient content of food and dietary intakes.
- Demonstrate basic skills in dietary analysis, food tables and dietary analysis software programmes) and can compare results with accepted targets for macronutrient content of dietary intakes.
- Have knowledge of basic cooking skills and menu planning
- Start to use reflection and self-evaluation tools to support and demonstrate professional development
- Be aware of a person-centred approach and be able to demonstrate basic meet and greet communication skills.
- Be interested in food and health and the work of Dietitians

You will be asked to self-evaluate your strengths and areas for improvement in knowledge, skills and professional practice (see above) and relating these to the Placement A learning outcomes. This informs your personal statement which is shared with your practice educator prior to placement.

Placement A Aims and Learning Outcomes

Aim:

To enable you to appreciate the roles and responsibilities of registered dietitians within the health and social care setting and to *start to develop* your knowledge, skills and professional practice through observation and participation in learning activities.

Learning outcomes:

You will be able to: -

• LO1 Applied knowledge:

Observe and experience professional practice of dietetics in health and care/other settings progressing knowledge required to support development of evidence based practice on placement.

LO2 Assessment:

Observe and experience the identification and use of appropriate methods to assess nutritional needs of selected service users (e.g. individuals, groups and populations) to systematically gather information to inform a comprehensive assessment in accordance with the care process (BDA, 2016)

• LO3 Communication with individuals:

Observe and experience effective communication skills and approaches with service users (e.g. individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting.

LO4 Reflection and Review:

Observe and experience effective reflection and review of practice and how this contributes to professional development, service delivery and outcomes for service users.

LO5 Professionalism:

Observe and experience professional behaviour enacted in practice in accordance with HCPC standards (Standards of Conduct, Performance and Ethics, (2016), Standards of Proficiency (2013) and local organisational policies and demonstrates the professionalism expected for student dietitians (Guidance for students on Conduct and Ethics, HCPC, 2016)

• LO6 Team working:

Observe and experience effective team working and starts to develop appropriate relationships with colleagues to facilitate collaborative working.

Assessment Guidance

Throughout the placement you will be expected to engage in a range of learning activities to help you develop your practice skills and behaviours. The placement is summatively assessed. You should participate in the learning activities outlined in your programme and evidence your learning by completing the Tasks in your workbook.

Personal Statement (RAFA)

Prior to placement you will write a personal statement to confirm that you have met the preplacement requirements and to self-assess your strengths, areas for improvement and action points in relation to each of the placement learning outcomes. This information is shared with your practice educator so they are aware of your progress and development needs. At the end of the placement as part of the final review the form is revisited and your learning captured in each of the outcome areas together with areas for improvement and action points on your return to university. This completed form is shared with the Placement Co-ordinator for your course so they are aware of your progress and development needs.

Learning Outcomes Framework (LOF)

The learning outcomes framework tool outlines the steps or milestones to achieve on the way towards demonstrating the learning outcome. Each milestone is mapped to the Tasks in your Placement A workbook so it is clear to see how the Tasks provide evidence for the learning outcome. As you complete the workbook Tasks effectively you may add them as evidence to the LOF form for your practice educator to review and sign-off. This will take place periodically throughout the placement as well as in the final review meeting.

The Placement A workbook

You are required to complete the Tasks in your workbook. Your supervisor will guide you through the Tasks and make it clear on your programme where you will have an opportunity to complete these. You should complete the workbook tasks either during or shortly after the activities using the space provided for notes. You may wish to insert additional pages or examples of work products as required. You practice educator will review progress in the weekly feedforward meetings. All Tasks should be completed by the end of the Placement.

Professionalism Tool

This should be completed throughout the placement drawing on feedback from practice educators and others working with you. This form is formative i.e. for learning and enables you to capture 360 degree feedback on your professional behaviours throughout the Placement whilst identifying actions to inform your future practice.

Reflective Pieces

Opportunities for reflection are embedded in the workbook Tasks. Whilst it is recognised you may be reflecting on other learning experiences it is recommended that this learning (as appropriate) feeds into reflective discussion in the weekly feed forward session.

Weekly Review Session

Throughout your placement and at the end of each week there will be a meeting for reflection and review where you will have the opportunity to discuss and consolidate your week's experience with your practice educator and agree action points for the following week. Please bring your completed workbook tasks to this session, together with your professionalism tool, and learning outcomes framework tool so your progress can be captured on an ongoing basis.

Progression

Students must normally complete all weeks of Placement A. For Sheffield Hallam University this is 3 weeks and for University of Nottingham this is 2 weeks. Attendance is monitored throughout placement in line with each Universities procedures.

Review and Assessment Form A (RAFA)

Pre-Placement A

Name of Student	
Signature of Student	
Name of Tutor	
Signature of Tutor	
Name of University and Course	
Date	
Placement A Venue	
Health / Learning Needs	Yes / No
Mandatory Training Completed	Date:
Car owner and driver (insured for business use)	Date:

Additional Information

Please provide any additional details you feel may be appropriate for the Practice Educator facilitating your placement e.g. previous work experience, interests within dietetics and socially (please summarise in the space below)

This review should be undertaken by the tutor with the student before commencing Placement A. Please use the attached form to summarise your findings, considering the

following: Is there evidence to demonstrate that all the pre-Placement A requirements have been addressed? If not, please identify the omissions below:

Areas Not Addressed:-

Prior to placement, the student in partnership with their Tutor should identify any strengths or areas for improvement and action points against each of the Learning Outcomes below.

At the end of the placement the student in partnership with their Practice Educator should identify any strengths, areas for improvement and action points against each of the learning outcomes below.

Learning Outcomes

Learning Outcome 1- "Applied Knowledge: Observes and experiences professional practice
of dietetics in health and care/other settings progressing knowledge required to support
development of evidence based practice on placement.

Pre-placement Review:-

Strengths:

Areas for improvement:

Action points for Placement A:-

End of Placement Review:-

Strengths:

Areas for improvement:

Action points for University and the next placement (B/B1):-

Not Met

Pre-placement Review:- Strengths: Areas for improvement: Action points for Placement A:- End of Placement Review:- Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths: Areas for improvement:
Areas for improvement: Action points for Placement A:- End of Placement Review:- Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Action points for Placement A:- End of Placement Review:- Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
End of Placement Review:- Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Strengths: Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Areas for improvement: Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Action points for University and the next placement (B/B1):- Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Met Not met Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
Learning outcome 3- "Communication with individuals: Observes and experiences effective communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
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communication skills and approaches with service users (e.g. Individuals, groups and populations), other professionals and support staff and starts to apply these in the placement setting. Pre-placement Review:- Strengths:
setting. Pre-placement Review:- Strengths:
Pre-placement Review:- Strengths:
Strengths:
Areas for improvement:
Areas for improvement
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Action points for Placement A:-
End of Placement Review:-
Strengths:
Strengths:
Strengths: Areas for improvement:

Met	Not Met
Learning outcome 4- " Reflection and Review : Observes and experiences effective reflection and review of practice and how this contributes to professional development, service delivery and outcomes for service users.	
Pre-placement Review:-	
Strengths:	
Areas for improvement:	
Action points for Placement A:-	
End of Placement Review:-	
Strengths:	
Areas for improvement:	
Action points for University and the next placement (B/B1):-	
Met	Not Met
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie	Not Met Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and ed for student dietitians (Guidance for students on
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and
Learning outcome 5- "Professionalism : enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected conduct and ethics, HCPC, 2016).	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected conduct and ethics, HCPC, 2016). Pre-placement Review:-	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected conduct and ethics, HCPC, 2016). Pre-placement Review:- Strengths:	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected conduct and ethics, HCPC, 2016). Pre-placement Review:- Strengths: Areas for improvement:	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and
Learning outcome 5- "Professionalism: enacted in practice in accordance with HC and Ethics (2016), Standards of Proficie demonstrates the professionalism expected conduct and ethics, HCPC, 2016). Pre-placement Review:- Strengths: Areas for improvement: Action points for Placement A:-	Observes and experiences professional behaviour PC standards (Standards of Conduct, Performance ency, 2013) and local organisational policies and

Action points for University and Placement B1:-

Met Learning outcome 6- Team Working: Observes and e starts to develop appropriate relationships with colleagu Pre-placement Review:- Strengths:	
starts to develop appropriate relationships with colleagu Pre-placement Review:-	
Strengths:	
Areas for improvement:	
Action points for Placement A:-	
End of Placement Review:-	
Strengths:	
Areas for improvement:	
Action points for University and the next placement (B/E	31):-
Met	Not Met
Please use this space to note any other feedback on stu	udent performance
on final completion of the Placement: This form has been	an an include a state of the state of the state

Signature of Student	Date	
Signature of Practice Educator	Date	

Please return the completed form by email to: University Placement Administrator

Weekly Feed Forward Form- End of Week 1

You are now able to undertake your first review with your practice educator. You should start to complete the form before your meeting. Your practice educator will then add into this form and agree the action plan with you for the following week.

During this review your practice educator will discuss your learning experiences over the last week. You should bring the following resources with you to inform your discussion:-

- Your Placement A workbook- with the tasks completed that you have undertaken this week
- Any reflections on your learning you wish to share (this may be in your workbook)
- Your Professionalism Tool
- Your personal statement (RAFA Form)

Have you achieved your aims for this week?

What went well/ your strengths?

What were the challenges?

Professionalism Tool Reviewed and Updated:	Yes	No
Action Plan- What are the agreed areas to work on next week?		
1)		
2)		
3)		
Any other comments:		
Supervisors Signature:	Dat	te
Students Signature:	Dat	te

Weekly Feed Forward Form- End of Week 2

You are now able to undertake your second review with your practice educator. You should start to complete the form before your meeting. Your practice educator will then add into this form and agree the action plan with you for the following week.

During this review your practice educator will discuss your learning experiences over the last week. You should bring the following resources with you to inform your discussion:-

- Your Placement A workbook- with the tasks completed that you have undertaken this week
- Any reflections on your learning you wish to share (this may be in your workbook)
- Your Professionalism Tool
- Your personal statement (RAFA Form)

Have you achieved your aims for this week?

What went well/ your strengths?

What were the challenges?

Professionalism Tool Reviewed and Updated:
Yes
No

Action Plan- What are the agreed areas to work on next week/return to University?
1)

2)
3)

3)
Any other comments:

Supervisors Signature:
Date

Students Signature:
Date

Weekly Feed Forward Form- End of Week 3 (SHU Students only)

You are now able to undertake your Third review with your practice educator. You should start to complete the form before your meeting. Your practice educator will then add into this form and agree the action plan with you for the following week.

During this review your practice educator will discuss your learning experiences over the last week. You should bring the following resources with you to inform your discussion:-

- Your Placement A workbook- with the tasks completed that you have undertaken this week
- Any reflections on your learning you wish to share (this may be in your workbook)
- Your Professionalism Tool
- Your personal statement (RAFA Form)

Have you achieved your aims for this week?

Professionalism Tool Reviewed and Updated:

What went well/ your strengths?

What were the challenges?

Professionalism Tool Reviewed and Updated:	Yes	No
Action Plan- What are the agreed areas to work on next week/return to Ur	niversity?	
1)		
2)		
3)		
Any other comments:		
Supervisors Signature:	Da	ate
	-	- 1 -
Students Signature:	Da	ate

No

Placement A Learning Outcomes and Milestones

The Placement A learning outcomes outline the knowledge, skills and professional practice students are required to demonstrate in each outcome by the end of the Placement and are aligned to the HCPC (2013) Standards of Proficiency for Dietitians. Placement A takes place early on in the course and provides an opportunity to undertake practice observation and practical tasks in the placement setting. The placement used to gain early insight into professional practice into the placement setting and for reflection and formative feedback to support learning and the development of professional practice. Students complete a Placement A workbook to evidence their learning. Within the 'know, can, do framework' placement A is about being able to **KNOW** or gain knowledge through observation and experiential learning on placement.

Students develop their practice in a range of placement settings which may include: acute hospitals, out-patient clinics, primary care and general practice, service user's homes, mental health & learning disability care settings and within private independent & voluntary organisations.

-	milestones demonstrate KNOWLEDGE or that the student KNOWS and erstands. Students participate in learning activities throughout the placement	Guideline week for completion	Workbook evidence (Completed by student)	Date & Sign off (Completed by
evid	encing their learning in the Placement A workbook and through reflective ussion with supervisors and others.	NOTT (SHU)		Practice Educator
1.1	Identifies organisational policies which assure the health & safety of staff and service users, observing how health and social care professionals apply these policies in practice environments in line with HCPC standards.	1 (1)		
1.2	Understands the organisation and structure of health and social care records, information governance requirements and how dietitians use service user information to inform the consultation and document care.	2 (3)		
1. 3	Appreciates the principals involved in food provision from: meal selection/development, how eating and drinking is supported and individual needs are met, service user perspectives and the roles/responsibilities of others who support food services and nutritional needs.	2 (3)		

LO2: Assessment: Observes and experiences the identification and use of appropriate methods to assess nutritional needs of selected service users (e.g. individuals, groups and populations) to systematically gather information to inform a comprehensive assessment in accordance with the care process (BDA, 2016).

unde evid	milestones demonstrate KNOWLEDGE or that the student KNOWS and erstands. Students participate in learning activities throughout the placement encing their learning in the Placement A workbook and through reflective ussion with supervisors and others.	Guideline week for completion NOTT (SHU)	Workbook evidence (Completed by student)	Date & Sign off (Completed by Practice Educator)
2.1	Observe nutritional assessment as part of the service user consultation.	2 (3)		
2.2	Read and interpret medical notes and practise starting to gather relevant information for a dietetic consultation.	2 (3)		
2.3	Practise nutritional analysis skills using service user food intake data, building 'fingertip' knowledge of food portion sizes and the macronutrient content of food and drink.	2 (3)		
2.4	Practise assessing a service user's food and fluid intake, using your communication skills. Start to interpret the information in discussion with the supervisor.	2 (3)		
Lear	ning outcome achieved:			

and plac	milestones demonstrate KNOWLEDGE or that the student KNOWS understands. Students participate in learning activities throughout the ement evidencing their learning in the Placement A workbook and ugh reflective discussion with supervisors and others.	Guideline week for completion NOTT (SHU)	Workbook evidence (Completed by student)	Date & Sign off (Completed by Practice Educator)
3.1	Observes the communication skills used in interactions between dietitians/other professionals and service users and how these contribute to person centred care.	1 (1)		
3.2	Practise communication skills with service users and the dietetic team.	2 (3)		
3.3	Observe and reflect on communication between the MDT and dietitian and what makes this successful or challenging.	2 (3)		

and plac	milestones demonstrate KNOWLEDGE or that the student KNOWS understands. Students participate in learning activities throughout the ement evidencing their learning in the Placement A workbook and ugh reflective discussion with supervisors and others.	Guideline week for completion NOTT (SHU)	Workbook evidence (Completed by student)	Date & Sign off (Completed by Practice Educator)
4.1	Observe how dietitians use reflective practice to enhance their professional development and how this informs the quality of service delivery.	1 (1)		
4.2	Critically reflects on knowledge and practice skills and puts in place action plans to inform professional development sharing this with supervisors.	2 (3)		
4.3	Reflect on the service user experience of health and social care through the use of care pathways and structured observations of the MDT/Other professionals	2 (3)		

	expected for student dietitians (Guidance for Students on Conduct and	· · · · · · · · · · · · · · · · · · ·		
and	milestones demonstrate KNOWLEDGE or that the student KNOWS understands. Students participate in learning activities throughout the ement evidencing their learning in the Placement A workbook and	Guideline week for completion NOTT/SHU	Evidence (Completed by student)	Date & Sign off (Completed by Practice Educator)
	igh reflective discussion with supervisors and others.			
5.1	Know how to report critical incidents and concerns in the placement setting, recognising how these inform future practice.	1 (1)		
5.2	Recognise the importance of obtaining service user consent within the dietetic consultation and maintaining confidentiality	2 (3)		
5.3	Critically evaluate how the dietetic service meets the needs of a diverse population and how equality is achieved.	2 (3)		
5.4	Identify what constitutes dietetic practice by comparing the roles, responsibilities and practice skills of dietitians and how they work with a range of service user groups and therapeutic diets across the health and social care setting.	2 (3)		

and plac	milestones demonstrate KNOWLEDGE or that the student KNOWS understands. Students participate in learning activities throughout the ement evidencing their learning in the Placement A workbook and ugh reflective discussion with supervisors and others.	Guideline week for completion NOTT/SHU	Evidence (Completed by student)	Date & Sign off (Completed by Practice Educator)
6.1	Explore care pathways from the service user's perspective gaining a deeper understanding of living with a long term condition; the duration of care and the health and social care professionals/others involved. Practise your communication skills.	2 (3)		
6.2	Observe health and social care professionals and their roles and responsibilities in delivering care for service users, the importance of professional behaviour and their interactions with the dietitian.	2 (3)		
6.3	Appreciate the interaction between the multi-disciplinary team, health and social care professional and the service user and how this is documented in service user records.	2 (3)		

PROFESSIONALISM TOOL ASSESSMENT CHECKLIST FOR A PLACEMENT- FORMATIVE

Student's Name:

List of skills demonstrating a professional attitude	Signature & date observed	Comments
Appropriate time keeping e.g. adheres to departmental working hours, reliable and punctual in attendance		
Demonstrates a pro-active attitude e.g. makes appropriate offers to help		
Shows understanding that their actions reflect on the team e.g. can identify incident and understand implications of not doing this.		
Demonstrates appropriate reflective skills e.g. during weekly feedback/reflective sessions		
Demonstrates respect for others e.g. shows sensitivity to the needs of other staff for privacy etc., listens without comment at appropriate parts of the interview		
Understands and demonstrates the concept of safe practice and recognises own limitations e.g. incident reporting and health and safety issues		
Takes responsibility for own learning e.g. seeks answers to questions without asking dietitian first.		
Demonstrates an enquiring attitude and then shares knowledge and experience with others		
Can demonstrate practice in a non-discriminatory way e.g. can reflect on care provided to patient or groups to ensure equitable care		

List of skills demonstrating a professional attitude	Signature & date achieved	Comments
Demonstrates appropriate behaviour e.g. has appropriate relationships and rapport with patients and other health care professionals		
Adheres to departmental dress code e.g. presents an appropriate image including hair, jewellery, tattoos, and wearing an ID badge)		
Demonstrates an appropriate level of confidence e.g. shows an awareness of reasons why this is important		
Maintains confidentiality e.g. adheres to data protection including electronic records and observes appropriate patient confidentiality.		
Accepts constructive feedback e.g. accepts and responds appropriately to comments		
Demonstrates an understanding for the need for appropriate and effective time management		

Additional comments:

Mapping of Task's to Learning Outcomes

Learning Outcome				Tasks			
	1 Health, Safety & Welfare	2 Communication	3 Service user pathway, Team working & Integrated Care	4 Catering, Food Provision & Supporting Nutrition	5 Information Governance & Service User Information	6 Dietary Assessment	7 Professionalism
LO1:Applied knowledge	√						
LO2:Assessment:						V	
LO3: Communication with individuals						V	
LO4: Reflection and Review							√
LO5: Professionalism	N						√
LO6: Team Working							√

Task 1: Health, Safety and Welfare

This task provides evidence for LO 1 (1.1) and LO5 (5.1).

Background

Health, safety and welfare are essential components required in preparation for and during all of your practice placements. Everyone involved in the practice placement (including yourself as a student dietitian) have a legal responsibility to minimise the risk of harm both to themselves and others (HCPC, 2016; HSWA, 1974). As a student dietitian you have responsibilities to follow instructions and act sensibly to protect yourself and others from risk and harm (HCPC, 2016).

As a student dietitian on placement, you will be treated as an employee in relation to health, safety and welfare matters. As with all new employees, you are required to undertake statutory and mandatory training (SMT) that is required by law and the practice educator's organisation.

The SMT involves undertaking core health and safety awareness training to ensure you have the knowledge and skills to maintain a healthy and safe working environment for you, colleagues and service users/carers. Statutory training is required by law and may include an awareness of the local health and safety policies, fire safety and when and how to report injuries, diseases and dangerous occurrences. Mandatory training is compulsory training for the safe and efficient delivery of services that has been identified as essential by the practice educator's organisation. Mandatory training may include infection prevention and control, record keeping, information governance and raising concerns.

It is essential that you undertake all the SMT required by your practice educator and the organisation prior to and during your practice placement. If you have any queries relating to the SMT, you should contact the practice educator and/or your placement tutor.

The activities are designed to support your SMT awareness and knowledge as a student dietitian and to enable you to work towards SMT standards as you develop your practice.

Purpose of the workbook learning activities that are linked to Task 1 are for you to be able to:-

- Determine the health, safety and welfare policies and procedures for employees and service users within the organisation and observe these being applied by healthcare professionals in different practice environments.
- Identify and undertake any local SMT that is required by your practice educator.
- Interpret how the organisations health, safety and welfare policies and procedures that are linked to the HCPC standards of conduct, performance and ethics and HCPC standards of proficiency for dietitians.
- Be aware of incident reporting policies/procedures for managing and learning from incidents.
- Reflect upon your learning and any actions that you have identified for your future practice.

Key references

Health and Care Professions Council (2016). Guidance on standards of conduct, performance and ethics. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/</u>

Health and Care Professions Council (2013). Standards of proficiency for dietitians. London. HCPC. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-proficiency/dietitians/</u>

Health and safety at work act (HSWA) (1974). Available from:http://www.legislation.gov.uk/ukpga/1974/37/contents

Management of health and safety at work regulations (1999). Available from: <u>http://www.legislation.gov.uk/uksi/1999/3242/contents/made</u>

Learning Activities

During this Task you will have an opportunity to identify the main health and safety policies operating in your Trust/Organisation and consider how this relates to the everyday practices of Dietitians. Your supervisor will facilitate your access to Trust/Organisation's health and safety policies. Take some time to read through these and record your notes below.

a) Health, Safety and Welfare Policies

Read through the key health and safety policies in the Trust/Other Organisation.

Consider three key policies that relate to the health and safety of service users and/or staff in your practice area. Briefly summarise why the policy is important and how it links to the HCPC Standards on Conduct, Performance and Ethics (HCPC 2016) that underpin dietetic practice. What are the consequences of not following the policy?

Record your notes below

• Policy 1:-

• Policy 2:-

• Policy 3:-

b) Critical Incident Reporting

Read through the critical incident (or equivalent) reporting policy in the Trust/Organisation

A critical incident may be defined as 'practice that may cause harm to a service user'. Find out how critical incidents are reported in the Trust/Other organisation? Discuss with your practice educator possible examples of critical incidents from dietetic practice that could cause harm to a service user? How can these be prevented? How is critical incident reporting used to inform future practice?

• Record your notes below

c) Infection Prevention and Control

Read through the infection control policy for your Trust/Organisation

Within your health and social care setting there will be a number of procedures in place that relate to infection control e.g. hand hygiene, alcohol rub, bare below the elbows policy, food hygiene (food services), barrier nursing, use of aprons and gloves, managing infections from body fluids (e.g. MRSA, Hepatitis, HIV) and staff illness. Discuss with appropriate staff the risks and control of infection in your setting. Describe what is involved in implementing these practices and note from observation if these are routinely followed?

• Record your notes below

d) Working within Health, Safety and Welfare Policies

Maximum 500 words

• Critically reflect on a situation where you have demonstrated your ability to work within Trusts/Organisation health, safety and welfare policies

• What can you conclude from this experience? Detail 1-2 action points to inform future practice.

Task 2- Communication

This task provides evidence for LO3 (3.1, 3.2, and 3.3), LO4 (4.2) and LO6 (6.3)

Background and purpose

Communication is an essential core skill for dietitians and other healthcare professionals (HCP's) in all areas of health and social care, to support others effectively to facilitate behaviour change and to provide and co-ordinate person centred care (HCPC, 2016; Avery et al, 2016; HCPC 2013; Pearson, 2010).

Patients need to be heard and understood, have the opportunity to tell their story, to gain information, feel able to cope and have confidentiality respected (Pearson, 2010). This has led to the use of a behavioural approach throughout the profession based on person centred practice, reflective listening skills, guiding principles and core practitioner qualities. Therefore dietitians need skills in: Demonstrating to service users that they have understood them; addressing and meeting service user's expectations and needs and; working within realistic time boundaries. You will have an opportunity to observe how dietitians use their communication skills to facilitate this style of approach in practice.

Communication can be verbal and non-verbal, taking many different forms. For dietitians supporting and advising service users/carers in one-to-one consultations some of the forms of communication used in everyday practice include:-

- Interpreting written communications in service user notes
- Discussion of a service users current situation with a healthcare professional/carer
- Welcoming the service user, putting them at ease and asking permission to discuss personal information and sharing this with the multi-disciplinary team
- Exploring the service users current situation and using verbal/non-verbal communication skills to encourage the service user to tell their story
- Establishing how foot fits into the service user's lifestyle
- Checking the understanding of the service user's current condition
- Dietitians and service users exchanging further information where appropriate
- Goal setting and establishing a care plan
- Summarising and closing the consultation
- Making further arrangements for review
- Communicating appropriate information with the multi-disciplinary team

Increasingly dietitians work with service users in group settings on a number of commonly facilitated programmes (e.g. cardiac rehabilitation, DESMOND, weight management) and use many of the lists listed above but also employ skills to facilitate learning such as making everyone feel comfortable and valued; encouraging participation and guiding the group.

You will have several opportunities to practice your communication skills with service users and through peer observation both as the 'observer' and the person being 'observed'. This will help to inform the development of your communication skills.

Dietitians communicate with the Multi-disciplinary Team and other health and social care professionals through case reviews and departmental/team meetings. This is co-ordinated, documented and shared amongst the team and with the service user in many ways. Increasingly dietitians use social media, websites, blogs, apps and articles to engage with the general public and others on a wide range of nutrition and dietetic topics and to support behaviour change.

Effective communication by HCPs can support the service users/carers to make informed decisions about their health and care needs, irrespective of their health literacy, culture or language. Dietitians and other HCP's should be aware of the potential communication barriers and responsibilities to adopt appropriate strategies to overcome them to achieve positive outcomes.

This task is designed to provide opportunities to observe different methods of communication that a dietitian and other HCP's use and to practice communicating with others to reflect upon and develop your own effective communication skills.

The purpose of the workbook learning activities that are linked to Task 2 are for you to be able to:-

- Determine and consider the different methods of communications skills that dietitians use in their interactions with service users/carers and other health care professionals to support person centered care.
- Observe how communications skills are adapted to meet an individuals need.
- Start to practice, appraise and develop your communication skills with service users/carers, HCP's and others within the organisation.
- Observe the communication between the MDT and dietitian/s and appraise how they interact.
- Reflect upon your learning and any actions that you have identified for your future practice.

Key references

Avery, A; Whitehead, K; Halliday, V. (2016) How to facilitate lifestyle change: Applying group education in healthcare. Wiley Blackwell. New York.

British Dietetic Association (BDA), (2016). Model and process for nutrition and dietetic practice. BDA, Birmingham. Available from :-

https://www.bda.uk.com/publications/professional/model and process for nutrition and di etetic_practice_

Health and Care Professions Council (2016). Guidance on standards of conduct, performance and ethics. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/</u>

Health and Care Professions Council (2016). Guidance on conduct and ethics for students. London. HCPC. Available from:-<u>https://www.hcpc-</u><u>uk.org/globalassets/resources/guidance/guidance-on-conduct-and-ethics-for-</u>students.pdcommunication skills for dietitians

Health and Care Professions Council (2013). Standards of proficiency for dietitians. London. HCPC. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-proficiency/dietitians/</u>

Pearson, D. (2010). Changing behaviour. In: Payne, A and Barker, H. eds. Advancing dietetics and clinical nutrition. London, Churchill Livingston Elsevier. pp. 17-22.

Learning Activities

During this task you will have the opportunity to observe dietitians communicating with others. Look out for opportunities where dietitians are using their communication skills with a range of service user/carer groups (e.g. older adults, adults, children and young people) and in different health and social care settings within your placement environment (e.g. multi-disciplinary meetings, service user consultations, group settings, informal discussions etc)

a) Communication Skills in Dietetic Practice

Undertake structured observation of the interactions between dietitians and service users/carers and with other members of the health and social care team as appropriate in your placement setting.

• Detail the communication skills you observed?

• Why were the communications you observed necessary? What facilitated communication and/or what made it more challenging?

• How did the dietitians communication skills contribute to service user care?

• Observe a dietitian communicating with a service user where there is a specific communication need (e.g. service user may be deaf or hard of hearing, be unable to speak, require an interpreter, have a learning disability, or become emotional (angry, rude, tearful) during the consultation. How does the dietitian adapt their communication skills to use a person centred approach to meet the needs of the service user in this situation?

• From your observations of practice, compile some prompts to guide you when practising your communication skills with service users. You can try these out in the next activity.

b) Practising your Communication Skills

Working with a peer/practice educator, practice your communication skills with service users. This could be on any topic e.g. their experience of care, food in the care setting etc. Use the points below as a guide to structure your discussion.

- Introduce yourself and make small talk to try to put the service user at ease.
- · Ask permission to talk to the service user
- Encourage the service user to talk about their situation (use verbal/non-verbal skills to help you)
- Thank the service user for taking part.

Use the verified witness statement to inform structured observation of your peer/practice educator's communication skills. Following a joint discussion, reflect on your own performance and feedback using the prompts below.

Service User 1

• What went well:

• Areas for improvement:

• Action points for development

Service User 2

• What went well:

• Areas for improvement:

• Action points for development

Service User 3

- What went well:
- Areas for improvement:

• Action points for development

- c) Multi-disciplinary Communication between the Health and Social Care Team/Organisation(s) and the dietitian
 - Within your Health and Social Care Team/Organisation which professionals does the Dietitian communicate with?

• Observe the dietitian's communication skills with the other Team/Organisation members. What makes the communication successful or challenging? How does the Dietitian adapt their approach to make this an effective interaction?

• How is this multi-disciplinary communication documented and co-ordinated amongst the Team/Organisation and/or with service users?

• How does multi-disciplinary communication contribute to overall patient care?

- d) Reflective Summary. From this Task on communication skills critically reflect on one aspect that has been a key learning point for you. You may wish to consider some of the following points to help you:-.
 - The range of service users/groups and health and social care professionals a dietitian communicates with
 - Communication experiences that have gone well and not so well
 - Challenges you may have had in communication with service users/others

Maximum 500 words.

You may wish to use a reflective model to guide your reflection.

- What happened (briefly)
- What were you thinking and feeling at the time?

• What was good and not so good about the situation? What sense could you make of the situation- perhaps from others perspectives/views as well as your own?

• What can you conclude from this learning experience

 What you have learnt from this experience and action points to feed forward for your professional development and future practice?

Task 3- Service User Pathway and Team working in Integrated Care

This task provides evidence for LO4 (4.3) and LO6 (6.1, 6.2)

Background and purpose

The health, care and support services that are provided to service users should be integrated, person centred, involving them, their family and carers in their care to meet their individual care needs and preferences (Department of Health and Social Care, 2013).

There are many national, local, public and privately funded services that provide different levels and types of health and social care. These often provide services in areas such as care/residential homes, hospitals, GP clinics, health and wellbeing, children centres, schools and service users' homes.

Pathways are the route or direction that a service user will take if they are referred for treatment and/or care by their GP, other HCP or themselves. Pathways can be locally and/or nationally agreed depending upon factors such as health or social care need, demand and resources available. Pathways for service users often start from their first contact with a GP, through a referral, to completion of their treatment/care, including the period the service user may be in hospital or treatment centre, up to when they leave (NICE, 2019). Care pathways may involve many different HCPs working as part of a team e.g. doctors/GPs, nurses, physiotherapists, dietitians, speech and language therapists, pharmacists, radiographers, healthcare assistants, occupational therapists, paramedics and social workers. There will also be a range of services that provide the infrastructure which supports service user care for example catering providers, volunteers, commercial companies, formal and informal carers and family members.

The pathway provides an outline of what is likely to happen on the service user journey and can be used to provide information and resources for service users/carers and others including HCPs. Information about care pathways can be used to inform service user information and for planning services and to improve the quality and effectiveness of care. The service user journey may vary from a number of days to weeks, months or years. The journey may involve a number of health and social care episodes within a variety of services, depending upon their health, care and support needs and the resources available.

The purpose of the workbook learning activities that are linked to Task 3 are for you to be able to:-

- Investigate each stage of the service user pathway and how they are integrated considering the type of health and social care, duration and the role/s of the HCP's and services involved.
- Observe and consider the service user journey and pathway from the service user/carer's perspective.
- Practice, appraise and develop your communication skills with service users/carers, HCP's and others within the organisation.
- Observe and distinguish the role and responsibilities of the HCP's and other services involved in the service user/s pathway.
- Consider the interaction between the HCP's and service user/carer, observing how service user interactions are documented and communicated along the care journey.
- Reflect upon your learning and any actions that you have identified for your future practice.

Key references

Department of Health and Social Care (2013) Integrated care and support: our shared commitment. London. Available from:https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_da

ta/file/198748/DEFINITIVE_FINAL_VERSION_Integrated_Care_and_Support_-_Our_Shared_Commitment_2013-05-13.pdf

Health and Care Professions Council (2013). Standards of proficiency for dietitians. London. HCPC. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-proficiency/dietitians/</u>

Health and Care Professions Council (2016). Guidance on standards of conduct, performance and ethics. London. HCPC. Available from:- <u>https://www.hcpc-</u>uk.org/standards/standards-of-conduct-performance-and-ethics/

National Health Service (NHS) England (2014). NHS five year forward view. NHS England, London. Available from:- <u>https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf</u>

National Institute for Health and Care Excellence (NICE) (2019) NICE pathways. NHS England, London. Available from:- <u>https://pathways.nice.org.uk</u>

Learning Activities

During this activity you will explore service user pathways across health and social care/services and gain insight into their experiences of care. Through observation you will find out more about the wider multi-disciplinary team (MDT)/service their unique skills set and their contribution to the delivery of treatment and care. How the MDT/service work collaboratively to communicate care information with service users is discussed.

a) Identifying the service user pathway

Your supervisor will identify a suitable service user and set of notes/information for this Task. Read through the service user information to identify their condition, and treatment and care they have received over the last six months. Produce a flow diagram to map the service user pathway using this information.

Use this space to map your flow diagram (You may wish to attach a separate sheet)

b) Service users experience of care

Take some time to find out about a service user's experience of care. Your supervisor will identify an appropriate service user for you to work with; this may be the same service user as in a). Remember to:-

- Introduce yourself and practice your 'meet and greet' skills
- Make sure you ask permission to talk to the service user about their experiences of health and social care
- Use the prompts below to help guide the conversation and enable the service user to recall their journey
- Remember to thank the service user for talking to you.

Please note:- You will not need to use all of these prompts, only those that are relevant to your conversation. Once started you may find the service user readily tells their story and they need very little prompting- so be sensitive to this.

Prompts:

- Can you tell me a bit about what took you to the GP/Hospital/Service?
- What happened next?
- Can you tell me a bit about any tests or investigations that you have experienced?
- Were you given any new information or was any treatment/actions suggested?
- Would you tell me a bit more about the people who have been involved in your care?
- Have you seen a dietitian or any other people who have been involved in supporting your care? Can you tell me a bit more about these experiences?
- What is it like being a service user here? Can you tell me more about any practical or social problems for you whilst being a service user here?
- Have you any idea about what is going to happen next in your treatment/Care?

Record your notes below

c) Roles and Responsibilities of other health and social care professionals in service user care

Your supervisor will identify atleast two health and social care professionals for you to work with in this Task. They may be selected as they are involved in the treatment and care of a service user that you have met earlier in a) and b). Alternatively with permission you may follow the service user as they undertake specific investigations and/or treatments.

Remember to introduce yourself to each health and social care professional, working with the service user. Observe them in their role in delivering an investigation, assessment and/or treatment. Use the prompts below to find out more about their role and responsibilities in the service users current episode of care.

Prompts

Can you tell me a bit about your role in the treatment and care of this service user?

Can you comment on the unique professional skills you feel you contributed to the service user's care?

Can you tell me a bit about your management/care plan for the service user? Have there been any difficulties in carrying this out and how has this been managed?

How do you communicate with the service user to support their experience during your intervention/treatment and care?

How does communication take place between yourself and all the other people involved in providing care for this service user?

Record your observations and notes below

• Professional 1

• Professional 2

d) Communication between the Multi-disciplinary Team and the Service user

Observe how the wider multi-disciplinary team (MDT) of health and social care professionals work together with the service user to communicate and deliver treatment and care. Your supervisor will identify an appropriate setting for this activity. The focus is on communication between the MDT and the service user.

Opportunities could include any of the following: MDT meetings, hand-over meetings, case conferences, one-to-one conversations (face to face and by telephone), service user consultations, and tools used for recording information (e.g. service user notes – written or electronic), referral information, drug charts and prescriptions, observation charts, food record charts, apps and diaries and discharge letters/templates). Use the prompts below to focus your observations.

Record your observations and notes below

• How is communication about your service user communicated between the Multi-Disciplinary Team (MDT) and the MDT and the service user?

• **Do service users see all members of the MDT?** How are decisions made about which members of the MDT the service user sees?

• What helped the communication process to deliver the service users treatment and care? Did you observe anything that hindered this communication and affected service user care? How could this be managed?

e) From this Task on the service user pathway try to reflect on one aspect that has been a key learning point for you?

Maximum 500 words

You may wish to use a reflective model to guide your reflection.

- What happened (briefly)
- What were you thinking and feeling at the time?

• What was good and not so good about the situation? What sense could you make of the situation- perhaps from others perspectives/views as well as your own?

• What can you conclude from this learning experience

• What are your action points to help you to use this experience to inform your future practice?

Task 4- Catering/ Food Provision and Supporting Nutrition

This task provides evidence for LO1 (1.3), LO2 (2.3), LO3 (3.1, 3.2)

Background and purpose

Food and beverages provided by and within any organisation are often an essential component for the health and wellbeing for service users/staff and visitors. Good quality food provision can support people to eat well for their health and wellbeing, as well as be an essential part of their treatment to maintain or improve their health and outcomes.

There are a number of national and local food and nutrition policies, guidelines and initiatives for different settings and population groups to promote the appropriate, responsive and sustainable provision of food services that meet the nutritional needs of those that require them. (BDA, 2017; DH 2015; DH 2014; School plan, 2015).

To enable dietitians and others within an organisation to meet the individual needs of those that require food and nutrition, it is essential to have the working knowledge of the food provision and the catering services, considering the roles and responsibilities of all those involved.

Communication is a key skill required within catering/food provision services to ensure that dietitians and others support diet and nutrition within their environment to meet the needs of individuals and/or population groups.

As part of this task you will be given the opportunity to discuss and present your observations and learning of the catering system and the service user experience of food provision within your placement setting.

The purpose of the workbook learning activities that are linked to Task 4 are for you to be able to:-

- Investigate and determine the catering system within the organisation, including food ordering, food types and selection, transportation, service and the role and responsibilities of staff involved within the system.
- Consider the food provision from a service user/consumer perspective, including the environment, equipment, cost and support required.
- Practice, appraise and develop your communication skills with service users/carers, HCP's and support staff/others within the organisation.
- Observe how service users are identified as requiring additional support with their food/meals selection and with eating/feeding.
- Determine how individual dietary and nutritional needs are met by the catering system.
- Reflect upon your observations and learning that you have identified and communicate this through an informal discussion with dietitians and/or others involved in the food provision/catering system.

Key references

British Dietetic Association (BDA). (2017) The nutrition and hydration digest. (2nd ed.) BDA Food service specialist group in consultation with the BDA. Birmingham. Available from:https://www.bda.uk.com/publications/professional/NutritionHydrationDigest.pdf

Department of Health (DoH), (2015). A toolkit to support the development of a hospital food and drink strategy. London. Available from:-

http://www.hospitalcaterers.org/media/1151/hospital-food-drink-strategy.pdf

Department of Health (DoH), (2014). The hospital food standards panel's report on standards for food and drink in NHS hospitals. DoH and Age UK. London. Available at :- <u>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_da</u> ta/file/523049/Hospital_Food_Panel_May_2016.pdf

The school plan, (2015). School food standards – A practical guide for schools their cooks and caterers. Available from :- <u>http://www.schoolfoodplan.com/wp-</u> content/uploads/2015/01/School-Food-Standards-Guidance-FINAL-V3.pdf

Learning Activities

During this learning activity you will undertake an in-depth exploration of the catering system/food services from both service user and staff perspectives. There are opportunities for observation of the meal service and to observe how service users who need help with eating and drinking are identified and supported. There is a focus on how those service users with additional nutritional needs are supported in your placement setting. You will be expected to evaluate your learning experience and share this through an informal discussion with Dietitians and others involved in food services.

a) The Food Journey.

Observe the food services/catering system in your placement setting. Produce a flow diagram to describe the food services/catering system; starting from meal selection to meal production then to meals being served to service users. If the food is not prepared on site adapt your flow diagram to include how and where meals are cooked, stored, transported, delivered and served to the end user. Include snacks and drinks.

Use this space for your flow diagram

b) Observation of the Catering System/Food service

Observe the food/meal service in your placement setting. Use your flow chart from a) together with the prompts below to guide your observations. Take every opportunity to discuss the questions with those responsible for food services (e.g. catering Manager and staff), the meal service (e.g. nursing staff, ward housekeepers/food assistants, dietitians) and others who support service users (e.g. informal carers, volunteers). Take care to observe the environment during the meal service- is it conducive to eating or are service users interrupted during their meal?

Take the opportunity to practice your communication skills during this activity. Remember to introduce yourself, ask permissions to discuss the catering system/food services and afterwards to thank staff/service users for talking to you.

Record your notes below.

• Menus: What types of menus/options are available for service users in this setting? Are menus/options in place to meet the needs of those with therapeutic dietary requirements? Are service users assisted in making their choices? How far in advance are menu choices completed? What is the budget allocation for food and drink per service user/day?

• Food Production: What food production system is used (e.g. cook-chill, cookfreeze, cook-serve)? Why is the food service designed this way? What temperatures are chilled or frozen items and regenerated/reheated food kept at? How many meals does the catering/food service provide on a daily basis? What are the strengths & weaknesses of this system? How is food delivered to the service user (e.g. plated service, bulk trolley etc.?

• Mealtimes: What times are meals served- breakfast, lunch and tea? Are there differences between the times when service users would like their meals and when they are served? Is the environment conducive for eating? • Snacks: What snacks and drinks are available between meals for service users (particularly nutritionally vulnerable)? Give three examples of snacks and drinks below. What mechanisms are in place to make sure service users receive these snacks?

• **Portion sizes:** How would you describe the food in terms of portion size, overall quality and presentation? Add the portion size (g) described with a handy household measure (Tablespoons) and nutrient composition protein (g) and energy (kcals) of sample meals and snacks served in your placement setting to your ready reckoner.

• Food Standards/Guidelines: Are there any standards/guidelines operating in this setting? How do these guide the nutritional composition of meals/menus and/or support service users with eating and drinking? If so, give an example from your setting.

• Service User Feedback: How is service user feedback used to inform the catering system, food and meal services?

• Food waste: Is food waste documented? Where does this occur within the food journey and what action is taken?

c) Mealtime Observation

Observe the food/meal service at two mealtimes. Observe if any service users miss or do not eat their meals. Try to identify the reasons for this by talking to service users and staff.

Practice your meet and greet skills to introduce yourself. Make sure you ask permission to discuss service users and staff experiences of the meal service and remember to thank them for talking to you. Use the prompts below to guide your discussion. Remember these are just prompts and you will not need to ask all of the questions. Select those most relevant and appropriate for your discussion. Once started you may find that service users and staff are able to provide this information in their own way and need very little prompting.

Prompts for service users:

- Can you tell me a bit about your meal? What did you have and did you enjoy it? Can you remember if you chose the meal you had today?
- Are there meals/choices on the menu that you like? Can you tell me about these?
- Were you able to eat all of your meal or is this difficult? If so, can you tell me more about this?
- Can you tell me a bit about how your condition/treatment affects your eating and drinking?
- Do you need any support with eating and drinking? If so, can you tell me a bit more about your needs?
- Do you sometimes miss meals? If so are there food/drink choices available if you are hungry or thirsty?

Record your discussions below

Prompts for discussions with Food services/Healthcare Staff

- Can you tell me a bit about the choices on the menu and how these meet service user needs? Are there some individuals who need more help with making meal selection choices?
- Can you tell me more about how the service users menu choices are ordered within the catering system?
- Do service users enjoy their meals- can you tell me more about how you gain feedback on this?
- Can you outline the roles and responsibilities of staff for serving meals, snacks and drinks to service users in this setting?
- Can you tell me more about how service users who need help with eating and drinking are identified in this setting? What support is offered at mealtimes and throughout the day? How is eating and drinking monitored in this setting?
- Helping service users to eat and drink involves practical skills. What training is available for staff to support service users with eating and drinking?
- Can you tell me more about what helps service users to eat and drink well and what factors hinder this, in this setting?

Record your discussions below

d) Observation of Feeding a Service User

Observe two service users who need support with eating and drinking. For example this may involve service users who need reminding and prompting to eat and drink or those who need assistance with eating and drinking. Your practice educator will help you to identify these service users. Try to identify the skills and techniques used by staff to:-

- Support, prompt and encourage the service user to eat and drink themselves
- Guide and assist with eating and drinking

Consider both the perspective of the person who is assisting with eating and drinking and the service user who needs support. Record your observations below and discuss these with your practice educator.

Record your observations below.

e) Supporting Nutrition

Find out about what extra food and drinks, snacks and supplements are available to support nutrition in your placement setting. List 6 examples in the Table below. Record the portion size served, the energy (kcals) and protein content (g). Talk to 2-3 service users in your setting who have been prescribed extra food and drinks. Your practice educator will help to identify these service users. Again practice your meet and greet skills to introduce yourself to the service users, ask permissions to discuss their experiences of receiving extra foods/drinks and remember to thank them for talking to you at the end of the discussion. Use the prompts below to help you evaluate extra food and drink use in your placement setting.

Extra Food, Drinks, Snacks and Supplements Available.

Extra Food, drinks, snacks and Supplements	Portion size (handy measure)	Energy (kcals)	Protein (g)
Item 1: Snack available betwee	en meals and during the eve	ening/night	
White Toast	2 slices	115	4
Butter	2 packs	52	-
Item 2:			
Item 3;			
Item 4:			
Item 5:			
Item 6:			

NB: You may wish to develop or add to a food ready-reckoner.

Prompts for discussion with service users (2)

- Can you tell me a bit more about the extra food, drinks, snacks or supplements that are prescribed for you?
- Can you say whether you always receive the extra food, drinks, snacks or supplements?
- Are you able to manage the extra food, drinks, snacks or supplements? What helps you to do this?
- How do you manage extra food, drinks, snacks or supplements at home? (if appropriate)

Record your discussion below:

Prompts for discussion with Dietitian/Catering/Support Staff (2)

- Can you tell me more about how service users who need extra food, drinks, snack or supplements are identified and supported to eat and drink these?
- Are you able practically to fortify food and drink in this setting? If, so can you tell me more about how this is carried out?
- Can you tell me more about whether the service users prescribed extra food, drinks, snack or supplements receive these? If so, do they eat and drink all of these?
- Can you tell me more about the issues that you feel affect whether service users eat and drink their extra food, drink, snacks or supplements in this setting?

Record your discussion below:

f) Informal Discussion.

You are required to facilitate an informal discussion with two or three dietitians and/or appropriate others e.g. catering/food services staff about your learning from this Task. This task can be undertaken collaboratively where there is more than one student on placement.

You should aim for your discussion to include about 20 minutes of presentation and 10 minutes for questions. The discussion is titled 'The food journey- an evaluation of the service user experience'. To help you plan and prepare your discussion use the following criteria and guidance.

- Outline how the catering system (including meal selection and service) works
- Describe the service user experience and how eating and drinking needs are supported?
- Evaluate the strengths and areas for improvement within the catering system in your placement setting.
- Conclude and make recommendations for practice
- Facilitate a discussion in a professional and engaging way which is appropriate for the audience.

You will receive feedback against these criteria to help you reflect on what went well, areas for improvement and to agree action points for your next informal discussion/presentation.

Task 5- Information Governance and Service User Information

This task provides evidence for LOs LO1 (1.1, 1.2) LO2 (2.2)

Background and purpose

HCP's including dietitians collect and use service user/carer information to inform their practice. It is essential that everyone including student dietitians have the knowledge and understanding of national and local information governance (IG) in which there is a legal framework governing the secure use of personal, confidential data in health care that is ethical and meets quality standards.

One area of IG is data security, which considers the Health Education England SMT for data security awareness, as part of the UK core skills training framework. You will have completed some SMT prior to placement A and may be required to undertake further local IG training. Areas of IG include:-

- Consent
- Records management
- Confidentiality, which considers the Caldicott principles
- Sharing and storing information
- Rights of individuals
- Good practice
- General data protection regulation (GDPR)
- Freedom of information

Your practice placement will provide an opportunity for you to observe dietitians and others using personal service user information to inform the assessment, advice and monitoring provided and communicated to service users/carers. This information may include their written and electronic health and social care records, investigations, test results, fluid balance charts, food record charts, letters and blood glucose monitoring diaries.

Dietitians as well as other HCP's are required to accurately record all of their service user consultations and correspondence with others who are also involved in their care. This requires the knowledge and understanding of both national and local IG policies together with demonstrating professional behaviours to ensure that dietitians are accountable, to protect the safety of personal information and complying with the organisations IG policies, HCPC standards and BDA guidelines. (HCPC, 2018; HCPC, 2016; HCPC, 2013, BDA, 2008).

The purpose of the workbook learning activities that are linked to Task 5 are for you to be able to:-

- Determine how dietitians meet the IG framework for their organisation and work within the HCPC standards.
- Have an awareness of the different types of service user health and care information and how this information is communicated.
- Observe how dietitians use service user information to inform their dietetic practice.
- Consider the interaction between dietitians and others such as service users/carers and HCP's and identify how, what and when this information is documented and shared.
- Observe and identify the method/s used by dietitians for documenting service user interactions and how these may be shared with the wider MDT.

• Reflect upon your learning and begin to determine your role and responsibilities as a student dietitian in obtaining, using, recording and sharing personal information in health and care records.

Key references

British Dietetic Association (BDA) (2008). Guidance for dietitians for records and record keeping. BDA. Birmingham. Available from: https://www.bda.uk.com/publications/professional/record_keeping

Care Quality Commission (2016) Safe data, safe care report into how data is safely and securely managed in the NHS. Available from: - <u>https://www.cqc.org.uk/sites/default/files/20160701%20Data%20security%20review%20FIN</u> <u>AL%20for%20web.pdf</u>

Health and Care Professions Council (2013). Standards of proficiency for dietitians. London. HCPC. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-proficiency/dietitians/</u>

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Health and Care Professions Council (2016). Guidance on conduct and ethics for students. London. HCPC. Available from:-<u>https://www.hcpc-</u>uk.org/globalassets/resources/guidance/guidance-on-conduct-and-ethics-for-students.pdf

Health and Care Professions Council (2018). Guidance on confidentiality. London. HCPC. London. HCPC. Available from:- <u>http://www.hpc-uk.org/registration/meeting-our-standards/guidance-on-confidentiality/</u>

Information Commissioners Office (ICO), (2018) Guide to the General Data Protection Regulation (GDPR) Available from:- <u>https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/</u>

NHS digital (2019) Data and information. Available from:- <u>https://digital.nhs.uk/data-and-information</u>

Learning Activities

During this learning activity you will have an opportunity to familiarise yourself with the information governance requirements for your practice setting and start to develop your ability to work within these. There is a particular focus on service user records and referral information and starting to gather relevant details from these in preparation for the dietetic consultation.

a) Information Governance in Practice. Read the Information governance policy for your Placement setting. Through structured observation of dietetic practice and discussion with your practice educator(s) identify how Dietitians and/or the Health and Social Care/Organisation meet these requirements. You will have the opportunity to observe how dietitians use information/records to inform and document the service user consultation where practice is required to align with organisational standards for defensible record keeping. You will start to develop your skills in using service user records to gather information to inform the dietetic consultation.

Record your observations to the questions below.

• How do dietitians ensure a duty of confidentiality i.e. where one person discloses information to another (in circumstances where it is reasonable to expect the information will be held in confidence) and how is this communicated to service users?

• What arrangements are in place to ensure that personal service user information (e.g. paper and electronic records) are kept safe to protect the privacy of the individual as a requirement of the General Data Protection Regulation (GDPR) (ICO,2018).

• How does health and social care/organisation ensure the security of person service user information to prevent unauthorised access, disclosure, transfer, modification or destruction whether accidental or intentional?

• Under the Freedom of Information Act (HMSO 2000) there is a requirement for greater openness and accountability for health and social care/organisations. What procedures are in place for service users to access information about themselves and their care?

• How long must health and social care/organisation keep service user records before destruction? How are records managed in your placement setting to ensure they can be accessed when needed?

b) Accessing, using and documenting in the Dietetic/Service user Record

Your practice educator will identify a set of health and social care/organisation records and a service user consultation for you to observe in this activity. Read through a set of service user notes and referral information for a service user who has been referred to the dietitian. Observe the dietitian prepare, undertake and document the consultation.

Use the prompts below to guide your observation

• Review the service user record that has been identified. Draw a diagram/plan to identify how the record is organised.

• **Observe a dietitian using a service user record prior to a consultation.** How does the dietitian prioritise and select information to inform the consultation and how is this recorded? Does the dietitian communicate with anyone else to gain additional information before the consultation?

• **Observe the dietitian undertake a service user consultation**. How does the dietitian use the information recorded earlier, during the consultation? How does the dietitian check this information and add to it during the consultation?

• After the Consultation how does the dietitian document the discussion and record any agreed service user goals and/or actions? Does the dietitian use an record keeping models/templates to help guide and standardise documentation? Are standard abbreviations used? Does the dietitian communicate with other members of the multi-disciplinary team after the consultation and for what purpose?

• The Quality of the service user record card is an important part of information governance. Use the criteria (CARROT) below to help you review the record against the following criteria:-

Complete- is it complete and continuous?

Accurate- is it free from error, legible and 'fit for purpose'?

Relevant- is it appropriate and relevant?

Reliable- does it reflect the consultation- is it current and relevant?

Output- Is it provided in an agreed format?

Timeliness- Is it completely shortly after the consultation, available when needed and easy to locate?

Record your observations below

c) Preparing for a service user consultation. Repeat the activity in b) using a new set of service user information/records for a consultation your practice educator plans to undertake next. This time try to record the important medical and social information yourself. Compare what you have recorded with what the dietitian recorded in the record. Discuss any differences with the dietitian. Be prepared to justify why you have select the information you have recorded on the record. Note any learning points below.

Record your learning points.

• 1:

• 2:

• 3:

d) Reflective discussion with your practice educator. From the Learning activities in Task 5 reflect on one area e.g. accessing and using personal information, documentation etc..) of your role and responsibilities as a student dietitian when working in your practice setting. Discuss you reflection with your Practice Educator.

Maximum 500 words

- What happened (briefly)
- What were you thinking and feeling at the time?

• What was good and not so good about the situation? What sense could you make of the situation- perhaps from others perspectives/views as well as your own?

• What can you conclude from this learning experience

• What are your action points to help you to use this experience to inform your future practice?

Task 6- Dietary Assessment

This task provides evidence for LO2 (2.1, 2.2, 2.3, 2.4), LO3 (3.2)

Background and purpose

Dietary assessment is fundamental for all aspects of dietetic practice. Dietary assessment for dietitians often involves the working 'fingertip' knowledge of food and fluid types, portions sizes, macronutrient content and frequency of consumption to be effective in providing accurate information and advice. To obtain accurate dietary information, effective communication and numeracy skills are essential to be able to obtain, analyse and interpret the information to tailor the dietary advice to the individual.

Dietitians routinely undertake and analyse dietary assessments using a variety of information sources, using a 'typical day' or 24 hour dietary recall methods from service users/carers, food record charts/diaries and from other HCP's involved in the care of the service user.

The information sources dietitian use for dietary assessment may vary in both type and level of detail, depending upon factors such as time available, environment and health literacy. Dietitians are often required to adapt and be flexible in the dietary assessment method used to inform the advice provided to service users/carers.

Dietary assessment is routinely undertaken in dietetic practice, and forms part of the BDA's process for nutrition and dietetic practice to inform and justify the advice provided to service users/carers and other HCP's involved in their care (BDA, 2012).

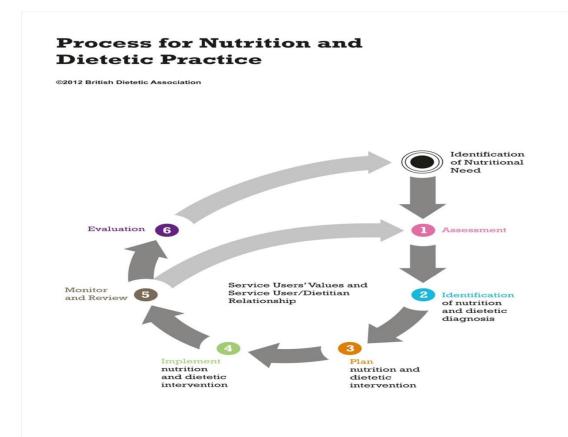


Figure 2 - The model and process for nutrition and dietetic practice, BDA 2012.

In practice, dietitians are often required to provide dietary advice using 'finger tip' knowledge of portions sizes and estimate the nutritional content of foods/fluids such as protein and energy.

This task will provide the opportunity to observe dietitians undertaking dietary assessment in practice and enable you to begin to develop your dietary assessment knowledge and skills.

The purpose of the workbook learning activities that are linked to Task 6 are for you to be able to:-

- Observe and practice undertaking dietary assessments from a variety of service users/carers and others as part of the model and process for nutrition and dietetic practice.
- Practice, appraise and develop your communication skills with service users/carers, HCP's and others within the organisation.
- Obtain and analyse service user dietary assessment information.
- Develop your 'finger tip' knowledge of the micronutrient content of food and fluids and begin to interpret the information.
- Reflect upon your learning and to develop your knowledge and skills that are required for undertaking dietary assessment.

Key references

British Dietetic Association (BDA), (2012, updated 2016). Model and process for nutrition and dietetic practice. BDA, Birmingham. Available from :- https://www.bda.uk.com/publications/professional/model_and_process_for_nutrition_and_dietetic_practice_

Gandy, J. (ed) (2014) Manuel of dietetic practice. (5th ed.). BDA, Birmingham. Wiley Blackwell. Oxford.

Learning Activities

This learning activity will enable you to undertake structured observation of dietetic consultations from both the dietitians and service user perspectives. Reflecting on practice will support you as you start to develop your skills focusing initially on dietary assessment and analysis. You are encouraged throughout to develop fingertip knowledge of food portion sizes and the macronutrient content of foods using and adding into your food ready reckoner throughout these activities. Finally you will have an opportunity to start to bring your communication skills together with dietary assessment and analysis skills in taking typical day dietary assessment with service users comparing your results to the dietitians and their estimations of nutritional requirements.

a) Observation of a Dietetic Consultation- Dietitian's Perspective. Undertake a structured observation of a service user consultation. Try to focus on what was said as well as the communication skills/techniques used.

Record your observations using the prompts below

• How did the dietitian start the consultation? What do you think were the reasons for this?

• How did the dietitian make the service user feel more at ease?

• What information did the dietitian try to obtain from the service user? What communication skills did the dietitian use to encourage the service user to talk about their diet?

• Were there any challenges in obtaining information? How did the dietitian overcome these? How did the dietitian prompt the service user for more detailed dietary information

• Did the dietitian mange to build a rapport with the service user? If so how?

• How did the dietitian identify whether the service user was ready to make dietary changes?

• Did the dietitian agree any targets or goals with the service user? How was this achieved?

• How did the dietitian work within the HCPC (2016) Code of Conduct, Performance and Ethics?

• Record any significant learning points from this observation?

b) Observation of a Dietetic Consultation- Service Users Perspective. Undertake a structured observation of a service user consultation as in a). This time try to focus on the service user throughout the consultation.

Record your observations using the prompts below

• How was the consultation started? Did the dietitian put the service user at ease? If so, how?

• How did the service user seem when they were first met by the dietitian?

• Can you describe any changes in body language (non-verbal communication) in the service user as the introduction took place and then as the consultation progressed?

- Do you think the service user understood the reason for being prescribed the diet?
 - At the beginning of the consultation?
 - By the end of the Consultation?

What makes you think this?

• Were targets or aims agreed with the service users? Describe how this was done?

• Do you think the service user was ready to make the changes? Why?

• How did the dietitian work within the HCPC (2016) Code of Conduct, Performance and Ethics?

• Record any significant learning points from this observation?

c) Practising Dietary Analysis Skills

Food record charts, food diaries and dietary apps are all used to monitor service users' intakes of food and drink. Your practice educator will identify 3 records of dietary information for you to use in this activity. Use the information to estimate the amount to food and drink consumed. You may wish to use a 'food ready reckoner' to help you convert handy measures to weights and volumes. Use this information to help you to estimate the energy (kcals) and protein (g) content of the intake consumed. Repeat this activity atleast 3 times to develop your estimation and dietary analysis skills throughout the placement. Your practice educator will also estimate and analyse these intake records and you will be able to compare your results with your supervisor.

Record your analysis using the Tables below.

Food & fluid recorded using handy measure	Portion size (g) or (ml)	Energy (kcals)	Protein (g)
handy measure Medium bowl Krispies	30g	110	2
Mílk- semí-skímmed	200ml	90	6
Totals			

Food and Drink Chart 1

Food and Drink Chart 2

Food & fluid recorded using handy measure	Portion size (g) or (ml)	Energy (kcals)	Protein (g)
Totals			

Food and Drink Chart 3

Food & fluid recorded using handy measure	Portion size (g) or (ml)	Energy (kcals)	Protein (g)
Totals			

d) Practising Dietary Analysis Skills

Your practice educator will identify 3 service users for you to start to practice your dietary assessment and analysis skills. Introduce yourself to the service user and practice your meet and greet skills. Make sure you ask permission for the service user to discuss their diet with you. Use your communication skills and learning from the activities in a), b) and c) to gather the relevant dietary information. Remember to thank the service user for talking to you.

Record the dietary assessment information using the Tables below and analyse these for each macronutrient. Continue to build your knowledge of food portion sizes and the macronutrient content of food from university. Remember to develop your 'Food ready Reckoner' as you gain new knowledge and information about food portion sizes and the macronutrient content of food and fluid.

After each service user reflect on your practice skills. Discuss this activity with your practice educator throughout the exercise to inform your ongoing development of your skills. This should include a comparison of your results to the estimated requirements for energy and protein that your supervisor will advise.

Item	Portion size (g) or (ml)	Energy (kcals)	Protein (g)	Fat (g)	CHO (g)

Assessment and Analysis 1.

Reflection on First service user dietary assessment and analysis

Use your reflection to inform practice with the next service user.

Assessment and Analysis 2

Item	Portion size (g) or (ml)	Energy (kcals)	Protein (g)	Fat (g)	CHO (g)

Reflection on Second service user dietary assessment and analysis

Use your reflection to inform practice with the next service user.

Assessment and Analysis 3

Item	Portion size (g) or (ml)	Energy (kcals)	Protein (g)	Fat (g)	CHO (g)

Reflection on Third service user dieta	ry assessment and analysis
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Use your reflection to inform future practice.
What aspects of dietary assessment and analysis do you need to develop next? Use you learning from this activity to inform discussion of your dietary assessment and analysis skills with your practice educator.
1)
2)
3)

Task 7- Professionalism

This task provides evidence for LO4 (4.1. 4.2), LO 5 (5.2, 5.3, 5. 4), and LO6 (6.2)

Background and purpose

The word 'Dietitian' is a protected title, in which professionals must be registered with the HCPC to use the title. To achieve and maintain HCPC registration, dietitians must demonstrate that they meet the standards of conduct, performance and ethics (HCPC, 2016) and standards of proficiency for registered dietitians (HCPC, 2013). All British Dietetic Association (BDA) members (including student dietitians) are also bound by the code of professional conduct, which is based on three core standards; values, practice, knowledge and skills (BDA, 2017).

Professionalism is a term used for a broad range of behaviours, characteristics, attitudes and values that are expected of dietitians (including student dietitians) in all areas of professional practice that meet and maintain the standards and requirements from the HCPC and BDA (HCPC, 2016; 2013; BDA, 2017).

Professionalism is often a term used for a broad range of observed behaviours that are distinct from an individual's ability and/or professional identity (HCPC, 2014). These professional behaviours may relate to:-

- how individuals communicate with service users/carers and others.
- respecting service users/carers and colleagues needs, beliefs and opinions.
- appearance and adhering to a dress code.
- outside of work activities and the use of social media.
- being open, honest and trustworthy.

Consent is written and/or verbal permission provided by a dietitian or other HCP to service users/carers after receiving all the information they reasonably need to make a decision to provide an examination, care or treatment (HCPC, 2016). Consent should be voluntary and informed, whilst considering the individuals capacity to make an informed decision (NHS.UK, 2016).

This task will provide the opportunity to observe dietitians and other HCP's behaviours, characteristics and attitudes that are essential for professional practice.

The purpose of the workbook learning activities that are linked to Task 7 are for you to be able to:-

- Reflect upon the significance of the professional HCPC standards for dietetic practice and as a student dietitian.
- Considering the HCPC standards, observe dietitians and other HCP's professional behaviours, attitudes and values in practice and reflect upon them.
- Recognise the importance and process of obtaining and recording consent from service users/carers.
- Practice, appraise and develop your communication skills with service users/carers, HCP's and others within the organisation.
- Reflect upon your own professionalism and consider any actions that you or others have identified for your future practice.

Key references

British Dietetic Association (BDA) (2017). Code of professional conduct. BDA. Birmingham. Available from:-

https://www.bda.uk.com/professional/practice/professionalism/code_of_conduct

Health and Care Professions Council (2016). Guidance on standards of conduct, performance and ethics. London. HCPC. Available from:- <u>https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/</u>

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National Health Service (NHS) (2016) Overview – consent to treatment. NHS, London. Available from:- <u>https://www.nhs.uk/conditions/consent-to-treatment/</u>

Learning Activities

During this activity you will have an opportunity to shadow dietitians and those who work with the Nutrition and dietetic Team. Throughout these observations your will focus specifically on how dietitians work within the HCPC (2016) Standards of Conduct, Performance and Ethics and local department/organisational guidelines and their ability to work as autonomous professionals. Particular attention is placed on the issues on consent and sharing information, and to equality and diversity ensuring equity of practice for all service users. These activities support you to gain a deeper insight into Dietetic practice and the next steps for your professional development.

a) Observation/Shadowing of Dietetic Practice. Dietitians work collaboratively across health and social care and other organisations in delivering nutrition and dietetic work. Within a service dietitians have different roles and responsibilities in a range of practice settings working with service user groups/communities. They have varying expertise and work at different levels determined by the skills and competencies required to do their job. Your supervisor will identify suitable opportunities for you to compare and contrast the different roles and responsibilities of dietitians together with other staff who work within/support the Nutrition and Dietetic service.

Record your observations below.

• Identify the areas of practice where dietitians and assistants are working within your placement setting.

• How do roles and responsibilities of Band 5 dietitians differ from specialist dietitians (Band 6 and 7)?

• Outline the roles and responsibilities for a dietetic/nutrition assistant. How is this different from a Band 5 dietitian?

• How do dietitians work collaboratively with others to take forward Nutrition and Dietetic work within your placement setting?

b) **HCPC (2016) Standards of Conduct, Performance and Ethics.** Read through these standards. Using these together with your observations of practice, consider the statements below.

Record your observations below.

• Why are these standards necessary for practice?

• Give an example drawing on your observations, of how anti-discriminatory practice is applied within your practice setting?

• Why is it important to be person centred in healthcare practice? Give an example of where you have observed the service user's perspective being taken into account?

- Comment on the following statements with reference to the HCPC standards and local guidance within your practice setting.
 - 1) A dietitian is given a gift by a thankful service user. The dietitian accepts it gratefully. Is this acceptable practice?

2) A student dietitian shares information about a service user consultation that didn't go well with peers on a Whatsapp group. Is this acceptable practice?

3) A busy dietitian asks a dietetic assistant to assess a service user for enteral feeding and to start to write up a suitable feeding regime. Is this acceptable practice?

c) The Dietitian as an Autonomous Practitioner: Using the relevant HCPC standards, your observations from practice and discussions with your practice educator, explore the role of Dietitians as autonomous practitioners who are responsible for their own professional judgement, decision making and practice

Record your observations below.

• Are Dietitians able to undertake clinical procedures such as passing a nasogastric tube, checking a gastrostomy site, adjusting insulin regimes?

• Are dietitians able to prescribe independently of a medical or dental practitioner? What level of prescribing practice do dietitians have?

• A member of staff asks the dietitian for advice regarding the dietary management of their coeliac disease. How should the Dietitian respond?

d) Obtaining Consent for Treatment and Sharing Information. A service user who is able to give 'informed consent' is able to consider all the information, have an opportunity to ask questions to clarify understanding and to give consent for treatment or refuse. Dietitians must obtain informed consent for treatment and for sharing service user information. Using the relevant HCPC standards, your observations from practice and discussions with your practice educator consider the issues arising in obtaining consent for treatment and in sharing information.

Record your observations below

• Give two examples where consent in any form cannot be given by the service user. How is a decision for treatment made in these situations?

• Give an example from dietetic practice of implied consent for treatment and an example where written consent would be needed?

• A service user's relative telephones the dietitian to ask about their diet for treatment of a chronic condition. How should you respond?

• Can a dietitian insist that a service user is given a therapeutic diet as it is in their best interests if it is against their best wishes?

• You are presenting a case study to a small group of dietitians as part of your placement assessment. This contains identifiable information regarding the service user. Why is it necessary to obtain service user consent before the presentation? If this consent had not been given how would you need to change your presentation?

e) **Equality and Diversity of Practice.** Review how the dietetic service meets the needs of a diverse population to ensure equity is achieved. Provide a short summary on the resources available to the Dietetic Service/Placement setting to meet the needs of a diverse population. Remember to draw on any policies, procedures or service design that disadvantages specific individuals/communities e.g. literacy and reading age, size of chairs in waiting rooms etc..

Record your observations below.

f) Dietetic Practice. You are required to reflect on, Dietetic Practice. Draw on your observations and learning from the Placement to inform your work.

Maximum 500 words

• Briefly what is dietetic practice?

• What are your thoughts/feelings about practice having started to experience this and develop your skills?

• What was good and not so good about the experience? What sense can you make of this e.g. Was it typical of practice or were you working in a specialist area/Organisation?. Refer to the views/opinions of others working in the service, your practice educator, peers.

- What can you conclude about dietetic practice from this learning experience
- What are your action points to help you prepare for future practice?